Graduate School of Applied and Professional Psychology (GSAPP)
Rutgers University
New Brunswick, New Jersey
SPRING 2020

18:821:630 Assessment and Treatment of Substance Use Disorders
Credits: 3; Level: Graduate
Day/Time: Tuesdays, 1:45-4:30pm
Location: Smithers Hall, Room 200

Instructor: Lesia M. Ruglass, Ph.D.
Office: Smithers Hall, 222
Phone: 848-445-0903
E-mail:lesia.ruglass@rutgers.edu
Office Hours: Wednesdays 12-1pm by appointment. The instructor will make reasonable efforts to meet with students at other times when necessary.

Rutgers University Mission: As the premier comprehensive public research university in the state’s system of higher education, Rutgers, The State University of New Jersey, has the threefold mission of

- providing for the instructional needs of New Jersey’s citizens through its undergraduate, graduate, and continuing education programs;
- conducting the cutting-edge research that contributes to the medical, environmental, social, and cultural well-being of the state, as well as aiding the economy and the state’s businesses and industries; and
- performing public service in support of the needs of the citizens of the state and its local, county, and state governments.

Each component of the university’s mission reinforces and supports the other two.

As the University of New Jersey®, Rutgers is dedicated to teaching that meets the highest standards of excellence, to conducting research that breaks new ground, and to providing services, solutions, and clinical care that help individuals and the local, national, and global communities where they live.

GSAPP Mission: The mission of GSAPP is threefold: education, research/scholarship, and public service. Its goal is to prepare well-educated, qualified, and competent direct-service psychologists who have a special commitment to direct community involvement and to underserved populations—professionals who can integrate scientific knowledge with innovation in the delivery of psychological services to individuals, families, groups, and organizations. Professionals receiving a doctoral degree in psychology should be capable of extending psychological knowledge and exhibiting the high level of analytic skills and theoretical understanding needed to use existing and emerging psychological knowledge.

Core Values. We are guided by four core values that are apparent in our learning environment, centers, and clinics:

1. **Academic excellence** in preparing students for careers in clinical and school psychology.
2. Commitment to social justice and helping underserved populations.
3. **Diversity** of students trained, approaches used, theoretical orientations followed, and populations served.
4. **Knowledge generation and dissemination** using contemporary research approaches.
**COURSE DESCRIPTION:** The aim of this course is to introduce psychology graduate students to the basic concepts relevant to understanding the process of treatment for substance use disorders (SUD; Alcohol, Tobacco, and Other Drugs). The course will review historical and modern theoretical viewpoints of addictions/SUD including neurobiological, biopsychosocial, harm-reduction, stages of change, cognitive-behavioral, and psychodynamic models of addiction. Students will be familiarized with diagnostic criteria for alcohol and substance use disorders utilizing the Diagnostic and Statistical Manual of Mental Disorders – 5 (DSM-5) as well as to more continuum models of assessing addictions. The course offers a comprehensive introduction to all aspects of case management, treatment planning and monitoring, and advocacy. A range of manual-driven, evidence-based treatments will be covered including motivational interviewing and enhancement, relapse prevention, SBIRT, twelve-step facilitation, contingency management, trauma-informed seeking safety (SS) and concurrent treatment of PTSD and SUD with prolonged exposure (COPE). This course will also expose students to the medications that have been developed to augment the treatment of SUDs, the ways medications and psychotherapy can work together, and understanding the context of a substance misusers life including the use of couples and family-based social interventions. Content will also explore social and cultural factors for consideration in treating SUD and understanding and managing countertransference reactions when working with SUD.

**OBJECTIVES FOR THE COURSE:**
Upon completion of this course, participants will be able to:

- Describe and utilize the most widely used screening and assessment instruments used to evaluate and diagnose alcohol-, tobacco-, and other-drug (ATOD) related problems.
- Describe and utilize the DSM-5 diagnostic criteria for substance use disorders.
- Learn how to comprehensively assess and evaluate ATOD-related symptoms and problems.
- Learn how to screen and assess for other non-substance specific issues that can impact ATOD assessment and treatment planning (e.g., suicidality, mental health disorders, and medical conditions).
- Describe a variety of self-help/mutual-help support options for substance users attempting to change their substance use and articulate their basic similarities and differences.
- Describe and utilize evidence-based treatment practices commonly used in community substance abuse treatment programs.
- Recognize and acknowledge the role of sociocultural factors (race/ethnicity, sexual orientation, sex/gender, etc.) in the onset, duration, and treatment of SUDs.
- Describe and implement culturally competent treatment strategies in the provision of SUD treatment.

**CLASS FORMAT:**
- The first half of the class will involve a lecture and group discussion.
- The second half will involve case reviews, video demonstrations, role-plays, and group presentations.
REQUIRED TEXTS:


Texts can be bought or rented on Amazon.com

SUPPLEMENTAL READINGS:
Throughout the course, additional assigned readings will be given. Reading assignments are listed in the course schedule below. All students are expected to complete the assigned readings prior to our meetings. As you read, please engage with the material actively and bring your thoughts and questions into class. Copies of the materials you are required to read will be placed in Canvas.

ASSESSMENT:

1. Attendance and class participation = 10 points. Your participation grade will reflect your attendance and active contribution to in-class discussions and activities. Each student is expected to complete the assigned readings and bring in questions, comments, and reflections about the readings and course activities to contribute to the class discussion.

2. Support Group Attendance = 10 points. Students are required to attend at least one face to face OR one online AA/NA support group and write a short paper describing your reactions to the meetings, as well as how, in your view, the group used its principles and practices to help support changing addictive behaviors. Participants may NOT attend a support group that they have attended at any time in the past. The paper should not exceed two (2) double spaced pages in length and should have 1-inch margins all around. You may find both face to face and online support group meetings online by Googling (Name of Organization) (Meeting List) (Your Location). So, to find AA meetings in New York you would Google “Alcoholics Anonymous meeting list New York”. Please note that there are two types of 12-Step meetings: Open and Closed. Open Meetings are, as the name implies, Open to anyone who wishes to attend. You should attend ONLY Open Meetings whether online or in person. NOTE: When you attend a support group meeting either in person or online, if you are asked by any of the other people attending the meeting whether you are in recovery or why you are attending the meeting you should be honest in disclosing that you are attending in order to learn about the working of the group as a part of a course requirement in your graduate program. You need not volunteer this information, but you are ethically obligated to disclose it if asked. If, for any reason, you are asked to leave the meeting or not are welcomed, please leave immediately. Also, please DO NOT exchange personal information with attendees at the meeting or accept any personal information from them (e.g. full name, phone numbers, address, etc). If you have any questions at all about this assignment, please contact me directly BEFORE you attend any meetings. DUE: 3/3/20.

• Group Presentations = 20 points. I will create groups of students who will work together to develop a class presentation that describes and analyzes a controversy in the field of addiction psychology. This will require doing research, reviewing the literature, and synthesizing the findings on both sides of the controversy. Presentations should be clear, informative and practically oriented. Presentations should be 30-40 minutes after which we will engage in Q&A
with class about the topic. Powerpoint deck and an outline of the presentation should be submitted to me at least 24 hours before class presentation. While video material may be used, it is not required. This assignment will be evaluated based on the educational and learning value of the presentation, which is influenced by presentation style and format, information provided and level of engagement of class.

Some Controversies in the Field of Addiction Psychology
1. Is Addiction a “Brain Disease”? Why or Why not? What are the implications of holding such a position?
2. Are “behavioral addictions” (sex, exercise, internet, etc.) real? Why or why not?
3. Substance Abusing Pregnant Mother. Treatment or Incarceration? Preservation of Family or removal of child from home? What are the ethical dilemmas?
5. Harm Reduction vs Abstinence Only Model.
6. Psychoanalysis/Psychodynamic Therapy for SUD. Can it or should it be done? Pros/Cons
7. Co-occurring Disorders. Do we need to treat the SUD first before the psychological disorders?
8. Methadone Treatment Controversy. Is it just substituting one drug for another?

3. Case Conceptualization: 30 points (8 pages, double-spaced pages, 1-inch margins): This assignment will demonstrate your ability to apply concepts related to the diagnosis and case formulation of an individual with a substance use disorder and potentially other co-occurring disorders. Students will utilize a fictional character as the subject of their paper. An outline for this assignment and a list of fictional characters are provided below. DUE: 3/24/20. Late papers will receive a 2-point deduction for each day late.

4. Detailed Treatment Plan for SUD and other Mental Health Issues: 30 points (8 pages, double-spaced pages, 1-inch margins): This assignment will demonstrate your ability to develop a treatment plan and apply a treatment approach to an individual with a substance use disorder. Students will continue working with the fictional character that they provided their case conceptualization on. An outline for this paper is provided below. DUE: 5/5/20. Late papers will receive a 2-point deduction for each day late. If you would like a copy of your final paper back, please submit with a stamped addressed envelope so that I can mail it to you.

EXTRA-CREDIT ASSIGNMENT OPTION: (Worth an extra 2 points towards your overall grade)
5. Attend a Center of Alcohol and Substance Use Studies Colloquium at Rutgers University-New Brunswick (typically held on Thursdays from 12-1pm in Smithers Hall, Rm 219). Write a 2 page, double-spaced, 12 point font, response to the colloquium. Describe the topic addressed and discuss the strengths/weaknesses of the presentation. Did any point in particular catch your attention? Were you surprised by the findings/theory? Other reactions? Submit the response with a copy of any handouts from the colloquium or the announcement of the colloquium.

ASSIGNMENTS AND EVALUATION METHOD:
The final grade will be determined and computed based on the following:
1. Attendance and Class Participation = 10 points
2. AA/NA Attendance and Reflection Paper = 10 points
3. Group Presentations = 20 points
4. Case Conceptualization Paper = 30 points
5. Treatment Paper = 30 points
6. Extra Credit (if completed) = 3 points

TOTAL POSSIBLE POINTS = 103

**GRADES AND GRADING POLICY**

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<tr>
<th>Grade</th>
<th>Description</th>
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<tr>
<td>A</td>
<td>Outstanding</td>
<td>90-100 (4.0)</td>
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<td>B+</td>
<td>Intermediate Grade</td>
<td>87-89 (3.5)</td>
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<tr>
<td>B</td>
<td>Good</td>
<td>80-86 (3.0)</td>
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<td>C</td>
<td>Average</td>
<td>70-79 (2.0)</td>
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<td>F</td>
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<td>NC</td>
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**Class Attendance and Remediation**

Your attendance and participation in class are important. You are expected to attend all in person classes and arrive on time. Only two (2) excused/unexcused absences are permitted. Missing more than 2 classes will result in a 5 point deduction for each additional day of absence from your final grade point. If you are forced to miss an excessive number of classes, you will be encouraged to withdraw from the class. Students who arrive to class more than 10 minutes after the class has started are considered tardy and will be marked absent if they arrive more than 30 minutes after class has started. After 3 late arrivals, an unexcused absence will be marked in your record. The only excused absences are those that are serious or required (e.g., personal medical emergencies or serious illness/injury; death or serious illness in the family; military duties; jury duty; religious observances). They will always require some form of documentation: Examples include a doctor's note (on letterhead and signed by the doctor); obituary or funeral program; court order/notice; etc.). You must always supply me with the original or a copy of your documentation, which I will keep on file. Only students with approved documentation can be given an excused absence.

If students anticipate that they may be late for class, have to leave class early, or be absent from class, it should be communicated in writing (via e-mail) at their earliest convenience.

**Computer/Cell Phone Use in Class**

If students are expected to send or receive urgent e-mails, texts, or calls during class, their unanticipated and urgent needs should be communicated to and approved by the instructor prior to class. All cell phones should be turned off or in silent mode. All computing devices should be used only for the purpose of class-related activities.

**Academic Integrity**

All Rutgers students should review and adhere to the University principles of academic integrity, available at: http://academicintegrity.rutgers.edu/academic-integrity-at-rutgers/

**Accommodations due to Disability**

If you seek accommodations due to a documented disability, you may arrange for these through the Office of Disability Services, Kreeger Learning Center, 151 College Avenue; dfoffice@rci.rutgers.edu
Counseling services
Students often experience personal problems or difficulties during the term that may interfere with learning and their daily activities. If you or someone you know needs to talk to someone regarding such personal issues, the University provides free counseling services through the Counseling and Psychological Services (CAPS) and their information can be found at: http://health.rutgers.edu/medical-counseling-services/counseling/. They also offer a number of useful workshops for general stress management and techniques for promoting mental health. If you have any questions about CAPS or other services, I am happy to speak with you privately.

Mandated Reporting
Rutgers faculty are committed to helping create a safe learning environment for all students and for the university as a whole. If you have experienced any form of gender or sex-based discrimination or harassment, including sexual assault, sexual harassment, relationship violence, or stalking, know that help and support are available. Rutgers has staff members trained to support survivors in navigating campus life, accessing health and counseling services, providing academic and housing accommodations, and more. The University strongly encourages all students to report any such incidents to the University. Please be aware that all Rutgers employees (other than those designated as confidential resources such as advocates, counselors, clergy and healthcare providers as listed in Appendix A to Policy 10.3.12) are required to report information about such discrimination and harassment to the University. This means that if you tell a faculty member about a situation of sexual harassment or sexual violence, relationship violence, stalking or other related misconduct, the faculty member must share that information with the University’s Title IX Coordinator. If you wish to speak to a confidential employee who does not have this reporting responsibility, you can find a list of resources in Appendix A to University Policy 10.3.12. For more information about your options at Rutgers, please visit endsexualviolence.rutgers.edu.

For more information visit: https://gsapp.rutgers.edu/current-students/important-links

CLASS SCHEDULE AND READINGS (subject to change with notice)

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<tr>
<th>Date</th>
<th>TOPIC</th>
<th>READINGS</th>
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| 1/21/20| Course Introduction, Review of Concepts and Core Competencies | • Miller et al. (2019), Ch. 1 (Why Treat Addiction) and Ch. 24 (Prof Ethics).  
• Video: HBO Documentary Addiction |
| 1/28/20| Models and Theories of Addiction           | • Miller et al. (2019), Ch. 2 (What is Addiction) and Ch. 3 (How do Drugs Work)  
• Denning & Little (2012). Chs. 1 and 2 (Why Practice Harm Reduction Psychotherapy and What is HRP)  
• Video: HBO Documentary Addiction |
| 2/4/20 | Transtheoretical Model and Stages of Change | • Miller et al. (2019), Ch. 4 (Engaging)  
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<th>Date</th>
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<th>References</th>
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Measures Review: Stages of Change Assessments using URICA and SOCRATES |
| 2/18/20   | Case Formulation and Treatment Planning            | Miller et al. (2019). Treating Addiction. Ch. 5 (Screening, Evaluation, and Diagnosis) and Ch. 6 (Withdrawal Management and Health Care Needs)  
Denning & Little (2012). Ch. 4 (Assessment as Treatment)  
APA (2013). Substance-Related and Addictive Disorders (pp. 481-590).  
Measures Review: Screening Measures: AUDIT and DAST; Diagnostic Measure: SCID-5 Clinician Version (SUD section).  
Listen to Audiotapes of SCID SUD assessments |
| 2/25/20   | 12-Step and Mutual-Aid Groups Addressing the Spiritual Side | Miller et al. (2019). Ch. 17 (Mutual Help Groups) and Ch. 23 (Addressing the Spiritual Side).  
| 3/3/20    | Motivational Interviewing, Motivational Enhancement Therapy, SBIRT | Miller et a. (2019). Ch. 9 (Brief Interventions), and Ch. 10 (Motivational Interviewing).  
Watch: MI Sessions and Conduct Role Plays  
Recommended Video: Bill Miller Lecture, Columbia University, 2009. [https://www.youtube.com/watch?v=6EeCirPyq2w](https://www.youtube.com/watch?v=6EeCirPyq2w) |
Watch: MI Sessions and Conduct Role Plays |
<p>| 3/17/20   |                                | NO CLASS. SPRING BREAK |</p>
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<tr>
<th>Date</th>
<th>Topic</th>
<th>Presentations</th>
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| 3/24/20    | Cognitive and Behavioral Therapy Approaches                           | • Miller et al. (2019). Treating Addiction. Ch. 11 (Behavioral Coping Skills) and Ch. 13 (Contingency Management).  
              *DUE: Case Conceptualization Paper* *Group Presentations*  
                https://archives.drugabuse.gov/sites/default/files/cbt.pdf  
              • Review RPT Sessions: Coping with Craving and Managing Thoughts About Using  
              • Watch CBT Sessions DVD and Conduct Role Plays |
                https://archives.drugabuse.gov/sites/default/files/cbt.pdf  
              • Review RPT Sessions: Seemingly Irrelevant Decisions, Substance Refusal Skills, and Managing Negative Thinking.  
              • Watch CBT Sessions DVD and Conduct Role Plays |
| 4/7/20     | Psychodynamic Perspectives on SUD Treatment + The Therapeutic Relationship | • Denning, P., & Little, J. (2012). Ch. 5 (The fundamentals of HRP) and Ch. 6 (The Psychodynamic Matrix)  
              • Discuss Cases from Case Conceptualization Papers |
| 4/14/20    | Social Interventions Working with Couples and Families                  | • Miller et al. (2019). Ch. 14 (A Community Reinforcement Approach); Ch. 15 (Working with Significant Others); Ch. 16 (Strengthening Relationships).  
              • Denning & Little (2012). Ch. 11 (Power of connections)  
              • SAMSHA (2017). A Provider’s Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals.  
              • SAMSHA (2013). Substance Abuse Treatment. Addressing the Specific Needs of Women. TIP 51.  
              • Review Videos and Conduct Role Plays |
5/5/20 Pharmacotherapies

* DUE: DETAILED TREATMENT PAPER DUE*

- Miller et al. (2019). Ch. 18 (Medications in Treatment)
- Denning & Little (2012). Ch 8 (The Role of Biology) and Ch. 12 (What does it take...)
- Review Substance Abuse and Mental Health Services Administration [SAMSHA]
  Treatment Improvement Protocol (TIP) 63 (Medications for Opioid Use Disorders).

AA/NA Meeting Attendance Experience Write-Up

GUIDELINES

(2 pages, double-spaced, 1-inch margins on left, right, top and bottom, 12-pt font)

Only attend AA meetings that are labeled “open” meetings. Meeting locations can be found on the AA website (http://www.aa.org)

DEADLINE: Tuesday, March 3rd, 2020

Guidelines and Questions to consider as you write your AA paper.
I highly recommend you read ahead to learn more about the theoretical foundation and principles of AA before you attend the AA meeting so that you can gain the most out of your attendance.

1. Was it easy or hard to find an open meeting in or near your neighborhood?
2. Which meeting did you attend? Where was it located? What type of facility was it held in (church, school etc)? How many people were in attendance? How diverse (age, race/ethnicity, gender, social class etc.) was the group of people in attendance?
3. What was the general atmosphere like? (lively, cheerful, somber, low-key) Did anyone approach you or greet you?
4. What happened in the meeting (please leave out any identifying information). You can keep this section brief.
5. Discuss your personal reactions (emotional and intellectual reactions) to the meeting and the stories that were told? What emotions came up for you? What questions came to mind?
6. What messages were being given to the people who were attending the group?
7. Do you agree or disagree with the philosophy and principles of AA? Explain why. Did your AA meeting attendance change your perspective in any way? For example, if you initially agreed with the AA philosophy, did your attendance strengthen your agreement or lessen your agreement? If you initially disagreed with the AA philosophy, did your attendance change your views in anyway? Explain why.

Do not take notes during the AA meeting. Try to write your paper soon after your attendance so that the experience will be fresh in your mind as you write. If you have already attended an AA meeting in the past for another course and don’t want to attend another one for this course, you are welcome to attend a Narcotic’s Anonymous (NA) meeting and base your write up on that experience.
Case Conceptualization Format (30 points)
[8 pages, double-spaced, 1-inch margins on left, right, top and bottom, 12-point font]

DEADLINE: Tuesday, March 24th, 2020

Case Material:
Each person will select one of the films below portraying a character struggling with a substance use disorder and other mental-health issues. Use that material as the basis for your case conceptualization and treatment papers. You can use some creative license if the film doesn’t give you every single detail that you need.

Films (can be found on Amazon Prime Video):
- Gia (1998)
- Leaving Las Vegas (1995)
- When a Man Loves a Woman (1994)
- The Basketball Diaries (1995)

Identifying Information: In this section, provide relevant demographic information (age, sex, race/ethnicity, marital status, parental status, educational and work information, SES status, living situation). 2 points

Presenting Problem: In this section summarize the concerns (thoughts, feelings, behaviors, symptoms, interpersonal conflict, stressors etc.) that have brought the client to counseling. These are the reasons why the client chose to come for counseling or why they were referred for counseling. [This section and the following should provide enough information to justify your diagnosis below]. 3 points

History of Presenting Problem: In this section provide further information on the presenting problem (onset, severity, and duration of the problem), precipitant of the problem, context in which the problems are occurring, maintaining factors, history of similar issues, history of previous treatment for presenting problems. 3 points

Client Psychosocial History: In this section summarize relevant information about the client’s history. This should include family of origin information (include developmental history, descriptions of mother/father (how would character describe his/her mother/father, what were the relationships with siblings like etc.), significant traumas, health/medical issues, medication history, substance use history, legal history, educational background, work history, friendship/intimate relationship history, current family/relationships information, social/cultural context, etc. 5 points

Mental Status Exam: In this section, provide a description of the mental status of the client. Describe the client’s appearance, attitude, mood and affect, speech (rate/volume etc.), thought process, thought content and perception, cognitive function, and judgment and insight. 2 points

DSM-5 Diagnoses: In this section, provide your diagnosis or diagnoses. List the diagnostic criteria and show with examples how the character meets the various criteria for a diagnosis of a SUD or other mental health disorder. 5 points

[The preceding sections should fill 5 pages]

CASE CONCEPTUALIZATION [3 pages]: In this section summarize your theoretical conceptualization of the client’s concerns. This is the theory-based description of the underlying causes and maintaining factors of the presenting concerns [i.e., the SUD and any co-occurring mental health disorders]. Incorporate socio-cultural factors that should be taken into consideration. 10 points
TREATMENT PAPER GUIDELINES (30 points)
[8 pages, double-spaced, 1-inch margins on left, right, top and bottom, 12-pt font.]

Paper can utilize assigned class readings. Outside empirical studies and/or books should also be cited to provide evidence for treatment efficacy.

OUTLINE

I. Theoretical and Research Basis for Treatment (3 pages) [12 points]

This section should focus on describing the relevant treatment choices available for the character you chose for your case conceptualization, outlining both the theoretical and research basis behind each treatment.

Questions to answer:
Describe 2 front line treatment options available for your case?
What are the differing theoretical foundations of each treatment?
What evidence does each treatment have for its efficacy? [Utilize 3 empirical articles/studies to show support for each treatment’s efficacy]

II. Treatment Description and Rationale (3 pages) [12 points]

This section is devoted to an in-depth description of the treatment intervention you have selected for your case. The section should include a detailed justification for your selection of this treatment over and above other available options. What is your theoretical and clinical rationale for pursuing this kind of intervention strategy with your case?

Evidence supporting your treatment selection should be derived from:

1.) The patient’s presenting problems and history (how do the specifics of the patient’s current issues and context dovetail with the aims and methods of the selected treatment intervention)

2.) The extant literature on the selected treatment, which points to its efficacy not only in general but with patients with similar complaints and presentations (bring in empirical literature).

III. Therapeutic Considerations (2 pages) [6 points]

This section should describe therapeutic issues that you predict you may encounter through the course of the selected treatment intervention. You should consider and address each of the following:

- Multicultural Considerations
- Therapeutic Alliance
- Transference and countertransference

In addition to specifically listing the potential therapeutic considerations, this section should discuss: why you think these issues may arise, how they may affect treatment, and very importantly, how you as the therapist may address and manage their impact.
RECOMMENDED BOOKS


