

Elizabeth Oshrin Parker  
CPSY 564-21 - Addiction Treatment in  
Family Therapy

**LEWIS & CLARK COLLEGE  
GRADUATE SCHOOL OF EDUCATION  
AND COUNSELING**

**GRADUATE SCHOOL OF EDUCATION AND COUNSELING  
CPSY 564: Treating Addictions in MCFT (2 credits)  
SUMMER 2014**

**Time & Day: Wednesday 5/20-7/22, 5:30 pm to 8:30 pm**  
**Instructor: Elizabeth Oshrin Parker**  
**Place: John R. Howard Hall, Room 202**  
**Contact Information: eparker@lclark.edu**  
**Office Hours: By Appointment**

**CATALOG DESCRIPTION: TREATING ADDICTIONS IN MCFT**

Family Systems view of the development and maintenance of substance abusing patterns for family therapists and other health practitioners. This course will examine the contributions made to the understanding and treatment of substance abuse by family researchers, theorists, and clinicians; and will consider clinical intervention methods of substance abuse with attention to the treatment of adolescents, couples and families.

**COURSE OBJECTIVES**

It is generally understood that Addiction, in its many forms is a destructive force in individuals, families, communities, societies and nations. Today, we cannot talk about the field of mental health without including a wide range of issues stemming from various types of addiction. Indeed, most of the clients with whom we come in contact have been affected by addiction in some way, and yet, many practitioners do not address Addiction directly. An air of mystery still surrounds this area of treatment, even as our understanding of the neurological, familial, social and societal dimensions of so-called “substance use disorders” increases. This course will prepare the participants to question assumptions and biases about the diagnosis, and treatment of addictions and the people who suffer with them, viewing addiction through a systemic lens. Although we will briefly discuss various types of addiction, our primary focus will be on substance addiction, which includes alcohol and other types of psychoactive drugs. Using a wide range of materials from interdisciplinary fields, the participants will be invited to look at the history of substance addiction treatment from its early days to the current practices, including the evidence-based approaches. The discussions will center on the use of self as clinician to invite the afflicted clients into a productive, collaborative engagement, aimed at eliminating clinician bias and distancing, providing opportunities for growth and healing for all parties.

By the end of this semester, students will be able to:

1. Have a general understanding on various types of addictive behaviors.
2. Know the historical development of a paradigm shift in addiction treatment, which is viewing addiction through a systemic lens (unlike understanding addiction as an intrapsychic process), which includes a broader understanding of the contribution of interpersonal and contextual factors of addictive behaviors.
3. Understand the historical development of substance addiction treatment programs, and how the current practices are shaped and influenced by the past.
4. Understand addictions from various predominant theoretical models including a bio-psycho-social spiritual systemic lens.
5. Understand various bio-psycho-social factors, including neurological and genetic processes as contributing factors in addictive behaviors.
6. Understand how substance addiction affects couple and family relationships and various roles and functions within those relational systems.
7. Know how to assess and develop interventions for individuals and families that are affected by substance addiction.
8. Understand the correlation that exists between substance addiction and various psychiatric disorders (co-occurring disorders).
9. Learn the historical antecedents and contributing factors supporting the development of evidence-based approaches to treating addiction in families.
10. Become aware of effective family-based treatment models for substance abuse and addiction.
11. Understand multicultural and social justice issues relative to successful treatment of addiction.

### **READINGS:**

Students can find all article readings listed below in the Week's Topics and Reading section. Additionally, students can find readings from the Big Book online at: [http://www.aa.org/pages/en\\_US/alcoholics-anonymous](http://www.aa.org/pages/en_US/alcoholics-anonymous)

### **PARTICIPATION:**

Participants are required to attend and be actively involved in all scheduled class meetings. This includes being on time, being prepared, and engaging with colleagues as fellow professionals. Becoming a couples and family therapist involves looking closely at ourselves, our values, beliefs and biases. This can be a very personal, and sometimes emotional process. Treating colleagues with respect, listening deeply to their experiences, and being open to diverse world views may encourage a collaborative milieu of care, in which we can all challenge ourselves and each other, and to critically examine and develop our skills and perspectives. In order to prepare for each class, students should carefully read and study all assigned materials to be ready to discuss, and debate and apply the content of readings and actively engage in role-playing activities. Class discussion and interaction with colleagues are fundamental to the process of learning to be a therapist and all sessions include necessary information related to substance addiction treatment. Therefore, if you must miss a class, the instructor will ask you to contribute to the learning community in another way.

### **CPSY DEPARTMENTAL ATTENDANCE POLICY**

Class attendance is expected and required. Any missed class time will be made up by completing extra assignments designed by the instructor. Missing more than 10% of class time may result in failure to complete the class. This would be 4.5 hours of a 45 hour class, 3 hours of a 30 hour class, or 1.5 hours for a 15 hour class. In case of extreme hardship and also at the discretion of the instructor a grade of incomplete may be given for an assignment or the entire course. In such cases, the work to be submitted in order to remove the incomplete must be documented appropriately and stated deadlines met. Students are expected to be on time to class and tardiness may be seen as an absence that requires make-up work.

### **SPECIAL ASSISTANCE**

If you need course adaptations or accommodations because of a disability and/or you have emergency medical information to share please make an appointment with the instructor as soon as possible.

### **NON-DISCRIMINATION POLICY**

*Lewis and Clary College adheres to a nondiscriminatory policy with respect to employment, enrollment, and program. The college does not discriminate on the basis of race, color, creed, religion, sex, national origin, age, handicap, or disability, sexual orientation, or marital status and has a firm commitment to promote the letter and spirit of all equal opportunity and civil rights laws.*

### **CONFIDENTIALITY**

Because of the nature of classroom work and group dynamics it is expected that “personal” information shared by students will be kept in confidence. Students are not required to share personal information as part of the classroom dynamics, or as a requirement for any evaluation or for grading purposes. Students are asked to be intentional about what they choose to share with other students in the class during classroom activities.

### **EVALUATING COURSE PARTICIPATION AND GRADING**

Your successful course participation and completion will be evaluated based of the following modes of assessment:

**1. Completion of all required readings and active participation in class discussions, group, and role-plays (10 points).**

All assigned readings must be completed in advance of the class in which they are to be discussed. That is, every student is responsible for coming to class prepared to participate in a meaningful discussion. Classroom group, discussions and role-plays are opportunities to bring up questions about the assigned readings, further your understanding of the concepts under study, and integrate course material into your understanding of the concepts under study, and integrate material into your clinical practice. You can download them directly from the library (Watzek Library) website. If you encounter any difficulty to access reading materials, please contact the librarian early on in the semester.

**2. Vignette Paper ( 40 pts)**

Pick a family from a T.V. show or movie where at least one character struggles with substance abuse or addictive behaviors, and create a timeline of addiction. Paper should be 5-8 pages, double spaced, and include at least four references that refer to substance abuse disorders or addictive disorder assessments. Paper and citations should be written in APA format. First paragraph should include an introduction to the family including social location (race, ethnicity, socioeconomic class, gender, gender identity, religion, sexual orientation). The remainder of the paper should provide assessment information about the family and person struggling with addiction. Specifically, this section should include: time of onset, duration of use, cravings, times of a desire or unsuccessful efforts to cut down or control use, patterns of use (ie. times spent in activities necessary to obtain substance, substance use, times of recovering from use, location of use, people whom they may use with, severity of use (is there continued use in which it is physically hazardous?), potential triggers leading to use and so forth), functional impact of use (ie. job, school, family, friendships), intergenerational patterns, contextual factors, tolerance, potential co-occurring disorders, family patterns within the use, interventions, attempts at recovery and specify remission if applicable (early remission; sustained remission). Paper should provide enough information to rule in or out a diagnosis of substance abuse or addiction.

**3. 12-Step Group Program Attendance and Experiential Paper (10 pts)**

Attend a 12- step meeting of your choice. Prepare a 1-2 page, single-spaced summary of the meeting attended. The summary should include the type of meeting (ie. AA, NA etc), address, and time of the meeting. Explore a meta perspective (first and second order cybernetics) for example look at what is happening between individuals within the meeting and the collective group. Additionally, please add your individual reaction to and experience of the meeting. Papers will be discussed within class.

**4. Poster Presentation and Handout (40 points)**

Conceptualize a research problem relevant to addiction and family therapy field. Pick a topic that you identify as lacking in the current literature. Conceptualize your topic through a family therapy lens/theory. Provide a synthesis of the current literature on your topic. Write about the clinical implication of your topic in the field of substance abuse disorder/addiction within family therapy. For example: How can your topic be applied within a clinical setting? How will families benefit from your topic? If research is limited, how is that gap affecting families in substance abuse disorder/addiction treatment? Then outline areas where you topic can be expanded in the future to further the field. Handouts should be 2-4 pages (one paragraph for each topic on your poster), single spaced, and should include a reference page with at least six references. If no family therapy literature has covered your topic you may pull from literature from other fields. Handout and citations should be written in APA format. The handout should be an expansion of the poster. The purpose of the handout is to share what you have learned with your colleagues, please bring enough for the class.

For the Poster Presentation please include:

1. Problem statement/Gap (5)
2. Synthesis of current literature (10)

3. Implications for clinical practice (10)
4. Future areas for research (10)
5. Handout for everyone in class (5)

### FINAL GRADING

A = 93-100

A- = 90-92

B + = 88-89

B = 83-87

B- = 80-82

C+ = 78-79

C = 73-77

C- = 70-72

### WEEK'S TOPICS AND READINGS

WEEKLY TOPICS	READINGS
<p><b>Week 1, May 20: What is addiction?</b></p> <p>Course overview            Definition of Addition            Big picture</p> <ul style="list-style-type: none"> <li>• Drug education/ drug categories / street names/ drug interactions/ psychopharmacology</li> <li>• How different drugs present in therapy</li> <li>• Psychosocial meta view</li> </ul>	
<p><b>Week 2, May 27: Why is understanding research relevant to clinical treatment?</b></p> <p>Research/clinician gap            Reading research: overview of stats analysis</p> <ul style="list-style-type: none"> <li>• Evidence based models</li> <li>• Grounded theory</li> <li>• Epistemology overview and discussion</li> </ul>	<p>Halford, W. K., Pepping, C. A., &amp; Petch, J. (2015). The Gap Between Couple Therapy Research Efficacy and Practice Effectiveness. <i>Journal of marital and family therapy</i>.</p> <p>Crespi, T., &amp; Ruechert, Q. (2006). Family Therapy and Children of Alcoholics: Implications for Continuing Education and</p>

	<p>Certification in Substance Abuse Practice. <i>Journal of Child &amp; Adolescent Substance Abuse</i>, 15(3), 33-44.</p>
<p><b>Week 3, June 3: How do family dynamics impact substance abuse disorders/addiction disorders?</b></p> <p>Family Dynamics and organization (myths)-</p> <ul style="list-style-type: none"> <li>• Intergenerational</li> <li>• Secret keeping</li> <li>• Trends in research</li> </ul>	<p>Cullen, J., &amp; Carr, A. (1999). Codependency: An empirical study from a systemic perspective. <i>Contemporary Family Therapy</i>, 21(4), 505-526.</p> <p>Rotunda, R. J., &amp; Doman, K. (2001). Partner enabling of substance use disorders: critical review and future directions. <i>American Journal of Family Therapy</i>, 29(4), 257-270.</p> <p>Soloski, K. L., Kale Monk, J., &amp; Durtschi, J. A. (2015). Trajectories of Early Binge Drinking: A Function of Family Cohesion and Peer Use. <i>Journal of marital and family therapy</i>.</p> <p>Vasquez, M. (2009). Latino/a Culture and Substance Abuse. <i>Journal of Ethnicity in Substance Abuse</i>, 8, 301–313.</p>
<p><b>Week 4, June 10: What is an intervention?</b></p> <p><b>*Vignette Paper Due</b></p> <p>Interventions, logistics</p> <ul style="list-style-type: none"> <li>• How you know when the individual is ready for treatment?</li> <li>• Who do you refer to? How does it work? How to coach family members? Does the person need to go to detox? How does a family navigate insurance?</li> <li>• Windows of opportunity</li> </ul> <p>Share Vignette Paper in small groups</p>	<p>Fernandez, A. C., Begley, E. A., &amp; Marlatt, G. A. (2006). Family and peer interventions for adults: Past approaches and future directions. <i>Psychology of Addictive Behaviors</i>, 20(2), 207.</p> <p>Vetere, A., &amp; Henley, M. (2001). Integrating couples and family therapy into a community alcohol service: a pantheoretical approach. <i>Journal of family therapy</i>, 23(1), 85-101.</p>
<p><b>Week 5, June 17: How do I utilize theoretical frameworks when working with substance abuse and addictive disorders?</b></p> <p>Structure of Treatment</p>	<p>O’Farrell, T. J., &amp; Clements, K. (2012). Review of outcome research on marital and family therapy in treatment for alcoholism. <i>Journal of Marital and Family Therapy</i>, 38(1), 122-144.</p>

<ul style="list-style-type: none"> <li>• Structural</li> <li>• Narrative</li> <li>• Solution Focused</li> <li>• MRI</li> </ul> <p>Family involvement in treatment Self of the therapist</p>	<p>Copello, A. G., Copello, A. G., Velleman, R. D., &amp; Templeton, L. J. (2005). Family interventions in the treatment of alcohol and drug problems. <i>Drug and alcohol review</i>, 24(4), 369-385.</p> <p>Meyers, R. J., Miller, W. R., Smith, J. E., &amp; Tonigan, J. S. (2002). A randomized trial of two methods for engaging treatment-refusing drug users through concerned significant others. <i>Journal of Consulting and Clinical Psychology</i>, 70(5), 1182.</p>
<p><b>Week 6, June 24: What role does 12-Step programs have within treatment?</b></p> <p><b>*12-Step Group Program Attendance and Experiential Paper Due</b></p> <p>12-Step Groups</p>	<p>Alcoholics Anonymous. (2001). <i>Alcoholics Anonymous</i>, 4th Edition. New York: A.A. World Services. Please read pages 1-164 and pg 449.</p>
<p><b>Week 7, July 1: What are addictive disorders?</b></p> <p>Addictive Disorders:</p> <ul style="list-style-type: none"> <li>• Gambling Disorder</li> <li>• Hypersexual Disorder</li> </ul>	<p>Kourgiantakis, T., Saint-Jacques, M. C., &amp; Tremblay, J. (2013). Problem gambling and families: A systematic review. <i>Journal of Social Work Practice in the Addictions</i>, 13(4), 353-372.*</p> <p>Ford, J. J., Durtschi, J. A., &amp; Franklin, D. L. (2012). Structural therapy with a couple battling pornography addiction. <i>The American Journal of Family Therapy</i>, 40(4), 336-348.</p>
<p><b>Week 8, July 8: How does social location impact individuals and families struggling with a substance abuse and/or addictive disorder?</b></p> <p>Law and ethics</p> <ul style="list-style-type: none"> <li>• interpersonal violence</li> <li>• cultural power <ul style="list-style-type: none"> <li>○ social class</li> <li>○ race</li> <li>○ LGBT</li> </ul> </li> </ul>	<p>Hunter, B. A., Jason, L. A., &amp; Keys, C. B. (2013). Factors of empowerment for women in recovery from substance use. <i>American journal of community psychology</i>, 51(1-2), 91-102.</p> <p>Collins, M., Ready, J., Griffin, J., Walker, K., &amp; Mascaro, N. (2007). The Challenge of Transporting Family-Based Interventions for Adolescent Substance Abuse from Research to Urban Community Settings. <i>The</i></p>

<ul style="list-style-type: none"> <li>○ Cultural trends of drug use and implication of social identity</li> <li>○ white privilege</li> <li>● mandated clients</li> </ul>	<p><i>American Journal of Family Therapy</i>, 35, 429–445.</p> <p>Stevens, S. (2012). Meeting the substance abuse treatment needs of lesbian, bisexual and transgender women: implications from research to practice. <i>Substance abuse and rehabilitation</i>, 3(Suppl 1), 27.</p>
<p><b>Week 9, July 15: How does treatment work with Adolescents? What is the impact of parental substance abuse on their children?</b></p> <ul style="list-style-type: none"> <li>● Adolescents <ul style="list-style-type: none"> <li>● psychoeducation for parents</li> <li>● parenting/structural work</li> <li>● attachment</li> <li>● resources for family members</li> </ul> </li> <li>● Children <ul style="list-style-type: none"> <li>● explaining addiction to children in age appropriate ways</li> </ul> </li> </ul>	<p>Anderson, T. L., Scott, B. L., &amp; Kavanaugh, P. R. (2014). Race, inequality and the medicalization of drug addiction: an analysis of documentary films. <i>Journal of Substance Use</i>, (0), 1-14.*</p> <p>Baldwin, S. A., Christian, S., Berkeljon, A., &amp; Shadish, W. R. (2012). The Effects of Family Therapies for Adolescent Delinquency and Substance Abuse: A Meta-analysis. <i>Journal of Marital and Family Therapy</i>, 38(1), 281-304.</p> <p>Turner, W. C., Muck, R. D., Muck, R. J., Stephens, R. L., &amp; Sukumar, B. (2004). Co-occurring disorders in the adolescent mental health and substance abuse treatment systems. <i>Journal of psychoactive drugs</i>, 36(4), 455-462.</p>
<p><b>Week 10, July 22: What is lacking within the current substance abuse and addictive disorder literature?</b></p> <p><b>*Poster Presentation and Paper Due</b></p> <p>Poster Presentations: Students will stand by their poster and share their findings and answer any questions. Students will provide handouts to interested colleagues.</p>	

**Vignette Paper Rubric (40 pts)**



	Marginal	Proficient	Accomplished	Total pt 40
Intro to the family	Basic intro to family with no given social location of the family (0-1 pt)	Descriptive intro to family including some (but not all) social location identifiers (2-3 pts)	Descriptive intro to family including a comprehensive understanding of their social location (race, ethnicity, socioeconomic class, gender, gender identity, religion, sexual orientation) (4-5 pts)	<b>5</b>
Comprehensive timeline of substance use or engagement in addictive behaviors (gambling; hypersexuality)	Identifying some times of use or behavioral engagement with limited ability to track the timeline of use or behavioral engagement (0-1 pt)	Descriptive timeline including times of onset and duration of use (2-3 pts)	Descriptive timeline including times of onset, duration of use, patterns of use, and functional impact of use (4-5 pts)	<b>5</b>
Comprehensive understanding of familial and intergenerational patterns that may be impacting current use	Some understanding of how family and intergenerational patterns may be impacting current use or behaviors but limited ability to provide examples of how the patterns connect to current use or behaviors (0-1 pt)	Identifies some patterns of familial and intergenerational patterns that may be impacting current use or behaviors, yet lacks an understanding or clear description of how it is impacting current use or behaviors (2-3 pts)	Demonstrates an understanding of how familial and intergenerational patterns are impacting current use or behaviors with clear, specific, and concise examples and explanations (4-5 pts)	<b>5</b>
Identifying co-occurring disorders	Limited to no explanation of potential co-occurring disorders (0-1 pt)	Ability to identify potential co-occurring disorder with no clear description of symptoms or ability	Ability to identify a potential co-occurring disorder with clear descriptions of symptoms of the co-	<b>5</b>

		to determine if or if not the co-occurring disorder may be impacting use or behaviors (2-3 pts)	occurring disorder and a clear description of how this co-occurring disorder is impacting (or not impacting) the substance use or behaviors (4-5 pts)	
Ability to give a complete assessment that provides enough information to rule in or rule out a substance abuse disorder or addictive behavior disorder	Limited to no explanation of how the student ruled in or out a substance abuse disorder or addictive behaviors disorder (0-3 pts)	A ruling in or out a substance abuse or addictive behaviors disorder with limited or unclear explanation of how the student came to that ruling (4-6 pts)	A ruling in or out a substance abuse or addictive behaviors disorder with a clear explanation of how the student came to that ruling and an understanding of utilizing the information gathered from assessment to rule in or out a diagnosis (7-9 pts)	<b>9</b>
Ability to utilize assessment information to utilize specifiers	No specification (0 pt)	Specifier with no explanation as to why the student gave the specifier (1-2 pts)	Specifier with a clear explanation of why the student utilized that specific specification (3 pts)	<b>3</b>
APA Format Language Professional writing (sentence fluency, punctuation, grammar), headings, and citations	Confusing, redundant, general Some run-ons or fragments. Limited variety in sentence structure; some errors in grammar, mechanics, and/or spelling Does not follow APA guidelines for heading organization	Some lack of clarity and redundancy Uses simple compound, and complex, sentences; few to no errors in grammar, mechanics, and/or spelling. Does not follow APA guidelines for heading organization	Clear, specific, concise, plain Consistent variety of sentence structure throughout; no errors in grammar, mechanics, and/or spelling. Follows APA guidelines for heading organization	<b>3</b>

	Does not follow APA guidelines for citations with consistency (0-1 pt)	Few errors in APA guidelines for all citations (1-2 pts)	Follows APA guidelines for all citations (2-3 pts)	
Overall Quality and Completion of Paper	Includes most necessary elements at or below minimal level (0 -1 pt)	Includes all necessary elements adequately to meet expectations. (2-3 pts)	Exceeds expectations for all or nearly all categories. (4-5 pts)	<b>5</b>

**Poster Presentation and Handout Rubric (40 points)**

	Marginal	Proficient	Accomplished	Total pts:40
Problem statement/Gap	Identified problem (1pt) Little reasoning Lacks systemic lens and/or addiction application	Identified problem with reasoning (2-3 pts) Some systemic understanding and integration with addiction	Identified problem with clear and concise reasoning (4-5 pts) Integration of systems and addiction as well as a clear argument for why the problem is important to the field	
Synthesis of current literature	Synthesis is missing critical references and/or information about topic. (4-6 pts) Cursory or incomplete	Synthesis includes important references and information on topic chosen (7-8 pts) In-depth and clear	Synthesis includes all important references (9-10)  In-depth concise clearly written	
Implications for clinical practice	Identification of possible interventions (4-6 pts)	Identification of possible interventions with rationale (7-8pts)	Identification of possible interventions with rationale and clear application (8-9pts)	

		Lacks contextual integration of topic with implications of family's social location and larger systems	Includes contextual integration with social location of family as well as demonstrates a clear benefit to families and to the field	
Future areas for research	<p>Identification of possible future areas of research (4-6pts)</p> <p>Lacks focus or unclear</p>	<p>Identification of possible future areas of research with rationale (7-8 pts)</p> <p>Rationale given but may lack clarity or specificity</p>	<p>Identification of possible future areas of research with clear rationale (9-10pts)</p> <p>Specific areas identified and clearly reasoned</p>	
Handout for class	<p>Confusing, redundant, general (1pt)</p> <p>Major APA mistakes Missing or incomplete information</p> <p>Some run-ons or fragments sentences. Limited variety in sentence structure some errors in grammar, and mechanics</p>	<p>Some lack of clarity and redundancy (2-3 pts)</p> <p>Some APA mistakes Covered all areas of the poster.</p> <p>Provide mostly complete information</p> <p>Uses simple compound, and complex, sentences few to no errors in grammar, mechanics, and/or spelling.</p>	<p>Clear, specific, concise, plain (4-5 pts)</p> <p>Few to no APA mistakes Covered all areas of the poster. Provided complete information Consistent variety of sentence structure throughout no errors in grammar, mechanics, and/or spelling.</p>	