Texas A&M University-Corpus Christi  
Advanced Strategies in Process Addictions and Substance Abuse

Course Number and Section: CNEP 5321:002  
Name of Instructor: Frederick Capps, PhD
Class meeting time and location: 7:00PM/BH 224  
Office: TBD
Semester Year: 2011-2012 Spring  
Office Hours: By Appointment
Office Telephone: 825-2442  
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I. Course Description
CNEP 5321. Advanced Strategies in Process Addictions and Substance Abuse. Three semester hours. This course covers process addictions as well as advanced strategies in treating process and substance abuse addictions. Assessment, interview strategies, multicultural issues, and treatment strategies will be addressed. **Prerequisites: CNEP 5312, CNEP 5313**

II. Course Rationale
This course will provide the student with a basic framework for understanding process addictions and advanced issues in substance abuse. Both theory and practice will be emphasized. The course is applicable for all students who may work with various types of addiction and in substance abuse 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 decision-making skills.
C. The counselor promotes the worth, dignity, individuality and potential of all members of a learner centered community.
D. The counselor practices active listening

IV. ExCET 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. This course is designed to provide the student with an understanding of the following CACREP requirements across several practice domains.

FOUNDATIONS
A. Knowledge
   5. Understands a variety of models and theories of addiction related to substance use and other addictions.
6. Knows the behavioral, psychological, physical health, and social effects of psychoactive substances and addictive disorders on the user and significant others.

7. Recognizes the potential for addictive disorders to mimic a variety of medical and psychological disorders and the potential for medical and psychological disorders to coexist with addiction and substance abuse.

COUNSELING, PREVENTION, AND INTERVENTION

C. Knowledge
1. Knows the principles of addiction education, prevention, intervention, and consultation.

2. Knows the models of treatment, prevention, recovery, relapse prevention, and continuing care for addictive disorders and related problems.

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

Diversity and Advocacy

E. Knowledge
1. Understands how living in a multicultural society affects clients with addictions.

2. Understands current literature that outlines theories, approaches, strategies, and techniques shown to be effective when working with specific populations of clients with addictions.

ASSESSMENT

G. Knowledge
1. Understands various models and approaches to clinical evaluation for addictive disorders and their appropriate uses, including screening and assessment for addiction, diagnostic interviews, mental status examination, symptom inventories, and psychoeducational and personality assessments.

4. Understands basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications so that appropriate referrals can be made for medication evaluations and so that the side effects of such medications can be identified.

DIAGNOSIS

K. Knowledge
3. Understands the established diagnostic and clinical criteria for addictive disorders and describes treatment modalities and placement criteria within the continuum of care.

B. Student Learning Outcomes include the following:
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.
i) Students will identify diagnostic criteria, effects of psychoactive substances, and
treatment strategies for process addictions and substance abuse diagnoses as
evidenced by midterm/final exam, performance on project, and process addiction
paper.
ii) Students will understand the role of pharmacotherapy in treating addictions as
evidenced by mid term and final exams.
iii) Students will be introduced to professional issues that impact the treatment of
addictions as evidenced by lecture content, assigned readings, and process
addiction paper.
iv) Students will understand the various models of treating process addictions and
substance abuse as evidenced by exams, process addiction paper, project, and
course materials.
v) Students will identify issues related to co-occurring disorders related to process
addictions and substance abuse as evidenced by exams, process addiction paper,
and course materials.
vi) Students will identify relevant multicultural issues relevant to diagnosis and
treatment in addictions counseling as evidenced by exams, process addiction
paper, and course materials.
vii) Students will demonstrate knowledge of treatment planning, intervention, and the
role of spirituality related to process addictions and substance abuse as evidenced
by exams and project.
viii) Students will demonstrate knowledge of treatment planning and
intervention related to relapse prevention and managing the relapse
process as evidenced by process addiction paper and project.
ix) Students will become familiar with various treatment settings for addressing
process addictions and substance abuse as evidenced by exams, project, and course
materials.
x) Students will become familiar with evidence-based practices in treating substance
abuse and process addictions as evidenced by exams and course materials.

VI. Course Topics
A. Addiction
B. Addiction Treatment
C. Treatment Process
D. Client Diversity
E. Treatment Collaboration for Coexisting Medical, Psychological, and Social Problems
F. Substance Abuse Counseling

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

<table>
<thead>
<tr>
<th>Component</th>
<th>Points</th>
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<tbody>
<tr>
<td>Attendance/Participation</td>
<td>See policy</td>
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<tr>
<td>Midterm</td>
<td>30</td>
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<tr>
<td>Process Addiction Paper</td>
<td>60</td>
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<td>Project</td>
<td>60</td>
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<td>Final</td>
<td>30</td>
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<tr>
<td>Challenge Question</td>
<td>14</td>
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</tbody>
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162 - 180 POINTS - "A"
144 – 161 POINTS - “B”
126 - 143 POINTS - “C”
108 – 124 POINTS - “D”
107 & BELOW - "F"

Process Addiction Paper (see grading rubric)

In an APA style paper (see above description) you will write a six-page paper on a process addiction of your choice. In your paper, you will need to cite the DSM-IV-TR and a minimum of five peer-reviewed journal articles. **Websites do not count.** In your paper address the following:

1. Describe the process addiction. Include information on associated features, prevalence, course, and DSM criteria.

2. Explain how you will assess for this process addiction. Discuss interview strategies and any formal instruments you might use. Make sure you describe the instruments and indicate any reliability and validity information.

3. Identify a treatment strategy in working with this addiction. Include a description of the strategy. Cite research that provides evidence that this strategy is effective (make sure you describe the study you are citing). Explain how you would utilize this strategy in your counseling practice.

Project: Case Study (see grading rubric)

You will be paired with a class member who will assume the role of an individual with a process addiction.

1. Conduct a clinical interview using one of the models discussed in class (e.g. CLISD-PA).
2. In the introduction of your project, identify the model and assessment you used.
3. Create an integrative summary (see Appendix A).
4. Create a treatment plan with the following information:
   a. Presenting problems
   b. Treatment goals
   c. Measurable objectives for each goal
   d. Method of evaluating treatment effectiveness (how will you know what you are doing is working?)
IX. Tentative Course Schedule & Policies

<table>
<thead>
<tr>
<th>Date</th>
<th>Reading</th>
<th>Assignment/Presentation</th>
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<tbody>
<tr>
<td>1/23</td>
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<td>Course Orientation</td>
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<tr>
<td>1/30</td>
<td>D&amp;M ch. 1-2</td>
<td>Overview of addictive behaviors</td>
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<td>2/6</td>
<td>D&amp;M ch. 2</td>
<td>Multicultural issues</td>
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<td></td>
<td><em>assign process addiction paper</em></td>
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<tr>
<td>2/13</td>
<td>D&amp;M ch. 3-9</td>
<td>Substance Abuse Disorders</td>
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<td>2/20</td>
<td>D&amp;M ch. 3-9</td>
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<td>2/27</td>
<td>D&amp;M ch. 3-9</td>
<td>Substance Abuse Disorders</td>
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<td><em>Process addiction paper due</em></td>
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<tr>
<td>3/5</td>
<td>D&amp;M ch. 3-9</td>
<td>Substance Abuse Disorders</td>
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<td>3/12</td>
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<td>Spring Break</td>
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<td>3/26</td>
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<td>4/2</td>
<td>D&amp;M ch. 10</td>
<td>Disordered Eating</td>
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<td>4/9</td>
<td>D&amp;M 11</td>
<td>Gambling</td>
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<td>4/16</td>
<td>D&amp;M 12</td>
<td>Sex offenders</td>
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<tr>
<td>4/23</td>
<td>D&amp;M Ch. 13</td>
<td>Sexually Risky Behaviors</td>
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<tr>
<td>4/30</td>
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<td>Review</td>
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<td></td>
<td></td>
<td><em>Project due</em></td>
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<tr>
<td>5/4</td>
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<td>Final Exam</td>
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**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.

My attendance policy:

1. Upon your third absence, you will have a 10% deduction in your grade.  
2. For each subsequent absence an additional 10% is deducted.

**Weekly Challenge Question**

At each class meeting prior to the final exam, I will ask one question that students may be able to answer correctly for one (1) point to be added to their grade. There is no penalty for incorrect responses. The purpose of this exercise is to enhance general knowledge of addiction counseling and to promote lively discussion among students.
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.

X. Required Textbooks

Recommended


In addition, a number of supplementary articles may be discussed during the course. These will be used to supplement the texts and to exemplify how certain examined statistical methods are used in psychological research. Each of these supplementary readings will be made available by the instructor.

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

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.

If you are a returning veteran and are experiencing cognitive and/or physical access issues in the classroom or on campus, please 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.**

**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
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>
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<td>Cocaine</td>
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<td>Other Stimulants</td>
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<td>Hallucinogenics/Narcotics</td>
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<td>Inhalants</td>
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<tr>
<td>Alcohol</td>
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</tbody>
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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

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<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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</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