

PROPOSED COURSE

SUBSTANCE ABUSE: INTERVENTION AND PREVENTION STRATEGIES

Summer 2015

COURSE INSTRUCTOR

Dr. Lin Fang

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COURSE DESCRIPTION

This 1-week intensive course presents theoretical explanations, research evidence, and intervention approaches related to substance abuse intervention and prevention from a Canadian and international perspective. Students will learn the causes of substance abuse from neurological, psychological and social perspectives, as well as strategies to prevent the onset of the abuse, and intervene with the client systems. This course aims to broaden students' scope of knowledge on substance abuse treatments, with a specific attention on trauma-informed care, harm reduction, and motivational interviewing. The instructor will combine dyadic lectures with class discussion, experiential exercises, and video presentations. Opportunities for hands-on practice will be incorporated in the course.

LEARNING OBJECTIVES

By the completion of this course, the student will be able to:

- 1) Develop an understanding of the multi-faceted causes and effects of substance abuse
- 2) Develop a knowledge base of models and theories that conceptualize substance abuse
- 3) Develop a understanding of methods to prevent substance use at different levels
- 4) Increase the ability to assess the continuum of substance use disorders
- 5) Demonstrate an understanding of major treatment models and intervention strategies for substance abuse

COURSE ASSIGNMENTS

1. Class participation: 10%

Students' active participation in the course is important to the course success. Students are expected to prepare for classes by reviewing the assigned readings, and they are expected to attend and participate in class discussions drawing on those readings and their experiences. In all class interaction, there is an expectation that people will be respectful and open to learning from each other.

2. Reading Reflections: 30%

Students are expected to submit three 2-page double-spaced reading reflections. Each weighs 10% of the grade. The three reflections should be based on a required or a recommended reading from three different days of this course.

In the reflection entry, students should identify parts in the paper that are challenging or meaningful, and stress the reflections on a few significant points. Students are also encouraged to relate their personal and professional experiences, balanced with the literature. It is appropriate to use first person “I” in the paper. The reading reflections are due prior to the beginning of the course.

3. Final paper: 60%

Two case scenarios will be distributed the beginning of the class. Students are required to select one case, and design either a prevention strategy or intervention plan based on the information provided in the scenario. Specific instructions for this assignment will be provided in class. This assignment is due two weeks after the completion of the course.

CRITERIA FOR GRADING ASSIGNMENTS

- Adherence to expectations for the assignment
- Evidence of an understanding of the complexity of issues encountered by people with the problem area chosen
- Evidence of support in the professional literature
- Evidence of the ability to integrate theory and direct practice
- Clarity of writing

ACADEMIC DISHONESTY & PLAGIARISM

Students in graduate studies are expected to commit to the highest standards of integrity, and to understand the importance of protecting and acknowledging intellectual property. It is assumed that they bring to their graduate studies a clear understanding of how to cite references appropriately, thereby avoiding plagiarism. Common examples of problematic academic practices that lead to consequences for plagiarism include:

- Copying and pasting from an source and providing a citation but forgetting to put quotation marks around the content;
- Using material from a source and making changes in specific words or sentence structure but not citing the original source.
- Using ideas from a source without citing the original source.

ELECTRONIC DEVICES IN THE CLASSROOM

Non-academic use of electronic devices is distracting and seriously disrupts the learning process for everyone. In consideration of your classmates and your own learning, please do not use laptops or other types of electronic devices for anything other than note taking. Instructors prefer that you receive no text messages during class time. Please set your

cell phone or pager to vibrate only. If you must be on call for an emergency, please let your home or office know that you are only available for emergencies that no one else can handle.

COURSE SCHEDULE AND READINGS

Day	Topics	Readings (An asterisk “*” indicates required readings)
1	Introduction <ul style="list-style-type: none"> • Causes of substance abuse • Functions of substance abuse 	*Gifford, E., & Humphreys, K. (2007). The psychological science of addiction. <i>Addiction</i> , 102(3), 352-361. *Durrant, R., Adamson, S., Todd, F., & Sellman, D. (2009). Drug use and addiction: Evolutionary perspective. <i>Australian and New Zealand Journal of Psychiatry</i> , 43(11), 1049-1056. Farrell, M., & Marshall, E. J. (2006). Epidemiology of tobacco, alcohol and drug use. <i>Psychiatry</i> , 5(12), 427-430. Finch, E., & Welch, S. (2006). Classification of alcohol and drug problems. <i>Psychiatry</i> , 5(12), 423-426.
	Theories and models of substance abuse	*DiClemente, C. C., Schlundt, D., & Gemmell, L. (2004). Readiness and stages of change in addiction treatment. <i>The American Journal on Addictions</i> , 13(2), 103-119. *Hser, Y.-I., Longshore, D., & Anglin, M. D. (2007). The life course perspective on drug use: A conceptual framework for understanding drug use trajectories. <i>Evaluation Review</i> , 31(6), 515-547. DiClemente, C. C. (2013). Paths through addiction and recovery: The impact of spirituality and religion. <i>Substance Use & Misuse</i> , 48(12), 1260-1261. Wanigaratne, S. (2006). Psychology of addiction. <i>Psychiatry</i> , 5(12), 455-460.
3	Prevention strategies: Addressing the risk and protective factors	*Cleveland, M. J., Feinberg, M. E., Bontempo, D. E., & Greenberg, M. T. (2008). The role of risk and protective factors in substance use across adolescence. <i>Journal of Adolescent Health</i> , 43(2), 157-164. *National Institute on Drug Abuse. (2002). Preventing drug use among children and adolescents (2nd ed.). Bethesda, MA: National Institute on Drug Abuse. Fang, L., & Schinke, S. P. (2013). Two-year outcomes of a randomized, family-based substance use prevention trial for Asian American adolescent girls. <i>Psychology of Addictive Behaviors</i> , 27, 788-798. Okamoto, S., Kulis, S., Marsiglia, F., Holleran Steiker, L., & Dustman, P. (2014). A continuum of approaches toward developing culturally focused prevention interventions: From adaptation to grounding. <i>The Journal of Primary Prevention</i> , 35(2), 103-112.

		Schiff, M., & Fang, L. (2014). Adolescent substance use in Israel: The roles of exposure to political traumas and posttraumatic stress symptoms. <i>Psychology of Addictive Behaviors, 28</i> (2), 453-463.
4	Assessment and Interventions	<p>*Jozaghi, E., & Andresen, M. M. (2013). Should North America's first and only supervised injection facility (InSite) be expanded in British Columbia, Canada? <i>Harm Reduction Journal, 10</i>(1), 1.</p> <p>*Keaney, F. (2006). Assessment and screening. <i>Psychiatry, 5</i>(12), 431-436.</p> <p>*Substance Abuse and Mental Health Services Administration. (2014). SAMHSA's concept of trauma and guidance for a trauma-informed approach. Rockville, MD: Substance Abuse and Mental Health Services Administration.</p> <p>Collins, S. E., Clifasefi, S. L., Dana, E. A., Andrasik, M. P., Stahl, N., Kirouac, M., . . . Malone, D. K. (2012). Where harm reduction meets housing first: Exploring alcohol's role in a project-based housing first setting. <i>International Journal of Drug Policy, 23</i>(2), 111-119.</p> <p>Einstein, S. (2007). Harm and risk reduction: History, theories, issues, and implications. <i>Substance Use & Misuse, 42</i>(2-3), 257-265.</p> <p>Fonseca, F., Gilchrist, G., & Torrens, M. (2012). Integrating addiction and mental health networks to improve access to treatment for people with alcohol and drug-related problems: A qualitative study. <i>Advances in Dual Diagnosis, 5</i>(1), 5-14.</p> <p>Potier, C., Lapr�v�te, V., Dubois-Arber, F., Cottencin, O., & Rolland, B. (2014). Supervised injection services: What has been demonstrated? A systematic literature review. <i>Drug and Alcohol Dependence, 145</i>(0), 48-68.</p> <p>Rekart, M. L. (2005). Sex-work harm reduction. <i>The Lancet, 366</i>(9503), 2123-2134.</p> <p>Skinner, W. (2009). Treating concurrent disorders: Preface. In W. Skinner (Ed.), <i>Guide for counselors: Approaching concurrent disorders</i> (pp. xi-xvii). Toronto: CAMH.</p>
5	Relapse prevention/Termination Skill practice	<p>*Center for Substance Abuse Treatment. (1999). Chapter 3—Motivational Interviewing as a Counseling Style <i>Enhancing Motivation for Change in Substance Abuse Treatment</i>. Rockville, MD: Substance Abuse and Mental Health Services Administration (US). http://www.ncbi.nlm.nih.gov/books/NBK64964/?report=printable</p>

		<p>*Miller, W. R., & Rollnick, S. (2009). Ten things that Motivational Interviewing is not. <i>Behavioural and Cognitive Psychotherapy</i>, 37(02), 129-140.</p> <p>Brorson, H. H., Ajo Arnevik, E., Rand-Hendriksen, K., & Duckert, F. (2013). Drop-out from addiction treatment: A systematic review of risk factors. <i>Clinical Psychology Review</i>, 33(8), 1010-1024.</p> <p>Witkiewitz, K., & Marlatt, G. A. (2004). Relapse prevention for alcohol and drug problems: That was Zen, this is Tao. <i>American Psychologist</i>, 59(4), 224-235.</p>
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