WURZWEILER SCHOOL OF SOCIAL WORK
YESHIVA UNIVERSITY

Social Work Practice with Addictions I   **2025**
SWK 6691   **All Professors**

Course Description

Social Work 6691 is designed to increase student knowledge and skills for addressing addictive phenomena and its relation to social work practice issues. Students' values are explored and cognitive and affective processing of macro, meso and micro level practice concerns are covered.

There are 7 modules covering two weeks each starting with *History, Theories and Dimensions of Substance Use Profession* and ending with *Medication Assisted Treatment (MAT) of Opioid Use Disorder*. The course assumes participants have had little-to-no previous exposure to the professional literature and related conceptualizations of addiction; for those who have, this will reinforce your learning, taking it to a deeper level by giving you the opportunity to compare/contrast existing knowledge with colleagues.

Each module includes a structured discussion (often a critique of a case study with the application of concepts and criteria) and a quiz. There will be a final exam and all quiz/exam material is designed to prepare students to test for both social work and addiction counselor licensure.

Attention will be given to biological, psychological and social factors in the etiology of individual addiction and implications for families. Addiction exists in diverse cultural contexts; thus, the importance of language and clinical presentation is addressed. The consequences of addictions will be studied at the individual, family, community and societal levels. There will be some policy covered as well. This course will draw on current research in the field of addictions and will emphasize critical thinking and analysis of the current controversies in the field.

I. COURSE COMPETENCIES
The following Council on Social Work Education Competencies (referred to by Competency number 1, 2, 4, 5, 6, 7, 8) are measured with students' outcome data:

Competency #1: Demonstrate Ethical and Professional Behavior
Social workers working with substance use understand the complexity of the spectrum of substance use disorders (SUD) and options for recovery. Social workers understand and adhere to professional social work values, ethical standards, relevant laws and regulations pertaining to confidentiality and privacy in relation to substance use. Social workers recognize the need to differentiate personal and professional values as they relate to substance use and misuse and understand how their personal experiences and affective reactions may influence their professional judgment; furthermore, they acknowledge their ethical duty to engage in self-reflection, self-regulation, and self-care. Social workers recognize the importance of ongoing professional development activities such as, but not limited to, consultation, continuing education, current research and the ethical use of technological advances as they pertain to substance use and misuse. Social workers utilize best practice standards and engage in the

interprofessional team to guide substance use related service based on best practice standards. Students completing this course will:

- *Make ethical decisions by applying the standards of the NASW Code of Ethics, and other applicable ethical codes of conduct*
- *Demonstrate and role model professional communication in practice situations, including using person-first, non-stigmatizing language and treat clients with SUD equitably without applying personal bias, stigma, or discrimination.*
- *Use self-reflection and self-regulation to manage personal values and biases relative to their own substance use and misuse.*
- *Use the most current, evidence-based and culturally informed knowledge to inform SUD practice, research, and policy development and implementation.*
- *Recognize one's limitations in skills, knowledge, and abilities and work in cooperation with interdisciplinary SUD providers in the trajectory of care.*

Competency #2: Engage Diversity and Difference in Practice

Social Workers working with substance use provide a continuum of services extending from prevention to tertiary care, informed by the values of cultural humility, respect for all cultures, ethnicities, and differences; with the understanding that those we serve are the foremost experts of their own lives and experiences supporting their self-determination. This is enhanced through using the prism of intersectionality and multicultural humility in a collaborative effort that harmoniously blends evidence-based practices. When working with individuals engaged in all levels of substance use, a trauma-focused lens that appreciates historical trauma, combined with a strengths perspective provides a spectrum of intersections of diversity, multiple life challenges and internalized oppression. Social Workers must be able to understand and apply their knowledge of the importance that historically biased descriptive terms have been utilized in the diagnosis and treatment of individuals with substance use disorders. This practice has created many barriers; internal in the form of unconditional positive regard and self-efficacy and external in the form of engaging in recovery services and community support. Social Worker's substance use literacy requires continuous focus on utilizing people first language in order to identify those in recovery as human beings first and their diagnoses or challenges as simply one aspect of their diverse lives. Social Workers must be cognizant of their internal biases in regard to recovery and those who are challenged by it at the micro, mezzo and macro levels. This awareness will be an ongoing practice guide for the continuum of substance use services offered and delivered as well as in education, policy, and research. Students completing this course will:

- *Demonstrate an awareness of how social identity, privilege, and marginalized status can be impacted by the systems they are part of at the individual, family and community levels.*
- *Articulate how an individual's social location; inclusive of their cultural customs and world views inform their experiences with substance use.*
- *Practice cultural humility when supporting clients with substance use challenges which includes a lifelong process of openness, effort, self-awareness and exploring/learning from similarities and differences.*

- *Utilize a strengths-based perspective that facilitates understanding of substance use and its impact in the diverse situations for individuals, families and communities driven by their unique stories.*
- *Consult with supervisors, mentors, and colleagues to enrich self-awareness and self-reflection while practicing multicultural reflexivity to balance the dynamics of power and privilege inherent in the social work position.*

Competency #4: Engage in Practice-informed Research and Research-informed Practice

Social workers understand quantitative and qualitative research methods and their respective roles in advancing a science of social work and in evaluating their practice. Social workers know the principles of logic, scientific inquiry, and culturally informed and ethical approaches to building knowledge. Social workers understand that evidence that informs practice derives from multi-disciplinary sources and multiple ways of knowing. They also understand the processes for translating research findings into effective practice. Students completing this course will:

- *Use practice experience and theory to inform scientific inquiry and research;*
- *Apply critical thinking to engage in analysis of quantitative and qualitative research methods and research findings; and*
- *Use and translate research evidence to inform and improve practice, policy, and service delivery.*

Competency #5: Engage in Policy Practice

Social workers understand that human rights and social justice, as well as social welfare and services for substance-using persons, are mediated by policy and its implementation at the federal, state, and local levels. Social workers understand the history and current structures of social policies and services, the role of policy in service delivery, and the role of practice in policy development. Social workers understand their role in policy development and implementation within their practice settings at the micro, mezzo, and macro levels and they actively engage in policy practice to effect change within those settings. Social workers recognize and understand the historical, social, cultural, economic, organizational, environmental, and global influences that affect social policy. They are also knowledgeable about policy formulation, analysis, implementation, and evaluation. Students completing this course will:

- *Identify social policy at the local, state, and federal level that impacts well-being, service delivery, and access to social services;*
- *Assess how social welfare and economic policies impact the delivery of and access to social services;*
- *Apply critical thinking to analyze, formulate, and advocate for policies that advance human rights and social, economic, and environmental justice.*

Competency #6: Engage with Individuals, Families, Groups, Organizations, and Communities

Social workers understand that engagement is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers value the importance of human relationships. Social workers understand theories of human behavior and the social environment,

and critically evaluate and apply this knowledge to facilitate engagement with clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand strategies to engage diverse clients and constituencies to advance practice effectiveness. Social workers understand how their personal experiences and affective reactions may impact their ability to effectively engage with diverse clients and constituencies. Social workers value principles of relationship-building and inter-professional collaboration to facilitate engagement with clients, constituencies, and other professionals as appropriate. Students completing this course will:

- *Apply knowledge social work practice theory of engagement*
- *Apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks to engage with clients and constituencies; and*
- *Use empathy, reflection, and interpersonal skills to effectively engage diverse clients and constituencies.*

Competency #7: Assess Individuals, Families, Groups, Organizations, and Communities
Social workers understand that assessment is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge in the assessment of diverse clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand methods of assessment with diverse clients and constituencies to advance practice effectiveness. Social workers recognize the implications of the larger practice context in the assessment process and value the importance of inter-professional collaboration in this process. Social workers understand how their personal experiences and affective reactions may affect their assessment and decision-making. Students completing this course will:

- *Collect and organize data, and apply critical thinking to interpret information from clients and constituencies;*
- *Apply knowledge social work practice theory of assessment*
- *Apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks in the analysis of assessment data from clients and constituencies;*
- *Develop mutually agreed-on intervention goals and objectives based on the critical assessment of strengths, needs, and challenges within clients and constituencies; and*
- *Select appropriate intervention strategies based on the assessment, research knowledge, and values and preferences of clients and constituencies.*

Competency #8: Intervene with Individuals, Families, Groups, Organizations, and Communities
Social workers understand that intervention is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers are knowledgeable about evidence-informed interventions to achieve the goals of clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to

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effectively intervene with clients and constituencies. Social workers understand methods of identifying, analyzing and implementing evidence-informed interventions to achieve client and constituency goals. Social workers value the importance of interprofessional teamwork and communication in interventions, recognizing the beneficial outcomes. Students completing this course will:

- *Critically choose and implement interventions to achieve practice goals and enhance capacities of clients and constituencies;*
- *Apply knowledge of social work practice theory of intervention with individuals, families groups, organizations and communities.*
- *Apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks in interventions with clients and constituencies;*
- *Use inter-professional collaboration as appropriate to achieve beneficial practice outcomes;*
- *Negotiate, mediate, and advocate with and on behalf of diverse clients and constituencies; and*
- *Facilitate effective transitions and endings that advance mutually agreed-on goals.*

II. LEARNING OBJECTIVES

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

- Apply historical perspective and context to the understanding of addiction treatment history and contemporary practice.
- Critically analyze the scientific, neurological, and subjective bases for the perceptual and behavioral changes associated with substance use.
- Select and apply culturally appropriate, standardized addiction-specific psychometric assessment instruments.
- Apply self-awareness and self-regulation to manage the influence of personal biases and values in working with diverse clients and constituencies.
- Negotiate the developmental stages of recovery and continuum of substance use disorder services
- Use reflection and self-regulation to manage personal values and maintain professionalism in practice situations.
- Integrate terminology specific to medication-assisted treatment into practice, applying key concepts and practices.

Educational Goals:

By the completion of this course students are expected to be able to: identify and describe terms and concepts related to theory, research, and practice of treatment approaches; review risk and protective factors that influence significant others and primary patients; identify the continuum of substance use services; identify and describe the Developmental Stages of Recovery; identify the DSM 5 diagnoses for all substances associated with a substance use disorder.

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The educational goals of this course align with the Credentialed Alcoholism and Substance Abuse Counselor (CASAC) 350 standardized education and training curriculum for New York State. This same material also meets standards for International Certification & Reciprocity Consortium. Equally important, each module delineates which Council on Social Work Education (CSWE) Educational Policy and Accreditation Standards (EPAS).

IV. <u>COURSE EXPECTATIONS AND GRADING</u>

Students are expected to attend ALL classes and to be on time. Class participation is important and there is an expectation that students will complete the required reading. Students are expected to be prepared for critical discussion, NOT REVIEW, of the content.

Grades are based on attendance, class participation, participation in discussions in Canvas and written assignments. Each assignment will be weighted as follows:

Assignment	Grade %	Due Date
Discussions	40%	Ongoing
Quizzes/Tests	40%	Ongoing
Self Reflection Paper	20%	As assigned

Rubric for Live Online and Classroom Participation, Attendance and Comportment

Class Participation	Contributes to class discussions by raising thoughtful questions, analyzing relevant issues, building on others' ideas, synthesizing across readings and discussions, expanding the class' perspective, and appropriately challenging assumptions and perspectives **8 points**	Attends class regularly and *sometimes contributes* to the discussion in the aforementioned ways. **6 points**	Attends class regularly but *rarely contributes* to the discussion in the aforementioned ways. **4 points**	Attends class regularly but *never contributes* to the discussion in the aforementioned ways. **2 points**
Attendance	Always arrives on time and stays for entire class; regularly attends class; all absences are excused; always takes responsibility for work missed; no deadlines missed.	Minimal lateness; almost never misses a class; no unexcused absences. No	Late to class semi-frequently; misses deadlines.	Late to class frequently misses deadlines **1 point**

	7 points	deadlines missed. 5 points	3 points	
Comportment	Demonstrates excellence in communication, interpersonal skill, respect for the ideas of others and the learning environment, engages in reflective thinking, exemplifies empathy, honesty and integrity, shows respect for diversity, demonstrates ethical conduct, and conducts oneself with a professional demeanor. **5 points**	Occasionally exhibits excellence in comportment; is almost always respectful towards peers, and the learning environment **4 points**	Recurring concerning comportment issues behaves in ways that are not always respectful of peers, and the learning environment **2 points**	Consistent comportment concerns; is often disrespectful to peers and the learning environment **0 points**

Required Texts

The text that will be referenced throughout the course and found in several readings is:

Miller et al. (2024). Electronic Book. **The ASAM Principles of Addiction Medicine** (7th ed). Philadelphia, PA: Wolters Kluwer.

It can be rented as an E-textbook or Hardcover on Amazon.

Other required reading for this course is freely available through Canvas, the course Learning Management System (LMS). Every student is provided a login and password, initial orientation to this intuitive system, and all material is linked within. For those who prefer to work with hard copies, you may download and print. Copywritten articles and book chapters (mostly in PDF format) are legally accessible as all materials are either covered by the University's library subscription services, or are freely available as 'public domain'; for example, government websites, or the occasional YouTube. Your computer must have a PDF reader and be able to manage documents in Microsoft Word. You will also need a video media player on your computer for lectures.

Additional optional reading and audio/video will be posted by the professor from time to time. Also, anonymized case material (assessments) from current and recent clinical treatment will be posted. All assigned reading material will be discussed in online forums; these are not real time discussions, but take place within a brief window of time (72+ hours). As it becomes relevant to discussion and learning, the professor will recommend (not require) additional citations and references for consideration. Always feel free to ask for more. Instructions on how to access and navigate your individual Canvas course shells will be e-mailed by the Wurzweiler School before the start date of the course.

V. <u>COURSE REQUIREMENTS</u>

This class was initially designed to be offered in a fully asynchronous format, relying on Discussion Boards to meet 37.5 contact hours of instruction. The class may also be offered Live Online with the professor for 2 hours each week for 14 weeks and students will complete an additional 9.5 hours throughout the semester on interactive written discussion board and online mandatory CASAC certificate trainings.

Grading rubrics are attached to each assignment and will keep the grading standards objective; the professor retains the privilege of discretion for the final numerical grade for all assignments. Late work will be downgraded at least 10 points out of 100 for each full day late. Any late discussions will have reduced feedback.

You are responsible for completing 7 substantial Discussion Boards, 7 quizzes based on the assigned readings, and 1 critical reflection paper. Each is explained below. **There are less Discussion Boards when the class is offered Live Online**. See and rely on Canvas for all assignments. Also, see the table below in this syllabus for all deadlines. Watch for "Announcements" from the professor in Canvas (they come to your email) for any date changes.

Final grades for the course are issued in accordance with the student handbook.
A= 94-100 A-= 90-93 B+= 87-89 B= 83-86 B-=80-82 C+= 75-79 C=70-74 F<70

1) Discussions: **40% of grade.** For asynchronous offerings of this course there are 7 of these per semester with various due dates – pay close attention. **Live Online classes do not include all the Discussion assignments;** this percent of the grade will be attained through class participation and alternative work assigned by the professor**.**

The Discussion Board in Canvas is our classroom.

When you open the discussion board, picture yourself walking into the classroom filled with students. When you speak (write) everyone can hear (see) it; the same for the professor. For this course you should plan on spending at least 3 hours per week 'in class', writing discussions.

Before you come to class you will have completed the reading or audio/video assigned for the Module, so you are ready to participate in the classroom discussion. This will also take 3+ hours and varies from student to student.

> According to worldwidelearn.com: "Asynchronous communication is the relay of information with a time lag. Discussion forums and email are two examples of how asynchronous communication is employed in online learning. It is very helpful to communicate in this way, because students have plenty of time to formulate thoughts. By communicating [this way] students are able to respond in detail to a question or topic that they might have answered incompletely in a real-time conversation. This time lag in communication helps students internalize information by giving them time to *research*

certain ideas (emphasis added) and extra time for contemplation." You get to think more before you 'speak.'

The professor poses a series of provocative questions and dilemmas to start, often relying on case vignettes and case studies; students formulate written posts to an open discussion board, and are keenly aware that not only the professor, but all members of the class (peers) will be carefully reading and scrutinizing everything they write, and this dynamic tends to elicit high-quality postings and optimal learning.

Students post an original contribution to the discussion within 72 hours of its opening and 3 briefer responses to others within the next 72 hours. Late posts lose grade points. The professor replies to each initial post by students and occasionally to reply posts. This is in writing and occasionally a student post may even elicit a brief video response lecture from the professor. As you decide who and what to respond to, you will skim what others have contributed, sometimes reading their entire post; then, you will select where to respond.

Grades are determined when posts are complete. In order to *lead* the discussion (and earn the top grade) students *must* post early and/or generate most responses from others.

A grading rubric will be applied to your discussion posts each class and includes the following criteria:
- Ideas, Arguments, & Analysis
- Connection to Course Materials
- Contribution to Learning Community
- Writing Quality

- The grading rubric for this assignment is found in the Canvas Learning Management System

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1a) Live Online Classes policy from student handbook

Class Attendance Policy for Face-To-Face and Live Online Classes Students are expected to attend all classes as scheduled. Prompt and regular attendance is an expectation. Social work is an applied professional discipline. Punctuality and attendance are indicative of current and future professional conduct. Gaps in learning resulting from class absences or tardiness compromise the student's ability to fully meet obligations as a professional social worker. An unexcused or uncommunicated absence is a serious matter. (1) To receive credit for a course, students must regularly attend and be prompt in their arrival to class. (2) We realize that some absences are unavoidable. Students are required, prior to the class session, to contact professors to discuss any absence from class. In the event of a hospitalization or emergency, contact the professor within 48 hours of the missed class. (3) Students missing more than 20% of class time will receive an automatic "F" for the class. Exceptions will be made only for excused absences approved by the instructor (see below). Class absences invariably result in missed course content, which could ultimately jeopardize client care. Instructors typically have specific rules about attendance, which might include appropriate consequences as noted on the syllabus (i.e. reduction in grade, or extra assignments to make up material missed). Students are responsible for understanding each instructor's policies on attendance, realizing that any absence from class may affect their grade. In addition to the consequences for absences listed here in the Student Handbook, the instructor's attendance policy as stated in the syllabus, may outline additional consequences for class absences. The instructor retains discretion over the consequences of lateness and absences. (4) In face-to-face classes, some students may have prior arrangements to attend all classes using the Live Online platform (Zoom). Other students, who regularly attend class face to-face, may under extenuating circumstances, and with permission of the instructor, Zoom into a class, but with the understanding that the class will still count as an absence. (5) Students in Live Online or fully Synchronous/virtual classes are expected to arrive to class on-time, and remain in class for the full period by logging in on time and keeping cameras on. Students who leave class by turning the camera off for an extended period, or who frequently leave and return, disrupt the flow of the class and is a discourtesy to instructors and classmates alike; this violates classroom etiquette. Penalties for lateness or for classroom disruptions will be at the discretion of the instructor. 44 (6) The practice of bringing children to class is generally discouraged, due primarily to the impact on the learning environment. Children may not attend class without prior approval by the instructor.

2) Quizzes/Tests/Required outside training certificates: 40% of grade – Quizzes are open book and you may use the materials assigned to study. They are time limited though, and you won't have much time to look things up. They run between 10 and 30 questions. Quizzes and tests may never be taken outside of the time frame specified; there is usually a 48 hour window in which they are open and you have 1-2 hours to complete once started.

The tests are designed specifically to prepare you for testing to become a Credentialed Alcohol and Drug Abuse Counselor (CASAC) in NY and other states; they are also designed to prepare you to test and become a Licensed Clinical Social Worker (LCSW).

3) Critical self-reflection paper, confidential to the professor, 20% of grade. Effective work with addicted populations, whether it is clinical, policy, or research, requires an objective knowledge of one's own values, attitudes, and personal understanding of addiction.

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In this reflection paper, you will generate an essay exploring and describing your own position relative to certain ideas concerning addiction. Employ a narrative/descriptive writing style using the first-person perspective (first person including "I" and "my").

Start by discussing how you learned what you knew about addiction before taking this course. Be specific in your description of learning experiences (about 2-3 good paragraphs). This should be unique to you and personal. Comments should be individualistic and specific, evidencing full authenticity and sincerity. You should support your dialog with personal events and experiences. This work does not require citations or references to the professional literature, but you may if it seems pertinent.

Next, consider what both your personal history and this course has taught you and address these reflection questions:

Step 1 of the 12 steps for Narcotics Anonymous states "We admitted that we were **powerless** over our addiction, that our lives had become unmanageable" (Emphases added). This professes that the addict has no power over their use of the substance and thus life becomes unmanageable — in essence that their free will was compromised by a peculiar form of mental illness.

The DSM states that one criterion for a substance use disorder is that "The substance is taken in larger amounts or over a longer period of time than **intended**" with the key idea being intention (emphasis added). The concept in play here is that intention, volition, and free will are mentally compromised, and therefore insufficient to control the quantity and frequency of use.

Do you believe this? Do you not?

Expose a rationale for your belief one way or another or somewhere in between. This paper is confidential to the professor and treated with clinical-like confidentiality. The professor will apply a very basic grading rubric, but more importantly, will provide substantial written dialog as a response.

GRADING RUBRIC FOR CRITICAL REFLECTION PAPER

- The grading rubric for this assignment can be found on the Canvas Learning Management System

VI. <u>EVALUATION</u>
Students are provided the opportunity to evaluate master courses. An evaluation form pertaining to the course and instructor will be conducted online. Evaluation is ongoing and students are encouraged to report any issues to administration.

VII. <u>OFFICE OF DISABILITIES SERVICES (ODS)</u> collaborates with students, faculty and staff to provide reasonable accommodations and services to students with disabilities. The purpose of reasonable academic accommodations is to assure that there is equal access to and the opportunity to benefit from your education at Wurzweiler. It is the student's responsibility to identify himself/herself/themself to the Office of Disabilities Services (ODS) and to provide documentation of a disability. http://www.yu.edu/Student-Life/Resources-and-Services/Disability-Services/

Students with disabilities who are enrolled in this course and who will be requesting documented disability-related accommodations should make an appointment with the Office of Disability Services, Wilfods@yu.edu, during the first week of class. The office is located in the Belz Building, suite 412. Once you have been approved for accommodations, please submit your accommodation letter and discuss any specifics with me to ensure the successful implementation of your accommodations.

VIII. <u>E-RESERVES</u>
- This course does not use Electronic Reserves: all of your reading is either in the text or linked directly in the Canva Learning Management System

IX. <u>PLAGIARISM</u>
All written work submitted by students is to be their own. Ideas and concepts that are the work of others must be cited with proper attribution. The use of the written works of others that is submitted as one's own constitutes *plagiarism* and is a violation of academic standards. The School will not condone *plagiarism* in any form and will impose sanctions to acts of *plagiarism*. A student who presents someone else's work as his or her own work is stealing from the authors or persons who did the original thinking and writing. *Plagiarism* occurs when a student directly copies another's work without citation; when a student paraphrases major aspects of another's work without citation; and when a student combines the work of different authors into a new statement without reference to those authors. It is also *plagiarism* to use the ideas and/or work of another student and present them as your own. It is **not** *plagiarism* to formulate your own presentation of an idea or concept as a reaction to someone else's work; however, the work to which you are reacting should be discussed and appropriately cited. If it is determined that a student has plagiarized any part of any assignment in a course, the student automatically <u>fail </u>the course. The student also will be placed on Academic Probation and will be referred to the Associate Dean for any additional disciplinary action which may include expulsion. A student may not submit the same paper or an assignment from another class for credit. If students or faculty are concerned that written work is indeed plagiarized, they can use the following "plagiarism checker" websites, easily accessible, and generally free on Google:
www.grammarly.com/plagiarism_checker
www.dustball.com/cs/plagiarism.checker www.plagtracker.com
www.plagium.com/
www.plagscan.com/seesources/
www.duplichecker.com/
As a Wurzweiler student, maintaining good standing in the program is dependent on developing and maintaining high standards of ethical and professional behavior. Students are required to adhere to the Code of Ethics promulgated by the National Association of Social Workers (NASW).

AI POLICY

The objective of this protocol is to define clear guidelines for the appropriate use of Artificial Intelligence (AI) tools and platforms, such as ChatGPT, at WSSW. These guidelines aim to preserve academic integrity, prevent plagiarism, and promote independent scholarly work while acknowledging the potential benefits of AI tools in enhancing research and learning. Though AI tools do offer some potential for enhancing the learning experience, these tools also present

significant risks related to academic dishonesty, particularly plagiarism, and the undermining of critical thinking and originality in scholarly work. Students may use AI tools for the following purposes, provided these uses are in addition to their own creative efforts and they are not relying exclusively on AI:

(1) **Research Assistance:** ChatGPT and other similar tools should not replace primary research and initial literature searches. Tools such as ProQuest, PubMed, and Google Scholar should first be consulted. Students may use other AI tools to supplement an initial search into a topic but only after academic databases, libraries, or other reputable scholarly sources are used and referenced. All sources derived from AI should be carefully checked, as they are frequently incorrect.
(2) **Language Support:** AI can assist with language translation, grammar checks, and vocabulary. WSSW's Writing Consultants should be sought for any writing beyond these areas. Tools such as Grammarly may be used to assist in proofreading, but they should not be used in any way to generate ideas, arguments, or content for assignments.

The use of AI language models, such as ChatGPT, for the purposes listed above, are subject to strict adherence to certain conditions. The intent of this policy is to reinforce the importance that students develop and use critical thinking, writing skills, and originality. AI may be seen as a useful tool, but it should not replace the intellectual work that is central to academic growth.

The following actions are <u>prohibited</u> and will be considered academic misconduct:

(1) **Content Generation:** Students are prohibited from using AI platforms, including ChatGPT, to generate any content submitted as original work.
(2) **Conceptualization and Analysis:** Students may not use AI tools to develop original arguments, ideas, analysis, hypotheses, conclusions or to structure, summarize, paraphrase, or contextualize content for assignments. The cognitive work of creating ideas, forming arguments, and critically engaging with course material must be entirely the student's own effort.

If you are in need of assistance in these areas, we advise using the Writing Consultants. The use of AI language models, such as ChatGPT, will be checked by your professor to ensure that your work is your own. Turnitin and other plagiarism detection tools will be used to verify the originality of your work. Any submission that includes this content presented as the student's own work constitutes plagiarism (see WSSW Policy Manual). More specifically, any content created that is not your own qualifies as academic misconduct and will be referred to the Student Review Committee for further action. The intent of this policy is to reinforce the importance that students develop and use critical thinking, writing skills, and originality. AI may be seen as a useful tool, but it should not replace the intellectual work that is central to academic and professional growth. If there are questions regarding the authenticity of your work, your professor will contact you.

X. <u>HIPAA</u>

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In line with HIPAA regulations concerning protected health information, it is important that you understand that any case information you present in class or coursework will need to be de-identified. What this means is that any information that would allow another to identify the person must be changed or eliminated. This includes obvious identifiers such as names and birth dates but may also contain other information that is so unique to the person that it will allow for identification, including diagnosis, race/ethnicity or gender. If diagnosis, race/ethnicity or gender is directly related to the case presentation, it can be included if it will not allow for identification.

XI.   FERPA & OTHER UNIVERSITY POLICIES
Wurzweiler's policies and procedures are in compliance with FERPA regulations. Information about FERPA regulations can be found **here**.
Drug-Free University Policy can be found **here**.
Policy Statement on Non-Discrimination, Anti-Harassment, and Complaint procedures can be found **here**.
The University's Computer Guidelines can be found **here**.

XII. COURSE SCHEDULE

Required Reading and Schedule of Activities

All deadlines are in Canvas under the "assignments" tab. The deadline for the Discussion Board is for your initial post; you have the rest of the week for replies to others. Watch 'Announcements' for possible deadline changes.

MODULES

This course is organized into 7 Modules and may be taught in either a 7 week or a 14 week semester. When it is being taught in a 14 week format the readings are further broken down by week in the Canvas Learning Management System. Canvas is continuously being updated with the most contemporary material and **if there is a conflict between the syllabus and Canvas, Canvas is correct.**

Module 0) Getting started

Complete this module in the Canvas Learning Management System (LMS) prior to starting Module 1. This pre-course module welcomes you; tells you how to succeed in this course; how to access technology support; provides some online learning resources and discusses net-etiquette. There is a link to an ungraded discussion board where you will add some background information to share with all. Very importantly: there is a link to a quiz which provides the definition of plagiarism; you must answer one question indicating if you read and understand this (yes) or not (no).

Module 1) History, Theories, and Dimensions of Substance Use Profession

Overview: Students are given the historical context for the professional field of substance use disorder. Students are also introduced to treatment terms and concepts related to theory, to updated research, and the module maintains focus on Integration of knowledge with practice.

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Core functions of practice are learned in this module. _Anticipated Outcomes_: Your knowledge, understanding and practical ability as a social worker with substance use disordered clients will be professionally influenced by this module. Your principles and standards of behavior along with judgment of what is important will be challenged and developed.

Required Readings: All resources here may be linked to this through the Canvas LMS. Please read this material in the order it is presented in the Canvas LMS.

Bureau of Labor Statistics (2025). Occupational outlook handbook: Substance abuse, behavioral disorder, and mental health counselors. Retrieved from https://www.bls.gov/ooh/community-and-social-service/substance-abuse-behavioral-disorder-and-mental-health-counselors.htm

Lewis, B., Hoffman, L., Garcia, C.C., & Nixon, S.J. (2018) Race and socioeconomic status in substance use progression and treatment entry. _Journal of Ethnicity in Substance Abuse_, 17(_2_), 150-166. doi: 10.1080/15332640.2017.1336959. Link to this through the Canvas LMS.

NIDA. (2021). Words Matter - Terms to use and avoid when talking about addiction. Retrieved from: https://nida.nih.gov/nidamed-medical-health-professionals/health-professions-education/words-matter-terms-to-use-avoid-when-talking-about-addiction

Miller et al. (2024). Electronic Book. The ASAM Principles of Addiction Medicine (7th ed). Philadelphia, PA: Wolters Kluwer**,** Section 5, Chapter 35: Addiction Medicine in America.

Miller et al. (2024). Electronic Book. The ASAM Principles of Addiction Medicine (7th ed). Philadelphia, PA: Wolters Kluwer**,** Section 1, Chapter 2: Recommended Use of Terminology in Addiction Medicine."

Straussner, S.L.A. (1991). The role of social workers in the treatment of addictions: A brief history. _Journal of Social Work Practice in Addictions_, 1(_1_), 3-9, doi:10.1300/J160v01n01_02. Link to this through the Canvas LMS.

Substance Abuse and Mental Health Services Administration (2004). Substance use disorders: A guide to the use of language. Retrieved from https://www.naabt.org/documents/Languageofaddictionmedicine.pdf you may also Link to this through the Canvas LMS.

Substance Abuse and Mental Health Services Administration (2017). TAP 21: Addiction counseling competencies: The knowledge, skills, and attitudes of professional practice. Retrieved from https://store.samhsa.gov/system/files/sma12-4171.pdf you may also Link to this through the Canvas LMS.

Wencek, M.L. (n.d.). 12 core functions and 46 global criteria. You will link to this through the Canvas LMS.

Video Lecture:

CSWE. (2021). Orientation to Theories of Substance Misuse. Link to video on Canvas LMS.

Conley, T. B., & Aristy, K. (Producers) (n.d.). _12 core functions of a professional helper_ [Video]. Link to video on Canvas LMS.

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Module 2 and Module 3: Physical, Psychological, and Pharmacological Effects of Substance Use.

Overview: In pharmacology the term 'agonist' refers to a substance which, under some conditions, activates a neuro-receptor that it binds to. 'Antagonist' generally refers to a substance binding to a receptor that does not activate a neuro-receptor and can block the activity of other agonists. In these Modules we will be looking at the pharmacodynamics of drugs of abuse. There is some heavy reading ahead, so in order to make it reasonable, the professor has gone through each assigned chapter and listed each section you should read. Feel free to read more; most of what is suggested for skimming over is the heavy chemistry lessons. We will read chapters concerning alcohol; non-alcohol sedative hypnotics; opioids, cocaine, amphetamines and other stimulants; caffeine; nicotine in tobacco; marijuana; hallucinogens; dissociative drugs (i.e. hallucinogens); inhalants; and steroids.

Modules 2 and 3 cover four weeks of the course and include two quizzes and two discussion boards.

Anticipated Outcomes: Following these modules students will be able to summarize the neurological and physiological effects of mind/mood altering substances which often result in pathological and disordered use, in essence addiction. *Activities/Assignments*: For these modules you are to complete the assigned readings and engage in the classroom discussion. There will be two quizzes and two discussion boards.

Required Readings: All resources here are either in your text or may be linked to this through the Canvas LMS. Please read this material <u>in the order it is presented in the Canvas LMS</u>.

Module 2
Mike Parker Evaluation: (Link is posted in Canvas LMS)

- Miller, S. C., Fiellin, D. A., Rosenthal, R., & Saitz, R. (2024). The ASAM principles of addiction medicine, (7th ed.). Wolters Kluwer Health.
  - All readings are from section 2: Pharmacology.
    - Chapter 10: pharmacokinetic and pharmacodynamic principles
      - Basic pharmacology concepts; skip the equations but understand the definitions of major terms such as Agonist, Antagonist, Pharmacogenomics,
    - Chapter 11: Alcohol
      - Substances included in this class (of alcohol); formulations in methods of use; Clinical uses; Brief historical features; Epidemiology; pharmacokinetics; pharmacodynamics; Drug to drug interactions; neurobiology (mechanisms of addiction) but go easy on the hard chemistry; hello chick studies implicating other neurotransmitter systems; Pharmacodynamics. Understand Receptors but skip the chemistry unless interested. Study Tolerance, Sensitization, and Physical Dependence; Addiction

liability, know no you percents and of course tolerance/dependence/
- Chapter 12: Non-Alcohol Sedative Hypnotics
  - Introductory paragraph; list of brand names and comparison to barbiturates; historical features; epidemiology; pharmacodynamics; drug interactions; mechanism of addiction; addiction liability; toxicity states; medical complications

Module 2

- Chapter 13: Opioids
  - Read all – skim some on pharmacokinetics, skim less on pharmacodynamics. Go easy on the hard chemistry though you will appreciate much of even that.
- Chapter 14: The Pharmacology of Stimulants
  - Substances included – some surprises here; formulations and methods of use and abuse; look hard at table 10-1 and 10.2; clinical uses; Non medical use, abuse, independence; Historical features; Epidemiology; pharmacokineteics (skip metabolism); elimination; drug-drug interactions; Pharmacodynamic actions, read all including intoxication, chronic effects, withdrawal, behavioral pharmacology, and other central nervous system effects, cardiovascular system and other organs through reproductive, fetal and neonatal health. Skip through and read endogenous opiates then skip again to conclusions.

Module 3

- Miller, S. C., Fiellin, D. A., Rosenthal, R., & Saitz, R. (2024). The ASAM principles of addiction medicine, (7th ed.). Wolters Kluwer Health.
  - All readings are from section 2: Pharmacology.
    - Chapter 15: Caffeine
      - Read from start through neurobiology then start skimming; focus again on physiological effects and read all through to genetics; focus again on effects on physical health and read all through to conclusions.
        - Watch video called "Bean Freak" starring Dr. Tim Conley as the businessman and former student Matt Radlowski (LCSW, LAC) as the ER based Motivational Interviewer.
    - Chapter 16: Nicotine and Tobacco
      - Read intro; drugs in class; methods of abuse; historical features; skim pharmacokinetics but don't skip it altogether. For example "Sex and race influence nicotine metabolism…"
      Read drug interactions; pharmacologic interactions; psychoactive effects; genetics; psychiatric comorbidity (fascinating); discrimination and self administration; Dependence, tolerance, and withdrawal, specifically withdrawal; the material on 'neurobiologic mechanisms of action' is heavy chemistry and may be at best skimmed; pick up again at 'systemic toxicity' including

other physiologic effects and toxicities and read through the rest of the chapter.

- ▪ Chapter 17: **Cannabinoids**
  - ● Read introduction straight through to the section on neurobiology and mostly skip that section. Remember, this is not a chemistry class, so focus selectively. Read 'relative addiction liability but skim pharmacokinetics. Read all of the toxicity/adverse effects section including major organ systems; read through the remainder of this long chapter.

Module 3

- ● Miller, S. C., Fiellin, D. A., Rosenthal, R., & Saitz, R. (2024). The ASAM principles of addiction medicine, (7th ed.). Wolters Kluwer Health.
  - o All readings are from section 2: Pharmacology.
    - ▪ Chapter 18: Hallucinogens
      - ● Read the introduction; section on substances included (quiz question: what do the initials LSD stand for? DMT?); from there read everything through to Pharmacokinetics and pharmacodynamics well you can skim through the chemistry though read the material on pharmacodynamics (pupillary dilation, blood pressure etc.); the material on subjective effects is required and fascinating; Pharmacokinetics and Pharmacodynamics are reported for each hallucinogen – skim only. Look for commonalities. Focus again on 'toxicity and adverse effects – some myth busting in here. Read drug-drug interactions; skim only (at best) neurobiology but focus in again when you get to 'relative addiction liability and read through to the end.
    - ▪ Chapter 19: Dissociatives
      - ● Read introduction closely to see which drugs we are studying here; skip the chemistry lesson but read on at 'formulations, methods of use, and abuse' through historical features; epidemiology; skim only pharmacokinetics and dynamics but watch for buzzwords in the pharmacodynamics piece: Ketamine is a 'date-rape' drug ("…one exception is the giving of large doses surreptitiously to an unsuspecting person, such as in the illegal act of drug-facilitated sexual assault"). Skip the neurobiology lesson but read 'addiction liability'; read again at 'intoxication and overdose; conclusions and further research.
    - ▪ Chapter 20: Inhalants
      - ● Read introduction; drugs in class (no gasoline or petrol related products?!); read the section on each substance; abuse of inhalants; absorption and metabolism; mechanisms of action (hardly known - ask yourself 'why'?); addiction liability; tolerance and dependence; information also seems lacking on 'clinical chemistry' and 'toxicity/adverse effects (acute, chronic, neuro… continue to read all and ask 'where is the research?). Read

psychiatric disorders; effects on major organ systems; fetal solvent syndrome; and finally 'future research directions' and the green case material.
- o All readings are from section 2: Pharmacology.
  - ▪ Chapter 21: The Pharmacology of Anabolic–Androgenic Steroids

Module 4) Screening and Practice in the Addictions Field

Overview: Before we can begin to diagnose a client and formulate a treatment plan, we must first determine if they have a condition; assess the degree to which the condition is present; and formulate an evaluation. When engaging in clinical social work with potentially addictive clients, the use of Rapid Assessment Instruments (RAI's)—including psychometric tests—is standard. Screening for the presence of the disorder can be as simple as four to seven questions. In this module, we will learn about several of the most common instruments in use and become more familiar with the diagnostic criteria. _Anticipated Outcomes_: Your knowledge, understanding and practical ability as a social worker with substance use disordered clients will be professionally influenced by this module. Your principles and standards of behavior along with judgment of what is important will be challenged and developed.

Required Readings: All resources here may be linked to this through the Canvas LMS. Please read this material in the order it is presented in the Canvas LMS.
Miller et al. (2024). Electronic Book. The ASAM Principles of Addiction Medicine (7th ed). Philadelphia, PA: Wolters Kluwer: Section 4, "Diagnosis, Assessment and Early Intervention (Chapters 31, 32, and 33, consecutively.)
Conley, T.B. (2001). Construct validity of the MAST and AUDIT with multiple offender drunk drivers. _Journal of Substance Abuse Treatment_, 20, 287-295. Link to this through the Canvas LMS.
Straussner, S.L.A. (2013) The DSM–5 diagnostic criteria: What's new? _Journal of Social Work Practice in the Addictions_, 13(_4_), 448-453. doi:10.1080/1533256X.2013.840199. Link to this through the Canvas LMS.
Substance Abuse and Mental Health Services Administration (2017). TAP 21: Addiction counseling competencies: The knowledge, skills, and attitudes of professional practice. Retrieved from https://store.samhsa.gov/system/files/sma12-4171.pdf
PowerPoint/Video Lecture:
Conley, T. B. (2018). _Diagnosis and assessment of substance use disorders_ [PowerPoint/Video]. Link to this through the Canvas LMS.
Review Articles:
National Center for Responsible Gambling (2003). South oaks gambling screen (SOGS). Retrieved from http://www. Link to this through the Canvas LMS.
National Institute on Drug Abuse (2018). AUDIT. Link to this through the Canvas LMS.
U.S. Preventative Services Task Force (2005a). Patient health questionnaire (PHQ-9). Retrieved from https://www.uspreventiveservicestaskforce.org/Home/GetFileByID/218
U.S. Preventive Services Task Force (2005b). Substance abuse screening instrument: The drug abuse screening test (DAST). Link to this through the Canvas LMS.
MAST, DAST, Depression PHQ tool and Gambling South Oaks: Links to these screening tools found through the Canvas LMS.

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Clinical Documents for Discussion:
Community Services (n.d.). Comprehensive evaluation for significant others. Link to this
   through the Canvas LMS.

Conley, T.B. (n.d.). Case Study Sadie on the ranch. Link to this through the Canvas LMS.

**Module 5) The Developmental Stages of Recovery: The Continuum of Substance Use
Disorder Services**

Overview: In this module students will be exposed to the SAMHSA Continuum of Care; watch
video conferences from the NY State Office of Alcohol and Substance Abuse Services
concerning Recovery Oriented Systems of Care; Learn about the Stages of Change framework;
learn about the Stages of Recovery; and come to appreciate the need for and activities associated
with Relapse Prevention. *Anticipated Outcomes*: Your knowledge, understanding and practical
ability as a social worker with substance use disordered clients will be professionally influenced
by this module. Your principles and standards of behavior along with judgment of what is
important will be challenged and developed.

Required Readings: All resources here may be linked to this through the Canvas LMS. *Please
read this material in the order it is presented in the Canvas LMS.*

Melemis, S.M. (2015). Relapse prevention and the five rules of recovery. *Yale Journal of
   Biology and Medicine*, 88, 325-332. Retrieved from https://medicine.yale.edu/yjbm/
National Council for Community Behavioral Healthcare (n.d.). Enhancing the continuum of
   care: Integrating behavioral health and primary care through affiliations with FQHCs.
   Retrieved from
   https://www.integration.samhsa.gov/images/res/CMHC%20FQHC%20Checklist%20v2.p
   df
New York State Office of Alcoholism and Substance Abuse Services (2018). Peer integration
   and the stages of change toolkit. Retrieved from
   https://www.oasas.ny.gov/recovery/documents/PeerIntegrationToolKit-Final2.pdf
New York State Office of Alcoholism and Substance Abuse Services (n.d.). You can be the
   difference [Pamphlet].
Parents Lead (n.d.). Behavioral health continuum of care model. Retrieved from
   http://www.parentslead.org/sites/default/files/ContinuumofCareModel.pdf

Substance Abuse and Mental Health Services Administration (2010). Recovery-oriented
   systems of care (ROSC) resource guide. Retrieved from
   https://www.samhsa.gov/sites/default/files/rosc_resource_guide_book.pdf
Substance Abuse and Mental Health Services Administration (2015). The next step toward a
   better life. Retrieved from https://store.samhsa.gov/system/files/sma14-4474.pdf

Audio file, PowerPoints:
Early Sobriety [Audio/Music].

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Readiness of change/stages of change [PowerPoint].

YouTube Videos:
Kent. R., & Gonzalez-Sanchez, A. (2016, July 12). *Viewpoint – NY State OASAS Describes Their Services*. https://www.youtube.com/watch?v=W5_BSNR1JWk
NYS OASAS (2019, April 8). *New Hope, New Life with OASAS – Myths and Truth of Addiction (Bonus Episode)*. Retrieved from https://www.youtube.com/watch?v=SB8SpjwPYQM

Module 6) The theory and application of EBP; Non-Traditional Treatments and Emerging Trends in Treatment

Overview: Module 5 welcomes us to the world of EBPs, "Evidence Based Practices." It includes a little more webinar material along with several readings. We will have the opportunity to apply this to case material both in the test and the discussions. *Anticipated Outcomes*: Your values, understanding and practical ability as a social worker with substance use disordered clients will be professionally influenced by this module. Your principles and standards of behavior along with judgment of what is important and acceptable will be challenged and developed.

Required Readings: All resource here may be linked to this through the Canvas LMS. Please read this material in the order it is presented in the Canvas LMS.

Evidence Based Practice Continuum Guidelines (n.d.). Retrieved from http://dhss.alaska.gov/dbh/Documents/Resources/initiatives/ebp/EBP.pdf
Evidence Based Practices for Treating Substance Use Disorder (n.d.). [Matrix] Retrieved from https://adai.uw.edu/ebp/matrix.pdf
Mcgovern, M.P., & Carroll, K.M. (2003). Evidence-based practices for substance use disorders. *The Psychiatric Clinics of North America*, 26(*4*), 991-1010. Retrieved from https://www.journals.elsevier.com/psychiatric-clinics-of-north-america
National Institute on Drug Abuse (2018). Principles of drug addiction treatment: A research-based guide (Third Edition). Retrieved from https://www.drugabuse.gov/node/pdf/675/principles-of-drug-addiction-treatment-a-research-based-guide-third-edition

PowerPoint/Video Lecture:
Jansen, M.A. (2015a). Evidence-based practice and recovery-oriented care [PowerPoint]. Retrieved from https://www.samhsa.gov/sites/default/files/programs_campaigns/recovery_to_practice/slides-ebpracticeandrocare-20150812.pdf
Jansen, M.A. (2015b). Evidence-based practice and recovery-oriented care [Transcript]. Retrieved from https://www.samhsa.gov/sites/default/files/programs_campaigns/recovery_to_practice/transcript-evidence-basedpracticeandrecovery-orientedcare.pdf

YouTube Videos:

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Chandler, R.K. (2019, August 15). *Addiction, the brain, and evidence-based treatment*.
    Retrieved from https://www.youtube.com/watch?v=1rIS5beYOv8
Gateway Alcohol & Treatment Centers (2017, June 30). *Integrating evidenced based treatments
    and recovery approaches in clinical practice*. Retrieved from
    https://www.youtube.com/watch?v=CrALqowfgWM

Case Studies:
Conley, T.B. (n.d.a). Jenny at TANF.
Conley, T.B. (n.d.b). Sadie on the ranch.

Module 7) Medication Assisted Treatment
Overview: This module focuses largely on Medication Assisted Treatment (MAT). It covers
neonatal to adult issues on both a clinical and policy level with some focus on incarcerated
populations. *Anticipated Outcomes*: Your knowledge, understanding and practical ability as a
social worker with substance use disordered clients will be professionally influenced by this
module. Your principles and standards of behavior along with judgment of what is important
will be challenged and developed.

Activities/Assignments:
There will be a Quiz for part of the module as well as an **online certification quiz with NY
state OASAS.** Follow instructions in Canvas. A copy of the certification is required for those
applying for a CASAC so save it safely.

Required Readings: All resources here may be linked to this through the Canvas LMS. Please
    read this material in the order it is presented in the Canvas LMS.

American Association for the Treatment of Opioid Dependence, Inc. (2017). Medicated-assisted
    treatment for opioid use disorder in the justice system. Retrieved from
    http://www.aatod.org/wp-content/uploads/2017/10/AATOD-MAT-Fact-Sheet-wl.pdf

Mann, C., Frieden, T., Hyde, P.S., Volkow, N.D., & Koob, F.G. (2014). Medication assistant
    treatment for substance use disorders [Bulletin]. Retrieved from
    https://www.medicaid.gov/federal-policy-guidance/downloads/cib-07-11-2014.pdf
Substance Abuse and Mental Services Administration (n.d.). KAP keys for clinicians: Based on
    TIP 43 – medication-assisted treatment for opioid addiction in opioid treatment programs
    [Pamphlet].   Retrieved from https://store.samhsa.gov/system/files/sma12-4108.pdf
U.S. Food & Drug (2019). Information about medication-assisted treatment (MAT). Retrieved
    from https://www.fda.gov/drugs/information-drug-class/information-about-medication-
    assisted-treatment-mat

Optional Resources:
Miller et al. (2024). Electronic Book. The ASAM Principles of Addiction Medicine (6th ed).
    Philadelphia, PA: Wolters Kluwer Section 4: Chapt 33: Harm reduction, overdose
    prevention, and addiction medicine.

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Substance Abuse and Mental Health Services Administration (n.d.). Medication-assisted
     treatment. Retrieved from https://store.samhsa.gov/treatment-prevention-
     recovery/medication-assisted-treatment?page=1

PowerPoint/Video Lecture:
New York office of Temporary and Disability Assistance (2019). Opioid use disorders in
     homeless shelter settings [PowerPoint]. Retrieved from
     https://yu.instructure.com/courses/37184/files/folder/Mod%207?preview=1137111

YouTube Videos:
NASEM Health and Medicine Division (2019, October 17). *Medications for opioid use disorder*
     saves lives. Retrieved from
     https://www.youtube.com/watch?v=aEBec2cQ4EQ&feature=youtu.be
The Council of State Governments Justice Center (2016, July 7). *Medication assisted treatment*
     in jails and community-based settings. Retrieved from
     https://www.youtube.com/watch?time_continue=1&v=F7OBnygfTLM

Complete: Online training at this link and e-mail copy of certificate to professor:
https://healtheknowledge.org/course/search.php?search=Medication+Assisted%20%20
Additional Optional Resources: https://store.samhsa.gov/treatment-prevention-
recovery/medication-assisted-treatment?page=1