I. Course Description
CNEP 5313. Theories and Techniques in Substance Abuse Counseling. Three semester hours. This course covers theories and techniques in substance abuse and chemical dependency as well as advanced strategies in treating substance abuse and chemical dependency/addictions. The student will learn about intervention, assessments, interview and counseling techniques, treatment planning, treatment strategies, relapse prevention, sustained recovery maintenance, multicultural, sexual, and current professional issues related to chemical dependency counseling. Prerequisites: CNEP 5312

II. Course Rationale
This course will provide the student with a basic framework for understanding substance abuse and chemical dependency/addictions and advanced strategies in treating substance abuse and chemical dependency/addictions. Both theory and practice will be emphasized. The course is applicable for all students who may work with various types of substance abuse, chemical dependency and addiction treatment settings.

III. State Adopted Proficiencies
A. The counselor understands addiction counseling theories, models and strategies.
B. The counselor works collaboratively to implement a program that helps clients to learn coping, problem-solving, and decision-making skills.
C. The counselor promotes the dignity, worth, individuality and potential of all members of a learner centered community.
D. The counselor practices active listening

IV. TExES Competencies
A. 005 The counselor designs and implements instructional activities that are developmentally appropriate.
B. 006 The counselor knows a variety of strategies for establishing rapport.
C. 006 The counselor applies a variety of counseling theories when addressing learner’s concerns.
D. 006 The counselor uses principles of counseling to facilitate the growth of learners.
E. 007 The counselor helps learners by helping them set goals.

V. Course Objectives and Outcomes: This course is designed to meet CACREP standards
A. CACREP Standards
   FOUNDATIONS
   A. Knowledge
5. Understands a variety of models and theories of addiction related to substance use and other addictions.

7. Recognizes the potential for substance use disorders to mimic a variety of medical and psychological disorders and the potential for medical and psychological disorders to co-exist with addiction and substance abuse.

8. Understands factors that increase the likelihood for an individual, community, or group to be at risk for, or resilient to, psychoactive substance use disorders.

COUNSELING INTERVENTION AND PREVENTION

C. Knowledge

1. Knows the principles of addiction intervention, consultation, education, and outreach.

2. Knows the philosophies, practices, policies, and outcomes of models of treatment, recovery, relapse prevention, and continuing care for addiction and other substance-related problems.

4. Understands the role of spirituality in the addiction recovery process.

ASSESSMENT

G. Knowledge

1. Understands various models and approaches to clinical evaluation for addiction, including screening and assessment for addiction, diagnostic interviews, mental status examination, symptom inventories, and psychoeducational and personality assessments.

2. Knows specific assessment approaches for determining appropriate level of care for addiction problems.

3. Understands assessment of biopsychosocial and spiritual history and needs as well as family psychiatric, significant medical, and addiction histories.

H. Skills and Practices

1. Selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment planning with an awareness of cultural bias in the implementation and interpretation of assessment protocols.

RESEARCH AND EVALUATION
DIAGNOSIS

K. Knowledge

3. Understands the established diagnostic criteria for substance use disorders and describes treatment modalities and placement criteria within the continuum of care.

B. Learning Outcomes include the following:
   1. Students will demonstrate clinical interview methods including motivational interviewing and the CLISD-PA Model (Juhnke, 2002) as evidenced by class exercises and performance on project.
   2. Students will identify diagnostic criteria and treatment strategies for chemical dependency addictions and substance abuse diagnoses as evidenced by Quizzes/final exam, performance on project/case study, and research paper.
   3. Students will understand the role of pharmacotherapy in treating addictions as evidenced by performance on quizzes and final exams.
   4. Students will be introduced to professional issues that impact the treatment of addictions as evidenced by lecture content, assigned readings, and project/case study, presentation and research projects.
   5. Students will understand the various models of treating substance abuse and chemical dependency addictions, including the role of spirituality, as evidenced by quizzes/exams, project/case study/presentation, and course materials.
   6. Students will identify issues related to co-occurring disorders related to substance abuse and chemical dependency addictions as evidenced by quizzes/exams, project/case study/presentation, and course materials.
   7. Students will demonstrate knowledge of treatment planning and intervention related to substance abuse and chemical dependency addictions as evidenced by quizzes/exams, project/case study/presentation, and course materials.
   8. Students will demonstrate knowledge of treatment planning and intervention as related to relapse prevention and managing the relapse process and maintaining sustained recovery as evidenced by quizzes/exams, project/case study/presentation, and course materials.
   9. Students will become familiar with various treatment settings for addressing substance abuse and chemical dependency addictions as evidenced by quizzes/exams, project/case study/presentation, and course materials.
  10. Students will become familiar with evidence-based practices in treating substance abuse and chemical dependency addictions as evidenced by quizzes/exams, project/case study/presentation, and course materials.
  11. Students will become familiar with competencies/qualification for Texas LCDC.

VI. Course Topics
   A. Develop knowledge, skills and practice in diagnosis and treatment planning in Substance Abuse, Chemical Dependency and addiction counseling
   B. Develop understanding of DSM-IV diagnostic criteria for dependence/addictions.
   C. Identifying Assessment Tools and Interventions
   D. Client Diversity
   E. Treatment Collaboration for Coexisting Medical, Psychological, and Social Problems
F. Substance Abuse and Dependency Documentation Criteria
G. Discharge Planning and Aftercare

VII. **Instructional Methods and Techniques**
   A. Lecture
   B. Group Participation—Discussion involving small groups and entire class
   C. Multi-Media
   D. Guest Speakers
   E. Demonstrations and modeling
   F. Practical application for experiential based learning

VIII. **Evaluation and Grade Assignment**
   A. Method and Percentage of Final Course Grades each Assessment Constitutes:
      1. **Traditional Assessment**
         a. **Term Project:** A research project structured to pull together class activities, and various theories, philosophies and practices is required.
         b. **Quizzes/Tests:** Tests covering objectives contained in handouts, library materials, presentations, films, and the texts will be at the discretion of the instructor and will be completed at the time they are announced. They will cover the material to be discussed that evening and there will be no make-up tests. The grade for the tests will fall under Attendance and Participation.
      2. **Performance Assessment**
         a. **Attendance:** Due to the nature of the course, attendance and participation at each class session is important and required. Students missing more than 1 class session will not be eligible for an “A”, and those missing 3 or more will not be eligible for a “B” in the course.
         b. **Participation:** This class is designed to be a seminar. Each person will be encouraged to participate in all learning activities. Students will be provided choices in order to address their learning style and comfort with self-disclosure. You will be expected to willingly participate as a leader and active participant. It is important that you self-disclose your experiences with addictions counseling for others to benefit from your experiences. You are not being asked to divulge any information in regards to your own recovery or anyone else’s. Anonymity is imperative for any 12-step program and will not be violated in class if at all possible. Confidentiality will be stressed in class; however, it cannot be guaranteed. Please consider these issues as you participate in class discussion. Although this class will touch on self-discovery, it is important to understand that class discussion cannot be about you and your issues. If issues that need attention do present themselves you are asked to discuss these issues with counselors provided at no cost to you at the University Counseling Center located in Driftwood Hall (825-2703). If you don’t feel you can participate fully in the seminar format of this class, you should NOT BE ENROLLED IN CNEP 5390 at this time.
         b. **Journal Articles and Log:** The APA bibliography format will be followed for Journal Articles (see appendix B). A log or journal
summarizing your experiences in this class will be completed. A minimum of one entry should be made after each class session. The entry should be a description of what you learned during that session, your thoughts, feelings and reactions to the material covered, situations, and self. Please do not write a verbatim account of events that occurred during the class session. Do not identify other class members by name.

B. Grading Scale and Percentages

1. Final grades will be based on the following:
   a. Attendance 20%
   b. Participation & Tests 20% - performance assessment
   c. Term Project: Case Study 20%
   d. Journal Article Research 20%
   e. Personal Daily Log/Journal 20%

2. Attendance will be measured by roll at the beginning of each class.

3. Participation & Quizzes/Tests will be measured in the following manner.
   a. Pop quizzes and tests will be administered at the discretion of the instructor/presenter as determined to be necessary to insure compliance of reading assignments and comprehension of subject matter.
   b. Participation will be measured by the instructor soliciting input from other students regarding your contributions to classroom and team/group activities. In other words, you will be evaluated by fellow students. We will embrace a collaborative rather than a competitive model for team/group interactions. The “core conditions” of unconditional positive regard, empathy and genuineness will be practiced at all times. Over all class participation will be determined by a score assigned by the instructor based upon input from the entire class and one’s self-evaluation. At the end of the course, all class members will submit a list of major participants (at least three persons) with corresponding brief descriptions of their contributions. Each person will score his or her own level of participation, providing a paragraph in support of the rating. The instructor will review the lists and contributions and compile anonymous feedback for participants and assign a grade for participation. The instructor and each student will use the following criteria to rank participation:
      90-100 points: Made significant contributions and offered input during each class meeting
      80-90 points: Made one or more significant contributions and offered input during half of the class meetings
      70-79 points: Offered input during at least half of the class meetings
      60-69 points: Offered input during less than half of the class meetings
      <60 points: Rarely offered input during class meetings

2. Term Project: Case Study (see grading rubric)
   a. The student will prepare a Case Study of a client who will represent the addiction of your research and presentation and you will be paired with a class member who will assume the role of that individual client.
   b. The student will conduct a clinical interview for the class to see using one
of the models discussed in class.
c. The student will identify the model and assessment used for that client.
d. The student will create an integrative summary (see Appendix A).
e. The student will create a treatment plan with the following information:
   i. Presenting problems
   ii. Treatment goals
   iii. Measurable objectives for each goal
   iv. Method of evaluating treatment effectiveness (How will you know what you are doing is working?)
f. Students will be required to complete a case presentation inclusive of:
   i. Description of the symptoms and dynamics reported, including and DMS-IV(TR) diagnoses that may be present.
   ii. Theoretical interpretation of the problems
   iii. Description of the systemic factors that may be contributing to the presenting problem
   iv. Recommendations for intervention/treatment
   v. Any ethical issues that may be present in the case.

6. **Journal Article Research** See grading rubric:
   a. The purpose of this assignment is to provide a format for you to investigate recent literature on a topic or topics within the area of addictions counseling. Limit yourself to material published since 2005.
   b. You will be required to turn in five (5) summaries of your own choosing from peer-reviewed journals.
   c. Make a complete concise summary (3-5 sentences) of the article and research findings. Following the summary, include another concise paragraph (also 3-5 sentences) containing your personal evaluation of the Journal Article.
   d. You may use five (5) 5x8 index cards, one card for each article to complete your summary and personal evaluations. If you want to use your computer and you do not want to use index cards, you may use letter size sheets of paper to complete your summary and personal evaluations. Please place two (2) summaries on each page for the letter size paper.
   e. A complete bibliographical reference following the APA format will be at the top of each card preceding the article summaries for each article (Author, title, date, journal, etc...) An example is:


   f. Make a copy for yourself, if you desire, as the original will not be returned.
   g. Provide a cover index card or page containing the course number (CNEP 5390), course title (Advanced Strategies for Addictions Counseling), academic term (Sum II, 2010) and your name. Bind index cards together with a staple or clip pages together.
   h. Evaluation will focus on appropriateness of selection, correctness of form, style of presentation, richness and accuracy of content and personal evaluation.
i. Project turned in after due date will drop 1 grade point.

7. **Journal/Log:** A log or journal summarizing your experiences in this class will be completed after each class session. A minimum of one entry should be made for each class session. The entry should be a description of what you *learned about yourself* during that session. The entry may include your thoughts, feelings and reactions to the material covered and how it may relate to your journey of self-discovery. Please do not evaluate the class, presenter, other students or write a verbatim account of events that occurred during the class session. You are writing about you. If you write about your reaction to another student or a class discussion please do not identify that student or any other class members by name. This journal will be turned in for grading at the end of the course.

**IX. Tentative Course Schedule & Policies**

<table>
<thead>
<tr>
<th>Date</th>
<th>Reading</th>
<th>Assignment/Presentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/30/11</td>
<td></td>
<td>Introduction, Course Overview, Review Syllabus and course requirements;</td>
</tr>
<tr>
<td>9/6/11</td>
<td>Juhnke ch. 1</td>
<td>An overview of assessment in addiction counseling</td>
</tr>
<tr>
<td>9/13/11</td>
<td>Juhnke Ch. 2</td>
<td>DSM-IV-TR Substance Abuse Disorders</td>
</tr>
<tr>
<td>9/20/11</td>
<td>Juhnke ch. 3</td>
<td>Individual Clinical Interviews</td>
</tr>
<tr>
<td>9/27/11</td>
<td>Juhnke ch. 4</td>
<td>Significant other interviews</td>
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<tr>
<td>10/4/11</td>
<td>Juhnke ch. 5</td>
<td>Standardized assessment in addiction</td>
</tr>
<tr>
<td>10/11/11</td>
<td>Juhnke Ch. 6</td>
<td>Personality assessment with addictions</td>
</tr>
<tr>
<td>10/18/11</td>
<td>Assigned article</td>
<td>Clinical interviews &amp; motivational interviewing</td>
</tr>
<tr>
<td>10/25/11</td>
<td>LCDC competencies/SAMHSA Competencies</td>
<td>Individual therapeutic approaches Term Project Presentation</td>
</tr>
<tr>
<td>11/1/11</td>
<td>LCDC competencies/SAMHSA Competencies</td>
<td>Working with Selected Populations Term Project Presentation</td>
</tr>
<tr>
<td>11/8/11</td>
<td>LCDC competencies/SAMHSA Competencies</td>
<td>Group counseling and 12-step support Term Project Presentation</td>
</tr>
<tr>
<td>11/15/11</td>
<td>LCDC competencies/SAMHSA Competencies</td>
<td>Relapse, Relapse Prevention, Maintaining Sustained Recovery Term Project Presentation</td>
</tr>
<tr>
<td>11/22/11</td>
<td>SLCDC competencies/SAMHSA Competencies</td>
<td>Addiction in families/ prevention Term Project Presentation</td>
</tr>
<tr>
<td>11/29/11</td>
<td>LCDC competencies/SAMHSA Competencies</td>
<td>Termination/Aftercare/Follow Up/Outreach Term Project Presentation</td>
</tr>
<tr>
<td>12/6/11</td>
<td></td>
<td>Term Project Presentation/All Assignments and Projects due</td>
</tr>
<tr>
<td>12/13/11</td>
<td></td>
<td>Final Exam</td>
</tr>
</tbody>
</table>

**Late Work:** All late assignments receive a letter grade deduction. No late assignment will be accepted one week after due date. Any assignments not turned in by the last day of class will not be graded.
Attendance: In the past, successful students have found it useful to be on time and prepared for each class. This is accomplished by:
A. Attending each class
B. Having all assigned readings completed
C. Participation in class discussions.

Students are responsible for all information disseminated in class (even if the student is absent). You are adults and have adult lives and responsibilities. If an emergency arises, take care of yourself and your family. You cannot learn if you are distracted by emergencies. Only family emergencies are considered excused absences. I encourage you to strike a balance between your education and family life. You are responsible for obtaining missed material from fellow classmates.

X. Required Textbooks

Texas Department of State Health Services (2010). Licensed Chemical Dependency Counselor Program. Austin, TX: Author. [http://www.dshs.state.tx.us/lcdc/](http://www.dshs.state.tx.us/lcdc/)

Recommended


XI. Bibliography

XII. Grade Appeals
As stated in University Rule 13.02.99.C2, Student Grade Appeals, a student who believes that he or she has not been held to appropriate academic standards as outlined in the class syllabus, equitable evaluation procedures, or appropriate grading, may appeal the final grade given in the course. The burden of proof is upon the student to demonstrate the appropriateness of the appeal. A student with a complaint about a grade is encouraged to first discuss the matter with the instructor. For complete details, including the responsibilities of the parties involved in the process and the number of days allowed for completing the steps in the process, see University Rule 13.02.99.C2, Student Grade Appeals, and University Procedure 13.02.99.C2.01, Student Grade Appeal Procedures. These documents are accessible through the University Rules Web site at http://www.tamucc.edu/provost/university_rules/index.html. For assistance and/or guidance in the grade appeal process, students may contact the Office of Student Affairs.

XIII. Disabilities Accommodations
A. The Americans with Disabilities Act (ADA) is a federal anti-discrimination statute that provides comprehensive civil rights protection for persons with disabilities. Among other things, this legislation requires that all students with disabilities be guaranteed a learning environment that provides for reasonable accommodation of their disabilities. If you believe you have a disability requiring an accommodation, please call or visit Disability Services at (361) 825-5816 in Driftwood 101.
B. If you are a returning veteran and are experiencing cognitive and/or physical access issues in the classroom or on campus, please notify the instructor and contact the Disability Services office for assistance at (361) 825-5816.

Appendix A

Integrative Summary

Presenting Problem: A is a 16-year-old Caucasian female referred to counseling by ________ county juvenile court. A has a history of oppositional behavior, running away, and substance abuse. A has tested positive on two occasions for marijuana. She was picked up by the police on two occasions for running away. She currently has charges pending a court date for selling a controlled substance on school grounds.

Relevant History: A has a history of sexual abuse from her biological father between the ages of 59. Her parents divorced when A was 4 years old, and she went to live with her father. A has focused on her abuse issues in the past in outpatient counseling and tends to view her current behavior as a result of the abuse she incurred. A moved in with her mother at age 9. Her mother has a history of drug dependency. A’s mother currently denies regular drug use but continues to drink.

Mental Status Exam:

Appearance, Attitude, and Activity: A is a white 16 year-old female with no physical abnormalities. The client is slightly over-weight. She is dressed appropriately and does not appear to exhibit any maladaptive features related to self-care. The client has scars on her left arm from a past
history of cutting, but did not identify any current tendencies for self-mutilation. Client’s last occurrence was over 6 months ago by self-report. The client has a cynical attitude toward counseling because “it has not worked” but appears amiable to the process and responsive. No abnormal activity is noted.

**Mood and Affect:** A describes feeling depressed often. She does not exhibit any sleep disturbance, but indicated she generally feel unhappy. The client did not appear tearful, but she does get irritated easily with her mother and identified frequent inattention in school. The client identified feeling sad at school due to a lack of friends. Depressed mood does not appear abnormal given the circumstances.

**Speech and Language:** Speech and language appear normal. No evidence of pressured speech or poverty of speech. A is appropriately spontaneous in her conversations.

**Thought Process, Content, and Perception:** All appear within normal limits. Thoughts appear appropriately connected. No tangential associations were noted.

**Cognitions:** Client is oriented x4 (person, place, time and situation).

**Insight and Judgment:** A tends to act somewhat impulsively when angry, particularly at school or with her mother. The client demonstrates poor reality testing with respect to acknowledging logical and natural consequences. The client identified an “I don’t care” attitude when confronted, especially at home or school.

**Medical History:** No medical problems have been identified. A is not on any medications currently. A has a history of outpatient counseling since age 9. A’s mother indicated counseling has not been successful.

**Family Issues:** A has had no contact with her father since he was prosecuted for sexual abuse. A’s father served time in prison. His whereabouts are unknown. A has ongoing conflict with her mother. A’s mother appears to want A to suffer severe consequences for her behavior and is looking for relief from parenting responsibilities. A’s mother has verbalized, “I want her in detention,” despite the fact that A’s offenses do not warrant such consequences. Both A and her mother are open to placement for A outside of the home. A’s mother does not want to participate in the counseling process and does not acknowledge how she has been harmful in her relationship with her daughter.

**Social Support:** A admits to associating with a negative peer group. A has recently started attending church, but finds it difficult to be accepted from peers in youth group. A tends to be a follower and engages in self-destructive behavior, such as getting high, due to peer pressure. A is not involved in any other extracurricular activities.

**Educational/Occupational Issues:** A was retained in 9th grade two years ago. As a 16 year old in 10th grade, she is at-risk of dropping out. A has identified a desire to go to college. A appears to be average to above average intellectual functioning and passes school easily when she applies herself. A admits to failing in school due to pressure from her peers.

**Spiritual Concerns:** A’s mother has not been supportive of her participation in church and has frequently grounded her from attending. A genuinely appears interested in church involvement and the association with a more positive peer group, but struggles with her lack of acceptance from peers in youth group.

**Addictions Assessment (see Appendix B).**

**Summary:** A is a 16 year old Caucasian female of average to above average intellectual functioning with a history of sexual abuse victim, substance abuse, and oppositional behavior. Symptoms of depression are evident including low self-esteem, irritability, saddened mood, and defeated outlook. A faces significant conflict with her mother, and A’s mother could be characterized as non-supportive. Without placement, A is at risk for regressing back to her previous high-risk behavior.
Appendix B—Addictions Assessment Example (Balkin, R. S., 2010)

Substance Abuse Assessment

Current use:

Substance abuse history:

<table>
<thead>
<tr>
<th>Type</th>
<th>Drug Name</th>
<th>Age Started</th>
<th>Duration of Use</th>
<th>Frequency of Use</th>
<th>Amount Used</th>
<th>Route</th>
<th>Last Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cannabis</td>
<td></td>
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<tr>
<td>Cocaine</td>
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<tr>
<td>Other Stimulants</td>
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<tr>
<td>Hallucinogens/Narcotics</td>
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<tr>
<td>Depression</td>
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<tr>
<td>Inhalants</td>
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<tr>
<td>Alcohol</td>
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</tr>
</tbody>
</table>

Age of first drink:
Age of first drug use:

What problems do you have related to your drinking/using?

How have you attempted to reduce your use or quit using drugs/alcohol?
## Grading Rubric

<table>
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<tr>
<th>No credit</th>
<th>Incomplete</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
<th>Weight</th>
<th>Total</th>
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<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Content
Completeness of literature review; responsiveness to directions; support for assertions

### Structure
Organization; paper follows a logical flow; evidence of original and critical thinking

### Style
Format; citations; mechanics