

**RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY
SCHOOL OF SOCIAL WORK
MAIN COURSE SYLLABUS**

**Understanding Addictive Behaviors
Course: 19:910:514**

**Academic Year 2024-2025
Fall 2024**

Instructor:
Email:
Office:
Office hours:

I. Catalog Course Description

This course focuses on the etiology, neurobiology, pharmacology, prevalence and policy implications of common addictive behaviors, including involvement with opioids, stimulants, alcohol, sedatives, and hallucinogens, among others, and behavioral (non-substance-based addictions: gambling disorder, internet gaming/internet addiction, sexual disorder and food addiction). Students will learn to evaluate addiction-related policy as well as the pharmacological mechanisms of dependence, components of addiction-related behavioral change, and human behavior-related issues involved in prevention, intervention and evaluation of these addictive behaviors. The course will also examine the impact of age, race, gender, social class, culture, ethnicity, spirituality, religion, sexual orientation, national origin, and physical and mental ability on patterns of addiction. Content includes major theoretical perspectives on biological, sociological and psychological bases for addiction and the impetus for addiction recovery and examines the empirical evidence for various perspectives. Students will be introduced to comorbidity and differential diagnosis. This course is required for the ACT Certificate.

II. Course Overview

This course focuses on developing overall knowledge on the etiology of substance based and non-substance based addictive disorders. The course provides a historical overview of pharmacology and physiology and pharmacological approaches to substance use disorders; it also covers concepts in recovery from addiction, behavioral addictions including gambling disorder (formerly called “compulsive gambling”), biochemical and medical client education. Modules are focused on exploring each drug class, as well as non-substance based (behavioral) addictions, particularly the neurochemical, and bio-psycho-social-cultural influences of the development and maintenance of and recovery from the drug or behavior.

As students read through this syllabus, they should also remember to closely review the School-Wide Syllabus in Canvas or the Student Handbook to find information on the School of Social Work mission statement and learning goals, school-wide policies

(including academic integrity policies and the standardized attendance policy), and student resources and supports.

III. Place of Course in Program

This course has a prerequisite of 19:910:502 (Human Behavior and the Social Environment). This course meets the requirement for a general elective. This is one of the six courses required for the Addiction Counselor Training (ACT) Certificate Program.

IV. Council of Social Work Education's Social Work Competencies

The MSW Program at Rutgers is accredited by the Council on Social Work Education (CSWE). CSWE's accreditation standards can be reviewed at www.cswe.org.

In keeping with CSWE standards, the Rutgers School of Social Work has integrated the 2022 CSWE competencies within its curriculum. The competencies assessed in this course include:

Competency 1: Demonstrate Ethical and Professional Behavior

Practitioners in clinical social work recognize the importance of the therapeutic relationship, person-in-environment and strengths perspectives, professional use of self, and adherence to ethical and value guidelines for professional practice. Clinical social workers differentially utilize theories, research, and clinical skills and integrate them with a commitment to human rights, anti-racist practices, diversity, equity, and inclusion to enhance the well-being of individuals, families, and communities in an ethical manner. Clinical social work practitioners acknowledge the complexities involved in their practice, including the need to navigate ethical issues in an organizational context, and use clinical supervision to ensure that their practices are congruent with social work values and ethics. Extending and enhancing ethical and professional practice from the foundation level requires that clinical social workers reflect on their own family of origin to assess how it impacts their clinical work. Advanced-level practitioners must manage complex systems while understanding how cultural and developmental aspects of self and their clients influence their work. Clinical social workers recognize their own strengths and weaknesses in developing, managing, and maintaining therapeutic relationships. Practitioners of clinical social work must continually adapt to rapidly changing technology in an ethical and professional manner. Practitioners in clinical social work:

- Use clinical supervision and consultation to continuously examine professional roles and boundaries, engage in ongoing self-correction, and ensure that their practice is congruent with social work ethics and values.
- Apply ethical decision-making skills and frameworks to clinical material, while complying with the NASW Code of Ethics and local, state, and federal regulations.
- Demonstrate knowledge of one's family of origin's cultural, psychodynamic, and behavioral patterns and reflect on how that history impacts one's ability to differentially

- use one's professional self in service for clients.
- Exhibit an anti-oppressive stance incorporating the social work values of social justice, the dignity and worth of the person, confidentiality, support for self-determination, the value of human relationships, and integrity in all discussions of clinical case material.
- Provide services and represent themselves as competent within the boundaries of their education, training, experience, and license.
- Establish and maintain clear and appropriate professional boundaries.

Competency 3: Engage Anti-Racism, Diversity, Equity and Inclusion (ADEI) in Practice

Clinical social workers understand how racism and oppression impact clients, families, groups, and communities. They also acknowledge the pervasive impact of white supremacy on the human rights, health, and well-being of clients, and use their knowledge, awareness, and skills to engage in anti-racist clinical practices. They recognize how the intersectionality of factors (including but not limited to age, caste, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, generational status, immigration status, legal status, marital status, political ideology, race, nationality, religion and spirituality, sex, sexual orientation, and tribal sovereign status) influence clients' presenting concerns and affect equity and inclusion in all aspects of society. Clinical social workers understand how dimensions of diversity affect client explanations of health/mental health, help-seeking behaviors, and the therapeutic relationship. Practitioners in clinical social work value cultural strengths and tailor their engagement strategies, assessment tools, and interventions to meet the diverse needs of their clients. Clinical social workers monitor their biases, reflect on their own cultural beliefs, and use and apply their knowledge of human rights, ADEI, and complex health/mental health delivery systems to enhance client well-being. Clinical social workers recognize the need to conceptualize cases using an intersectional perspective and to identify their clients' strengths and resiliencies, while learning to critically evaluate their own family history, privilege, and social locations. In presenting case material, clinical social workers integrate anti-racist and anti-oppressive stances and attend to clients' experiences of racism and oppression while also working to avoid undue pressure or use of power over clients.

Practitioners in clinical social work:

- Identify how human rights violations, racism, oppression, and white supremacy impact the health and well-being of clients, families, groups, and communities; they rely on their knowledge, awareness, and skills to engage in anti-racist clinical practices and other ADEI efforts.
- Recognize how the intersectionality of factors (including but not limited to age, caste, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, generational status, immigration status, legal status, marital status, political ideology, race, nationality, religion and spirituality, sex, sexual orientation, and tribal sovereign status) influence clients' presenting problems and affect equity and inclusion in all aspects of society, including clients' health and mental health care choices.
- Demonstrate awareness of one's intersectionality and cultural background and reflect on how these factors may impact one's practice and the therapeutic relationship.
- Use clinical supervision to address personal and cultural biases and increase self-awareness.
- Use research findings, clinical theories, practice models, and literature on human

- rights, anti-racist practices, diversity, equity, and inclusion to develop a holistic understanding of client systems and circumstances.
- Apply the various models of clinical practice in ways that are culturally relevant to diverse and oppressed groups.

Click on the link below to view the entire set of 2022 CSWE competencies:

<https://www.cswe.org/getmedia/bb5d8afe-7680-42dc-a332-a6e6103f4998/2022-EPAS.pdf>

V. Course Objectives

Upon completion of this course, students will be able to:

1. Explain the etiological risk factors that lead to the development of addictive behaviors.
2. Evaluate major addiction-related theories in light of empirical evidence and differentiate characteristics of individual addictive behaviors from one another.
3. Understand the relationship of micro, mezzo, and macro policy issues and systems theory on the initiation and maintenance of addictive behaviors.
4. Explore the biological bases for addictive behaviors and the interplay of biology with factors such as age, race, gender, social class, culture, ethnicity, spirituality, religion, sexual orientation, national origin, and physical and mental ability.
5. Develop an understanding of the bio-psycho-social underpinnings of addictive processes that are relevant to social work prevention or intervention based on social and economic justice concerns.
6. Examine the underlying values of different theoretical perspectives on addiction and addiction prevention/treatment efforts.
7. Examine the effect of age, race, gender, social class, culture, ethnicity, spirituality, religion, sexual orientation, national origin, and physical and mental ability on the treatment of individuals with addiction in the macro environment.
8. Effectively differentiate among addictive behaviors and societal perspectives that impact on development and maintenance.
9. Apply knowledge of major theoretical perspectives and biological bases for addictive behaviors to social work practice with various populations.
10. Apply knowledge of human behavior and systems theory to the initiation and maintenance of and recovery from individual and co-morbid addictive behaviors.

11. Identify various stages of addictive processes and types of co-existing addictive behaviors in individuals, families and groups to guide prevention, intervention and treatment efforts.
12. Evaluate addictive behaviors relative to factors of age, race, gender, social class, culture, ethnicity, religion, sexual orientation, national origin, and physical and mental ability and their relevant implications for social work practice.

Students enrolled in this course will fulfill the following content area (domain) requirements necessary for licensure as an LCADC, totaling 36 hours. These are: C103 Differential Diagnosis (6 hours), C105 Psychopharmacology/Physiology of Addiction (6 hours), C401 Addiction Recovery (6 hours), and C403 Biochemical/Medical Client Education (18 hours). For a complete outline of these content areas, see the end of the syllabus.

VI. Required Texts and Readings

Levinthal, C.F. (2023). *Drugs, Behavior, & Modern Society*. NY: Pearson/Allyn & Bacon.
This is an enhanced digital text. The ISBN for this product is 9780135385340.

Other required readings will be available via the Canvas course shell.

VII. Attendance and Participation

Please refer to the school-wide syllabus for the standard attendance policy for classes in on-the-ground (traditional) program, intensive weekend program (IWP), and asynchronous online program. *For this course in particular,*

1. Students must read all assigned material **before class** and be fully prepared for discussion of the material as well as its application to their own experiences. The course will adopt a seminar format, which depends on full participation from all members.
2. **ACT** Certificate Program requirements include **mandatory** attendance at **all** in-person course meetings. Students missing more than 10% of in-person instruction time will be required to withdraw from and retake the course. Licensing requirements are such that students missing more than 10% of any instructional time will be considered at risk for course failure and/or difficulty in successfully completing the **ACT** program.

Students who are not in the ACT Certificate Program may miss no more than 10% of “in-person” instruction time (2 hours) or they will lose 10% off the participation points on their final grade. Missing more than 10% of “in-person” instruction time will result in a further 10% deduction from the final grade.

Zoom (Conferencing Platform) Policy

If your class section requires class meetings that take place on a web-conferencing platform like Zoom, then attendance will be treated as if you were in an actual face-to-face classroom. Students are expected to join the class on time, with their cameras on throughout the class.

You are expected to be available and attentive with your microphone muted unless you are speaking. Most importantly, you should make arrangements to attend class in a quiet space, free from distractions. Please do not join from work, your car, your home or other space if there are co-workers, pets, household members or others in the background. Please be respectful of the instructor and your peers online just as you would be in a physical classroom. For non-ACT students, failure to adhere to this policy will result in a deduction of class participation points. For ACT students where attendance is mandatory, failure to adhere to this policy will count as a missed class.

3. Students will be expected to share examples from their professional and/or fieldwork experience as well as from their current experience within the class groups. This requires respectful reflection and integration of the NASW Code of Ethics with particular regard to cultural competence and respect for the dignity and worth of all. For social workers, confidentiality is a major ethical responsibility. Each student must maintain confidentiality concerning any personal or case material discussed in class. No information revealed in class is to be discussed with anyone outside the class environment.
4. Professional social workers must have excellent writing skills. Proper grammar, syntax, spelling, and appropriate referencing are expected for all assignments.

Your journals will be:

- Thoughtful, thought-provoking, and **concise** (longer is not necessarily better!)
- Responsive to the directions of the assignment.
- Grammatically correct, error-free, in APA style; see link for APA style information <http://apastyle.apa.org/> or <http://owl.english.purdue.edu/owl/resource/560/01/>
- Signed under the following written pledge: ***On my honor, I have neither received nor given any unauthorized assistance on this examination (assignment).*** You may ask another person to review your paper, making comments on editorial issues such as spelling and grammar, but no other person may contribute ideas or content.
- On time on the due date. Students are given a week to submit assignments and no late assignments will be accepted for any reason.
- Your own work. Please review these websites for information about what is acceptable and what constitutes plagiarism: <http://www.indiana.edu/~wts/pamphlets/plagiarism.pdf> and <http://owl.english.purdue.edu/owl/resource/589/01/> and <http://www.library.ualberta.ca/guides/plagiarism/> Please talk with your instructor if you have any additional questions.

5. When submitting materials, be sure to confirm that the paper was properly loaded onto the course website. If you are having problems, email the Canvas Helpdesk for assistance. Do not wait until a few minutes before the due date/time to submit your work. Papers that are late because you had technical trouble submitting them at the last minute are counted as late!

VIII. Assignments and Grading

All written assignments **must** follow APA format. The professor reserves the right to reduce the letter grade for any assignment that does not conform to APA format.

All assignments are due on Day 1 of the week, but students may submit the assignment up until Day 1 without penalty. In rare instances, due to unanticipated and extenuating student circumstances, students may need additional time to complete an assignment. Therefore, students may submit assignments late. However, assignments will receive a 10% deduction for each day late. Discussion board posts and other “real-time” assignments are not eligible for any extensions.

SSW MSW Grading Scale: Below is the grading scale for the MSW program

A	92-100
B+	87-91
B	82-86
C+	77-81
C	70-76
F	0-69

*Scores to be rounded up at .5

Assignment Value

- Participation in Student Introduction and Discussions 20%
- Journal Activities 20%
- Quizzes 30%
- Response Paper 30%

See the assignments at end of syllabus for a more detailed discussion of grading.

IX. Course Outline

A variety of methods are used including lectures, discussions, exercise, assignments, readings, and videos.

Module 1: Drugs and Behavior Today

Weekly Objectives

1. Explain differential attitudes toward drug-taking behavior over time.
2. Identify patterns of drug use in the United States.
3. Explain what constitutes "drug abuse."

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 1: "Drugs and Behavior Today" Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for this chapter in the Levinthal text.	none	Day 1
Lecture Drugs and Behavior Today	none	Day 1
Discussion Risk and Protective Factors	10	<i>Initial post:</i> Day 1 (recommended) <i>Responses to classmates:</i> Day 1 See Note below in "Course Assignments" for important guidance on discussion responses.
Quiz Module 1 Quiz	40	Day 1

Module 2: Issues and Effects of Drug-Taking

Weekly Objectives

1. Explain the concepts of tolerance acute and chronic toxicity, and dose-response curve.
2. Analyze the relationship of drug abuse to social problems and resulting policy implications.

3. Explain the neurochemistry of psychoactive drugs and how these drugs affect the brain and nervous system.
4. Identify the factors that determine the behavioral impact of drugs and the physiological and psychological factors of drug-taking behavior

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 2: "Drug-Taking Behavior: Personal and Social Issues" Chapter 3: "How Drugs Work in the Body and on the Mind" Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for these chapters.	none	Day 1
Lectures Drug-Taking Behavior: The Personal and Social Concerns How Drugs Work in the Body and on the Mind	none	Day 1
Discussions Physiological and Psychological Dependence Motivational System in the Brain	10	<i>Initial post: Day (recommended)</i> <i>Responses to classmates: Day 1</i>
Journal News Brief Critique	10	Day 1
Quiz Module 2 Quiz	40	Day 1

Module 3: Opioids

Weekly Objectives

1. Identify medical uses of opioid drugs.
2. Discuss heroin and prescription pain medication use, abuse, and treatment.

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 4: "Opioids" Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for this chapter	none	Day 1
Lecture Opioids	none	Day 1
Discussions Managing Pain Medication Maintenance Medications/Medication Assisted Treatment	10	<i>Initial post:</i> Day 1 (recommended) <i>Responses to classmates:</i> Day 1
Journal News Brief Critique	10	Day 1
Quiz Module 3 Quiz	40	Day 1

Module 4: Cocaine and Amphetamines

Weekly Objectives

1. Explain how cocaine works in the brain
2. Identify patterns of cocaine abuse and cocaine treatment.
3. Explain the acute and chronic effects of amphetamines.
4. Identify patterns of methamphetamine abuse and medical uses for stimulant drugs.

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 5: "The Major Stimulants: Cocaine and Amphetamines" Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for these chapters.	none	Day 1
Lectures The Major Stimulants: Cocaine and Amphetamines	none	Day 1
Discussions Cocaine Sentencing Disparities Regulating Drug-Making Behavior	10	<i>Initial post:</i> Day 1 (recommended) <i>Responses to classmates:</i> Day 1
Journal News Brief Critique	10	Day 1
Quiz Module 4 Quiz	40	Day 1

Module 5: Marijuana and Hallucinogens

Weekly Objectives

1. Provide a historical overview of marijuana use and the gateway hypothesis.
2. Summarize the acute and chronic effects of marijuana usage, including medical marijuana.
3. Provide examples within the four categories of hallucinogenic drugs.
4. Describe the effects of prominent hallucinogens.

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 6: "LSD and Other Hallucinogens" Chapter 7: "Marijuana" Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for these chapters.	none	Day 1
Lectures LSD and Other Hallucinogens Marijuana	none	Day 1
Discussions Legalized Marijuana Ketamine	10	<i>Initial post:</i> Day 1 (recommended) <i>Responses to classmates:</i> Day 1
Journal News Brief Critique	10	Day 1
Quiz	40	Day 1

Module 5 Quiz		
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Module 6: Alcohol (Part 1)

Weekly Objectives

1. Summarize the history of alcohol use and patterns of consumption.
2. Explain the pharmacology of alcohol and its effects on the brain
3. Explain the acute physiological and behavioral effects of alcohol use and abuse.
4. Evaluate the present position on the health benefits of alcohol consumption.

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 8: "Alcohol: Social Beverage/Social Drug" Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for this chapter.	none	Day 1
Lecture Alcohol: Social Beverage/Social Drug	none	Day 1
Discussions Binge Drinking in College Risks and Benefits of Alcohol Consumption	10	<i>Initial post:</i> Day 1 (recommended) <i>Responses to classmates:</i> Day 1
Journal News Brief Critique	10	Day 1
Quiz	40	Day 1

Module 6 Quiz		
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Module 7: Alcohol (Part 2)

Weekly Objectives

1. Summarize the perspective of alcoholism as a disease as well as identify associated stereotypes and definitions.
2. Identify the genetics, physiological effects, and patterns of chronic alcohol abuse.

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 9: "Chronic Alcohol Abuse and Alcoholism"	none	Day 1
Lecture Chronic Alcohol Abuse and Alcoholism	none	Day 1
Discussions Universities and Regulating Student Drinking The Dram Shop Law	10	<i>Initial post:</i> Day 1 (recommended) <i>Responses to classmates:</i> Day 1
Journal News Brief Critique	10	Day 1
Quiz	40	Day 1

Module 7 Quiz		
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Module 8: Nicotine, Tobacco, and Caffeine
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Weekly Objectives

1. Summarize the history of tobacco use and the influence of the tobacco industry.
2. Identify patterns of smoking behavior, smoking dependence, and health consequences of smoking.
3. Explain smokeless tobacco and smoking cessation.
4. Discuss the use of caffeine in food and beverages.
5. Compare similarities of caffeine and other drugs.
6. Identify both the benefits and risks of caffeine use and abuse as well as the medical applications and special populations of concern.

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 10: "Tobacco Use and Nicotine Vaping" Chapter 11: "Caffeine" Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for this chapter.	none	Day 1
Lecture Tobacco Use and Nicotine Vaping Caffeine	none	Day 1
Discussions	10	<i>Initial post: Day 1 (recommended)</i>

Rights of Smokers and Non-Smokers Caffeine		<i>Responses to classmates: Day 1</i>
Journal News Brief Critique	10	Day 1
Quiz Module 8 Quiz	40	Day 1

Module 9: Performance-Enhancing Drugs & Prescription and Over-the-Counter Drugs

Weekly Objectives

1. Examine drug-taking behavior in sports.
2. Discuss the use and abuse of anabolic steroids, non-steroid hormones, and performance-enhancing supplements.
3. Summarize the history of FDA-approved drugs and the approval process and the pharmaceutical industry.
4. Discuss dietary supplements as drugs.

Learning Activity	Points	Due Day
Reading Drugs, Behavior, and Modern Society (9/E): Chapter 12: "Performance-Enhancing Drugs and Drug Testing" Chapter 14: "Prescription Drugs, Over-the-Counter Drugs, and Dietary Supplements"	none	Day 1

Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for these chapters.		
Lectures Performance-Enhancing Drugs Prescription Drugs, Over-the-Counter Drugs, and Dietary Supplements	none	Day 1
Discussions Sports and Steroids Usage Abuse of OTC Drugs and Supplements	10	<i>Initial post: Day 1 (recommended)</i> <i>Responses to classmates: Day 1</i>
Journal News Brief Critique	10	Day 1
Quiz Module 9 Quiz	40	Day 1

Module 10: Sedative-Hypnotics, Anxiolytic Drugs, and Inhalants

Weekly Objectives

1. Discuss barbiturates, non-barbiturate sedative-hypnotics, benzodiazepines and other depressants and GHB.
2. Explain the pharmacology and misuse of glue, solvents, aerosols as well as patterns of inhalant abuse and societal responses.

Learning Activity	Points	Due Day
Reading	none	Day 1

<p>Drugs, Behavior, and Modern Society (9/E):</p> <p>Chapter 13: "Sedative-Hypnotics, Anxiolytic Drugs, and Inhalants"</p> <p>Please be sure to explore any enhancements (e.g., figures, audio, interactions) in the text for this chapter.</p>		
<p>Lecture</p> <p>Sedative-Hypnotics, Anxiolytic Drugs, and Inhalants</p>	none	Day 1
<p>Discussions</p> <p>Long-term Consequences of Inhalant Abuse</p> <p>Abuse of Anti-Anxiety Medication</p>	10	<p><i>Initial post:</i> Day 1 (recommended)</p> <p><i>Responses to classmates:</i> Day 1</p>
<p>Journal</p> <p>News Brief Critique</p>	10	Day 1
<p>Quiz</p> <p>Module 10 Quiz</p>	40	Day 1

Module 11: Gambling (Part 1)

Weekly Objectives

1. Identify societal perspectives on gambling through history.
2. Identify patterns and preferences in gambling behavior.
3. Differentiate among special populations with gambling disorders.

Learning Activity	Points	Due Day
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<p>Reading</p> <p>Volberg, R.A. & Williams, R.J. (2014). Epidemiology: An international perspective. In D.C.S. Richards, A. Blaszczynski, & L. Nower (eds.), <i>The Wiley-Blackwell Handbook of disordered Gambling.</i>, London: Wiley-Blackwell, pp. 26–48. Chapter 2-Epidemiology.pdf</p> <p>Temcheff, C.E., St-Pierre, R.A. & Derevensky, J.L. (2014). Gambling among teens, college students, and youth. In D.C.S. Richards, A. Blaszczynski, & L. Nower (eds.), <i>The Wiley- Blackwell Handbook of disordered Gambling.</i>, London: Wiley-Blackwell, pp. 306–326.Chapter 14-Gambling among teens, college students and youth.pdf</p> <p>Lister, J.J. & Nower, L. (2014). Gambling and older adults. In D.C.S. Richards, A. Blaszczynski, & L. Nower (eds.), <i>The Wiley-Blackwell Handbook of disordered Gambling.</i>, London: Wiley- Blackwell, pp. 347–360.Chapter 16-Gambling and older adults.pdf</p> <p>Nower, L. & Blaszczynski, A. (2014). Legal and financial issues and disordered gambling. In D.C.S. Richards, A. Blaszczynski, & L. Nower (eds.), <i>The Wiley-Blackwell Handbook of disordered Gambling.</i>, London: Wiley-Blackwell, pp. 386–399.Chapter 16-Legal and financial issues and DG.pdf</p>	<p>none</p>	<p>Day 1</p>
<p>Lecture</p> <p>Gambling</p>	<p>none</p>	<p>Day 1</p>

Discussion Glamorization of Gambling	10	<i>Initial post:</i> Day 1 (recommended) <i>Responses to classmates:</i> Day 1
Paper Response Paper (Due Week 14)	10	(ongoing) Module 14, Day 1

Module 12: Gambling (Part 2)

Weekly Objectives

1. Describe the dynamic nature of the diagnostic criteria and the advent of the behavioral addictions.
2. Identify the stages of addiction to gambling.
3. Explain the etiology of disordered gambling and its attendant risk and resiliency factors.

Learning Activity	Points	Due Day
Reading Blaszczynski, A., & Nower, L. (2002). A pathways model of problem and pathological gambling. <i>Addiction</i> , 97(5), 487–499. Blaszczynski Nower (2002) Pathways Model of problem gambling.pdf  Nower, L., Martins, S. S., Lin, K. H., & Blanco, C. (2013). Subtypes of disordered gamblers: results from the National Epidemiologic Survey on Alcohol and Related Conditions. <i>Addiction</i> , 108(4), 789–798 Nower et al. (2013) Subtypes of disordered gamblers.pdf  Nower, L. & Caler, KR. (2015). Addictions: Gambling. Encyclopedia of	none	Day 1

Social Work (online). NY: Oxford University Press. Nower & Caler.pdf		
Lecture Gambling Prevalence	none	Day 1
Discussion Pathways Model	10	<i>Initial post:</i> Day 1 (recommended) <i>Responses to classmates:</i> Day 1
Paper Response Paper (Due Week 14)	10	(ongoing) Module 14, Day 1

Module 13: Video Game Addiction

Weekly Objectives

1. Identify key characteristics of (Internet) Gaming Disorder, including signs and symptoms described in the DSM-5 and ICD-11.
2. Recognize the risk factors of (Internet) Gaming Disorder in certain populations.
3. Explore significant emerging issues concerning the convergence of video gaming and gambling and the potential for resulting harm.

Learning Activity	Points	Due Day
Reading Anthony, W. L., Mill, D., & Nower, L. (2020). Internet gaming disorder and problematic technology use. Chapter 9. In A. L. Begun & M. Murray (Eds). <i>Handbook of social work and addictive behaviors</i> . Routledge. https://doi.org/10.4324/9780429203121 Anthony, W. L., Mill, D., & Nower, L. (2022). Evaluation of the psychometric properties of DSM-5	none	Day 1






<p>Internet Gaming Disorder measures: A COSMIN systematic review and meta-analysis. <i>Clinical Psychology: Science and Practice</i>, 30(2), 170-185. https://doi.org/10.1037/cps0000123</p> <p>Mills, D. J., Anthony, W. L., Lee, U., & Nower, L. (2023). Implications of the increasing convergence of video gaming and gambling: A narrative review. <i>Canadian Journal of Addiction</i>, 14(3), 33-42.</p>		
<p>Lecture</p> <p>Video Game Addiction</p>	none	Day 1
<p>Discussion</p> <p>Video Game Addiction</p>	10	<p><i>Initial post: Day 1 (recommended)</i></p> <p><i>Responses to classmates: Day 1</i></p>
<p>Paper</p> <p>Response Paper (Due Week 14)</p>	10	<p>(ongoing)</p> <p>Module 14, Day 1</p>

Module 14: Sex and Food Addictions

Weekly Objectives

1. Provide an overview of sex and food addictions.
2. Identify reasons for and against classifying sex and food behaviors as addictions.
3. Discuss current research regarding certain behavioral addictions.

Learning Activity	Points	Due Day
<p>Reading</p> <p><i>Hypersexual Disorder</i></p>	none	Day 1

<p>Campbell, M.M. & Stein, D.J. (2015). Hypersexual disorder. . In N.M. Petry (ed), <i>Behavioral Addictions: DSM-5 and Beyond</i>. NY: Oxford University Press, pp 101–123 Campbell & Stein.pdf.pdf</p> <p>Kafka, M.P. (2010). Hypersexual disorder: A proposed diagnosis for DSM-V. <i>Archives of Sexual Behavior</i>, 39, 377–400 kafka (2010) Hypersexual disorder (for).pdf</p> <p>Moser, C. (2011). Hypersexual disorder: Just more muddle thinking. <i>Archives of Sexual Behavior</i>, 40, 227–229 Moser (2011) hypersexual disorder (against).pdf</p> <p><i>Food Addiction</i></p> <p>Gearhardt, A.N., White, M.A. & Potenze, M.N. (2011). Binge eating disorder and food addiction. <i>Current Drug Abuse Review</i>, 4(3), 201–207 Gearhardt et al (2012) BED and food addiction.pdf</p> <p>Smith, D. G., & Robbins, T. W. (2013). The neurobiological underpinnings of obesity and binge eating: a rationale for adopting the food addiction model. <i>Biological psychiatry</i>, 73(9), 804–810 Smith and Robins. Biological Underpinnings of Obesity.pdf</p>		
<p>Lectures</p> <p>Sexual Disorder</p> <p>Food Addiction</p>	<p>none</p>	<p>Day 1</p>
<p>Discussion</p>	<p>10</p>	<p><i>Initial post: Day 1</i> (recommended)</p>

Hypersexual Disorder		<i>Responses to classmates: Day 1</i>
Paper Response Paper	10	Day 1

Module 15: Liberatory Consciousness Framework: Addiction Policies

Weekly Objectives

1. Explain the Liberatory Consciousness Framework.
2. Recognize that we live in an oppressive society, which enables racial, social, economic, and health inequities to persist.
3. Develop explanations about why oppression is happening.
4. Identify actions that can be taken to promote equity and justice.
5. Identify ways to collaborate with others to address what is contributing to an oppressive society.
6. Recognize how past and current addiction policies have contributed to racial, social, economic, and health inequities.
7. Apply the 4A's of the Liberatory Consciousness Framework to at least one addiction policy in the U.S.

Learning Activity	Points	Due Day
Reading Love, B. J. (2000). Developing a liberatory consciousness. <i>Readings for diversity and social justice</i> , 2(470-474) Liberatory Consciousness 4A's Infographic	None	Day 1
Discussion Applying the Liberatory Consciousness Framework: Addiction Policies	10	<i>Initial post: Day 1 (recommended)</i> <i>Responses to classmates: Day 1</i>

XVII. Course Assignments

Online Discussions and Participation

20% of final grade

You will participate in regular discussions on issues relevant to the readings. You are expected to post at least three times to each topic, beginning with an initial post that is recommended by Day 1, and a response to two of your colleagues' posts by Day 1. All postings and responses should be done by the indicated due days and times; you must post both the initial post and responses to get full credit. These posts should demonstrate knowledge of the reading material and insights from your experiences in social work, if applicable. Posts will be graded at the end of the module so no late posts will be counted.

***Please Note:** We have made all the discussion and journal questions available in the Course Essentials module on Canvas to allow students to work on their answers at their own pace. However, responding "in vivo" and discussing with classmates is an essential component of the pedagogy of this course. For that reason, if you wish to answer the discussion questions early, you will need to write your initial drafts in a document and then copy/paste them into Canvas to submit during the proper time frame for each discussion. You cannot post to Canvas in advance of the assigned discussion window. All responses to classmates will need to be made during the assigned time frame for each discussion as well.*

Journal Activities

20% of final grade

You will keep a regular journal throughout much of the course. In each module, you will submit a two-page journal report on a current addiction-related newsbrief. The journal entries should be **single-spaced** with one inch margins and no larger than 12-point type. On the first page, you should paste a copy of the newsbrief you are using for your analysis. The second **full** page should contain your detailed, critical analysis of the issues in the brief.

Your journal entries should be thoughtful critiques of the briefs and their application to social work practice. Each critique should address the following prompts:

1. What is the relevant issue(s) for social work?
2. Why is this issue(s) relevant?
3. Using examples from your work, practicum, or life experience, what are the implications of this issue(s) for particular client groups?

Quizzes

30% of final grade

The quizzes are based on readings and lectures from the Levinthal text.

Response Paper

30% of final grade

Gambling is the first and, currently, only behavioral addiction. Internet gaming may soon be the second. Time was that only substances taken into the body and affecting the mind were “addictive.” However, increasingly, studies are documenting that behaviors can have the same genetic origins and induce chemical changes and adverse consequences that are similar to those for substance-based addictions.

Please write a four- to five-page response paper that addresses the following questions and issues:

- Are all behaviors potentially addictive for some people? How do we decide which ones become “disorders”?
- Where is the intersection between biology and free will? Just because someone does something to excess, should they be diagnosed with a disorder?
- What possible abuses could flow from labeling bad behavior as “addiction”? Where does personal responsibility fit in?
- Do your answers differ based on whether the addiction is substance-based or behavioral? Why or why not?
- Where do social workers fit in these decisions?

Where possible, bring in evidence from your readings to support your position. You may also use examples from material in other classes or from your job or practicum experiences.

The paper should be double-spaced, one-inch margins, in 12-point type, and saved as a Word document. The paper needs to be submitted to the Dropbox (not through email) by the indicated due day and time.

LCADC Content Areas/Domains Covered in this Course

C103 - Differential Diagnosis

1. Develop a written diagnostic summary based on the results of separate assessments, including gambling, by other professionals.
2. Document ongoing treatment needs identified by regular assessments performed throughout the continuum of care and negotiate adjustments to the treatment plans to assure new treatment needs are addressed.

3. Formulate mutually agreed upon goals, objectives, and treatment methods based upon assessment findings of the client's strengths, weaknesses, needs, and problems for the purpose of directing a course of treatment.
4. Define the terms reliability, validity, and sample population.
5. Develop a familiarity with the recognized assessment instruments currently used with SUD's, other addictive disorders and mental health disorders. The following will be included: a. DSM Diagnostic and Statistical Manual b. MAST Michigan Alcoholism and Addiction Screening Test c. AUDIT Alcohol Use Disorder Identification Test) d. LOCI Locus of Control Inventory e. SASSI Substance Abuse Subtle Screening Inventory f. SOGS South Oaks Gambling Screen g. MMPI Minnesota Multiphasic Personality Inventory h. ASAM Dimensions i. FTND Fagerstrom Test for Tobacco Use Disorder j. BDI Beck Depression Inventory k. MHSF-3 Mental Health Screening Form l. SSI-SA Simple Screening Instrument for Substance Abuse m. DAST Drug Abuse Screening Test n. MAYSI Massachusetts Youth Screening Inventory o. ASI Addiction Screening Index
6. Select, administer, score, and interpret to clients the results of alcohol, tobacco, and other drug assessment instruments in order to provide accurate, standardized measures clients' problems.
7. Explain the purpose, rationale, and methods associated with the assessment process to the client to assure understanding and compliance.
8. Assess client's immediate needs by evaluating observed behavior and other relevant information including signs and symptoms of intoxication and withdrawal.
9. Administer appropriate evidence-based screening and assessment instruments specific to clients to determine their strengths and needs.
10. Competency 34: Analyze and interpret the data to determine treatment recommendations.

C105: Psychopharmacology/Physiology of Addiction

1. Define the meaning of psychopharmacology.
2. Identify the major structural and functional units of the brain.
3. Identify the major neurotransmitters within the nervous system.
4. Explain the mechanism of action of neurotransmitters within the CNS.
5. Define the meaning of half-life, therapeutic dose, effective and lethal dose.
6. Distinguish between tolerance and withdrawal.
7. Distinguish between fat and water solubility.
8. Competency 14: Describe effects of various drugs of abuse on the major physiological body systems.

C401: Addiction Recovery

1. Understand the difference between Substance Use and Substance Use Disorder as per the current DSM.
2. Acquire basic knowledge of the various models of addiction.
3. Explain to client the various stages of addiction and recovery.
4. Be able to explain the following terms:
 - a. Addiction
 - b. Recovery
 - c. Harm reduction.
 - d. Self Help groups, etc

- e. Relapse and Relapse Prevention
 - f. Abstinence
 - g. Sobriety
 - h. Wellness (Biopsychosocial)
5. Competency 75: Establish a helping relationship with the client characterized by warmth, respect, genuineness, concreteness, and empathy.
 6. Competency 76: Facilitate the client's engagement in the treatment and recovery process.
 7. Competency 77: Work with the client to establish realistic, achievable goals consistent with achieving and maintaining recovery.
 8. Competency 78: Promote client knowledge, skills, and attitudes that contribute to a positive change in substance use behaviors.
 9. Competency 79: Encourage and reinforce client actions determined to be beneficial in progressing toward treatment goals.
 10. Competency 80: Work appropriately with the client to recognize and discourage all behaviors inconsistent with progress toward treatment goals.
 11. Competency 83: Facilitate the development of basic and life skills associated with recovery

C403 – Biochemical/Medical Client Education

1. Explain to clients the physical effects of various substances. a. Stimulants –Depressants- Analgesics-THC -etc.
2. Explain to client the role of psychotherapeutic medications associated with drug use and withdrawal.
3. Be able to explain the following terminologies:
 - a. Therapeutic Medications
 - b. Antidipostropics (Create adverse physical reactions.)
 - c. Agonist – Drug that can be substituted for the drug of abuse to controllable form of addiction
 - d. Antagonist – Drugs that occupy the same receptor site on the brain, as does the specific drug of abuse.
4. Competency 1: Understand a variety of models and theories of addiction and other problems related to substance use.
5. Competency 3: Describe the behavioral, psychological, physical health, and social effects of psychoactive substances on the person using and significant others.
6. Competency 10: Describe a variety of helping strategies for reducing the negative effects of substance use, abuse, and Use Disorder.
7. Competency 11: Tailor helping strategies and treatment modalities to the client's stage of Use Disorder, change, or recovery.
8. Competency 13: Adapt practice to the range of treatment settings and modalities.
9. Competency 14: Be familiar with medical and pharmacological resources in the treatment of substance use disorders.

Opiate and Stimulant Education

10. Develop an understanding of the history of opioid use.
11. Identify the types and effects of opioid substances. 1
12. Understand the origin and use of Opioid Replacement Therapies and Medication Assisted Treatment.

13. Understand the interactions between opioids (synthetic & non-synthetic) and other psychotropic substances (licit & illicit)
14. Understand the use of Methadone Maintenance in detoxification and in the recovery process.
15. Become familiar with the new ORT's (Buprenorphine, etc.)
16. Acquire an understanding of the history of stimulant use.
17. Identify the types of stimulant substances (licit and illicit).
18. Understand the interactions between stimulants and other psychotropic substances (licit & illicit)
19. Become familiar with the current status of pharmacological therapies available for stimulant abusers.

Alcohol, Sedative and Hallucinogens

20. Acquire an understanding of the history of alcohol and sedative use.
21. Identify the types and effects of sedative substances.
22. Understand the detoxification process for alcohol and sedatives
23. Understand the interactions between alcohol and sedatives with other psychotropic substances (licit & illicit)
24. Understand the impact of alcohol on physiological systems.
25. Acquire an understanding of the history of hallucinogens.
26. Identify the types and effects of hallucinogenic substances.
27. Understand the interactions between hallucinogens and other psychoactive substances.