

PGSP-STANFORD PSY.D. CONSORTIUM



Stanford
MEDICINE

Department of Psychiatry
& Behavioral Sciences

COURSE SYLLABUS

Quarter: Spring

Year: 2025

Course Section/Number: CLIN 711 01

Course Title: Psychological Treatment for Substance Use Disorders

Course Units: 3 Units

Date & Time: Wednesdays, 9:10am to 12:00pm, April 2 – June 11

Location: 401 Quarry Rd., Stanford Psychiatry Bld., Rm. 1211

Instructor Name: Nancy A. Haug, PhD

Instructor Contact: nhaug@paloaltou.edu

Instructor Office Hours: Friday 9:00am - 2:00pm or by appointment

Instructor Bio: <https://www.paloaltou.edu/faculty/nancy-haug>

Course TA Name: Garrett Schwartz

Course TA Contact: gschwartz@paloaltou.edu

Course Description:

Introduction to theories of addiction, psychopharmacology, principles of prevention, methods for screening, diagnosis and assessment, evidence-based treatment of substance use disorders, pharmacotherapy, and applications to special populations.

The course is structured to meet California psychologist licensure requirements for training in alcoholism and chemical dependency detection and treatment (see Appendix A). Keep this syllabus as evidence of having covered the necessary content for California licensure.

Last time course was offered: Spring 2024

Course Prerequisites & Assumptions: Method(s) of Instruction:

There are no prerequisites for this course. The class will be taught via in-person instruction. The class will be a mix of lecture, class activities, videos, in-class discussion groups, exams and group project work.

Credit Hour Requirements:

Success in this course is based on the expectation that students will spend, for each unit of credit, a minimum of 33 hours of work over the length of the 11-week quarter (3 hours per unit per week with 1 of the hours used for lecture). For a 3-unit course over an 11-week quarter, that equates to 99 hours of work, including classroom instruction, exams, homework, preparation, studying and other course related activities.

Required Readings (specific assignments given below in Session Agendas)

- Liese, B. S., & Beck, A. T. (2022). *Cognitive Behavioral Therapy of Addictive Disorders*. New York: Guilford.
- Miller, W. R., Forcehimes, A. A., & Zweben, A. (2019). *Treating addiction: A guide for professionals*. (2nd ed.). New York: Guilford.

Articles and Publications (pdfs in Canvas by week number):

- Brand, M., Antons, S., Bőthe, B., Demetrovics, Z., Fineberg, N. A., Jimenez-Murcia, S., King, D. L., Mestre-Bach, G., Moretta, T., Müller, A., Wegmann, E., & Potenza, M. N. (2025). Current Advances in Behavioral Addictions: From Fundamental Research to Clinical Practice. *The American Journal of Psychiatry*, 182(2), 155–163. <https://doi.org/10.1176/appi.ajp.20240092>
- Broyles, L. M., Binswanger, I. A., Jenkins, J. A., Finnell, D. S., Faseru, B., Cavaola, A., Pugatch, M., & Gordon, A. J. (2014). Confronting inadvertent stigma and pejorative language in addiction scholarship: a recognition and response. *Substance Abuse*, 35(3), 217–221. <https://doi.org/10.1080/08897077.2014.930372>
- Buckner, J. D., Zvolensky, M. J., Ecker, A. H., Schmidt, N. B., Lewis, E. M., Paulus, D. J., Lopez-Gamundi, P., Crapanzano, K. A., & Bakhshaie, J. (2019). Integrated cognitive behavioral therapy for comorbid cannabis use and anxiety disorders: A pilot randomized controlled trial. *Behaviour Research and Therapy*, 115, 38–45. <https://doi.org/10.1016/j.brat.2018.10.014>
- Dela Cruz, G. A., Johnstone, S., Kim, H. S., & Castle, D. J. (2023). Review of third-wave therapies for substance use disorders in people of color and collectivist cultures: Current evidence and future directions. *Psychology of Addictive Behaviors*, 37(5), 681–694. <https://doi.org/10.1037/adb0000883>
- Felner, J. K., Wisdom, J. P., Williams, T., Katuska, L., Haley, S. J., Jun, H. J., & Corliss, H. L. (2020). Stress, Coping, and Context: Examining Substance Use Among LGBTQ Young Adults with Probable Substance Use Disorders. *Psychiatric Services (Washington, D.C.)*, 71(2), 112–120. <https://doi.org/10.1176/appi.ps.201900029>
- Garland, E. L., & Howard, M. O. (2018). Mindfulness-based treatment of addiction: current state of the field and envisioning the next wave of research. *Addiction Science & Clinical Practice*, 13(1), 14. <https://doi.org/10.1186/s13722-018-0115-3>
- Gomez-Escolar, A., Folch-Sanchez, D., Stefaniuk, J., Swithenbank, Z., Nisa, A., Braddick, F., Idrees Chaudhary, N., van der Meer, P. B., & Batalla, A. (2024). Current Perspectives on the Clinical Research and Medicalization of Psychedelic Drugs for Addiction Treatments: Safety, Efficacy, Limitations and Challenges. *CNS drugs*, 38(10), 771–789. <https://doi.org/10.1007/s40263-024-01101-3>
- Haller, M., Norman, S. B., Cummins, K., Trim, R. S., Xu, X., Cui, R., Allard, C. B., Brown, S. A., & Tate, S. R. (2016). Integrated Cognitive Behavioral Therapy Versus Cognitive Processing Therapy for Adults With Depression, Substance Use Disorder, and Trauma. *Journal of Substance Abuse Treatment*, 62, 38–48. <https://doi.org/10.1016/j.jsat.2015.11.005>
- Hughes, M., Suhail-Sindhu, S., Namirembe, S., Jordan, A., Medlock, M., Tookes, H. E., Turner, J., & Gonzalez-Zuniga, P. (2022). The Crucial Role of Black, Latinx, and Indigenous Leadership in Harm Reduction and Addiction Treatment. *American Journal of Public Health*, 112(S2), S136–S139. <https://doi.org/10.2105/AJPH.2022.306807>
- Kariisa, M., Davis, N. L., Kumar, S., Seth, P., Mattson, C. L., Chowdhury, F., & Jones, C. M. (2022). Vital Signs: Drug Overdose Deaths, by Selected Sociodemographic and Social Determinants of Health Characteristics - 25 States and the District of Columbia, 2019-2020. *MMWR. Morbidity and mortality weekly report*, 71(29), 940–947. <https://doi.org/10.15585/mmwr.mm7129e2>
- Kelly, J. F., Wakeman, S. E., & Saitz, R. (2015). Stop talking 'dirty': clinicians, language, and quality of care for the leading cause of preventable death in the United States. *The American Journal of Medicine*, 128(1), 8–9. <https://doi.org/10.1016/j.amjmed.2014.07.043>
- Korecki, J. R., Schwebel, F. J., Votaw, V. R., & Witkiewitz, K. (2020). Mindfulness-based programs for substance use disorders: a systematic review of manualized treatments. *Substance abuse treatment, prevention, and policy*, 15(1), 51. <https://doi.org/10.1186/s13011-020-00293-3>

- Krotter, A., Aonso-Diego, G., Gonzalez-Menendez, A., Gonzalez-Roz, A., Secades-Villa, R. & Garcia-Perez, A. (2024). Effectiveness of acceptance and commitment therapy for addictive behaviors: A systematic review and meta-analysis. *Journal of Contextual Behavioral Science*, 32, 100773.
- Milaney, K., Haines-Saah, R., Farkas, B., Egunsola, O., Mastikhina, L., Brown, S., Lorenzetti, D., Hansen, B., McBrien, K., Rittenbach, K., Hill, L., O'Gorman, C., Doig, C., Cabaj, J., Stokvis, C., & Clement, F. (2022). A scoping review of opioid harm reduction interventions for equity-deserving populations. *Lancet regional health. Americas*, 12, 100271. <https://doi.org/10.1016/j.lana.2022.100271>
- McLellan, A. T., Koob, G. F., & Volkow, N. D. (2022). Preadiction-A Missing Concept for Treating Substance Use Disorders. *JAMA psychiatry*, 79(8), 749–751. <https://doi.org/10.1001/jamapsychiatry.2022.1652>
- Paquette, C. E., Daughters, S. B., & Witkiewitz, K. (2022). Expanding the continuum of substance use disorder treatment: Nonabstinence approaches. *Clinical psychology review*, 91, 102110. <https://doi.org/10.1016/j.cpr.2021.102110>
- Rezende-Pinto, A., & Moreira-Almeida, A. (2023). Guidelines for integrating spirituality into the prevention and treatment of alcohol and other substance use disorders. *Revista brasileira de psiquiatria (Sao Paulo, Brazil: 1999)*, 45(3), 274–279. <https://doi.org/10.47626/1516-4446-2022-2984>
- Satre, D. D., Manuel, J. K., Larios, S., Steiger, S., & Satterfield, J. (2015). Cultural Adaptation of Screening, Brief Intervention and Referral to Treatment Using Motivational Interviewing. *Journal of addiction medicine*, 9(5), 352–357. <https://doi.org/10.1097/ADM.0000000000000149>
- Simpson, S. K. J., Hawkins, J. M., & Bean, R. A. (2020). Family Therapy for Substance Use among Sexual Minority Youth: A Review of Treatment Options. *The American Journal of Family Therapy*, 48(5), 431–445. <https://doi.org/10.1080/01926187.2020.1734502>
- Stevens, M. W., Dorstyn, D., Delfabbro, P. H., & King, D. L. (2021). Global prevalence of gaming disorder: A systematic review and meta-analysis. *The Australian and New Zealand Journal of Psychiatry*, 55(6), 553–568. <https://doi.org/10.1177/0004867420962851>
- U. S. Department of Health and Human Services, Office of the Surgeon General (2016). [*Facing addiction in America: The Surgeon General's Report on Alcohol, Drugs and Health*](#). Washington, DC: HHS. Publication No. (SMA) 16-4991.
- Van Emmerik-van Oormerssen, K., Vedel, E., Kramer, F. J., Blankers, M., Dekker, J. J. M., van den Brink, W., & Schoevers, R. A. (2019). Integrated cognitive behavioral therapy for ADHD in adult substance use disorder patients: Results of a randomized clinical trial. *Drug and Alcohol Dependence*, 197, 28-36. <https://doi.org/10.1016/j.drugalcdep.2018.12.023>
- Wu, W., Huang, L., & Yang, F. (2024). Social anxiety and problematic social media use: A systematic review and meta-analysis. *Addictive behaviors*, 153, 107995. <https://doi.org/10.1016/j.addbeh.2024.107995>
- Yoon, W., Cho, I., & Cho, S. I. (2022). Understanding the role of e-cigarette use in smoking cessation based on the stages of change model. *PloS one*, 17(9), e0274311. <https://doi.org/10.1371/journal.pone.0274311>

Recommended Resources (most pdfs in Canvas by week number):

- American Society on Addiction Medicine (2025). *What is the ASAM criteria?* Retrieved from <https://www.asam.org/asam-criteria/about-the-asam-criteria>
- American Psychiatric Association. (2013). Substance-related and addictive disorders. In *Diagnostic and statistical manual of mental disorders* (5th ed., pp. 481-589). Arlington, VA: American Psychiatric Publishing.
- American Psychological Association. (2023). Inclusive language guide (2nd ed.). <https://www.apa.org/about/apa/equity-diversity-inclusion/language-guidelines.pdf>
- Akbar, M. (2023). *Introducing the second edition of the APA Inclusive Language Guide*. APA Style. <https://apastyle.apa.org/blog/inclusive-language-guide-second-edition>
- Bowen, S., Chawla, N., Grow, J., & Marlatt, G. A. (2021). *Mindfulness-Based Relapse Prevention for Addictive Behaviors* (2nd ed.) Guilford Publications.
- California Department of Health Care Service (2021). *Substance Use Navigation Kit*. <https://cabridge.org/resource/substance-use-navigation-toolkit/>

- Daley, D. C., & Marlatt, G. A. (2006). *Overcoming your alcohol or drug problem: Effective recovery strategies* (2nd ed.). New York: Oxford University.
- Haug, N.A. (2023). *Changing Addictive Behaviors Using ACT Processes*. Clinical Pearls, APA Division 50 Society of Addiction Psychology (SoAP). <https://addictionpsychology.org/soap-box/2023/summer/changing-addictive-behaviors-using-act-processes>
- Linehan, M. (2014). *Distress Tolerance Skills When the Crisis Is Addiction*. From DBT® skills training manual (2nd ed.). Guilford Press.
- McCrary, B. S., & Epstein, E. E. (2009). *Overcoming Alcohol Problems: Workbook for couples*. Oxford University Press.
- Miller, W. R., Forcehimes, A. A., & Zweben, A. (2019). *A Guide For Using Assessment Instruments*. A complement to Treating Addiction: A guide for professionals. (2nd ed.). New York: Guilford.
- Miller, W. R., & Rollnick, S. (2023). *Motivational interviewing: Helping people change* (4th edition). Guilford Press.
- Najavits, L.M. (2002). *Seeking Safety: A Treatment Manual for PTSD and Substance Abuse*. Guilford Press, 1-62.
- National Institute on Drug Abuse. (2011). *Screening for drug use in general medical settings*. https://nida.nih.gov/sites/default/files/pdf/screening_qr.pdf
- National Institute on Drug Abuse. (2020). *Misuse of Prescription Drugs*. <https://www.drugabuse.gov/publications/misuse-prescription-drugs/overview>
- National Institute on Drug Abuse. (2023). *Commonly used drugs*. <https://www.drugabuse.gov/drugs-abuse/commonly-abused-drugs-charts>
- National Institute on Drug Abuse (2023). *Drugs, brain and behavior: The science of addiction*. <https://nida.nih.gov/research-topics/addiction-science/drugs-brain-behavior-science-of-addiction>
- National Institute on Drug Abuse. (2021). *Words Matter: Preferred Language for Talking About Addiction*. <https://nida.nih.gov/research-topics/addiction-science/words-matter-preferred-language-talking-about-addiction>
- Nicoară, R. D., Tegzesiu, A. M., & Popescu. (2024). Systematic review of CBT techniques and their alignment with the Transtheoretical Model stages of change. *BRAIN. Broad Research in Artificial Intelligence and Neuroscience*, 15(4), 2530264.
- Nowinski, J., Baker, S., & Carroll, K. (1992). *Twelve Step Facilitation Therapy Manual*. NIAAA MATCH Monograph, Vol. 1 DHHS Publication No. (ADM) 92-1893, Washington, DC: Government Printing Office.
- Rezende-Pinto, A., & Moreira-Almeida, A. (2023). Guidelines for integrating spirituality into the prevention and treatment of alcohol and other substance use disorders. *Revista brasileira de psiquiatria (Sao Paulo, Brazil: 1999)*, 45(3), 274–279. <https://doi.org/10.47626/1516-4446-2022-2984>
- Paquette, C. E., Daughters, S. B., & Witkiewitz, K. (2022). Expanding the continuum of substance use disorder treatment: Nonabstinence approaches. *Clinical psychology review*, 91, 102110. <https://doi.org/10.1016/j.cpr.2021.102110>
- Rosengren, D. B. (2018). *Building Motivational Interviewing skills: A practitioner workbook*, 2nd edition. New York: Guilford Publications.
- Schenker, M. (2019). *Introducing 12-Step Programs in Psychotherapy*. Clinical Pearls, APA Division 50 Society of Addiction Psychology (SoAP). <https://addictionpsychology.org/sites/default/files/public/documents/clinical-pearl-%233-schenker.pdf>
- Smith, J. E., & Meyers, R. J. (2022). *The CRAFT treatment manual for substance use problems: Working with family members*. Guilford Publications.
- Stasiewicz, P. (2019). Between-session skill practice in SUD treatment. Clinical Pearls, APA Division 50 Society of Addiction Psychology (SoAP). <https://addictionpsychology.org/sites/default/files/public/documents/Stasiewicz%20Clinical%20Pearl%201.pdf>

Substance Abuse and Mental Health Services Administration (2019). [*Enhancing Motivation for Change in Substance Use Disorder Treatment*](#). Treatment Improvement Protocol (TIP) Series No. 35. SAMHSA Publication No. PEP19-02-01-003.

Substance Abuse and Mental Health Services Administration (2021). [*Screening and Treatment of Substance Use Disorders among Adolescents Advisory*](#). Publication No. PEP20-06-04-008

Website References:

- APA, Division 50, Society of Addiction Psychology: <http://www.addictionpsychology.org/>
- APA, Division 44, Society for Psychology of Sexual Orientation and Gender Diversity; <https://www.apadivisions.org/division-44>
- American Society of Addiction Medicine (ASAM): <http://www.asam.org/>
- CA Bridge Program: <https://www.bridgetotreatment.org/>
- Faces and Voices of Recovery: <http://www.facesandvoicesofrecovery.org/>
- Motivational Interviewing: <http://motivationalinterviewing.org/>
- National Harm Reduction Coalition: <https://harmreduction.org>
- National Institute on Alcohol Abuse and Alcoholism (NIAAA): <http://www.niaaa.nih.gov/>
- National Institute of Drug Abuse (NIDA): <https://www.drugabuse.gov/>
- Partnership to End Addiction: <https://drugfree.org/>
- Stanford Medicine Cannabis Awareness & Prevention Toolkit: <https://med.stanford.edu/cannabispreventiontoolkit.html>
- Stanford Medicine: Tobacco Prevention Toolkit: <https://med.stanford.edu/tobaccopreventiontoolkit.html>
- Stanford Medicine Vaping Information, Solutions & Interventions Toolkit (VISIT): <https://med.stanford.edu/visit.html>
- Substance Abuse and Mental Health Services Administration: <http://www.samhsa.gov/>
- Trevor Project: <https://www.thetrevorproject.org/>

Canvas LMS: This class will have an accompanying Canvas learning studio. This site will give you access to the assigned articles and other readings, including the syllabus, Powerpoint lecture slides and other materials. These are not meant as a substitute for attending class, but rather to facilitate your learning process.

STUDENT LEARNING OUTCOMES

PAU INSTITUTIONAL LEARNING GOALS							
1	2	3	4	5	6	7	8
Disciplinary Knowledge and Skill	Critical Thinking	Scientific and Quantitative Reasoning	Cultural Competence in a Diverse World	Communication	Literacy	Moral and Ethical Responsibility	Community Engagement and Service

PGSP-STANFORD PSYD CONSORTIUM COMPETENCIES								
1	2	3	4	5	6	7	8	9
Research	Ethical and legal standards	Individual and cultural diversity	Professional values, attitudes, and behaviors	Communication and interpersonal skills	Assessment	Intervention	Supervision	Consultation and interprofessional/in terdisciplinary skills

The following table details both the PAU institutional learning goals and PsyD Consortium competencies that are covered in this course, as well as, how the learning outcomes are taught and assessed.

	Course Learning Outcomes	PAU Institutional and PsyD Consortium Learning Outcomes Assessed	Related readings, lectures, discussions, and any designated signature assignments.
1	Recognize the diverse uses of substances across cultures and compare various conceptions and definitions of substance misuse.	Institutional: 1, 2, 4 PsyD: 3, 4	Readings and lectures, Exams
2	Gain exposure to the basic psychopharmacology of misused drugs and how they impact the nervous system and body.	Institutional: 1, 3 PsyD: 1, 6	Readings and lectures, exams
3	Become familiar with the prevalence of substance use disorders, diagnostic criteria, clinical presentations, and implications.	Institutional: 1, 2, 6 PsyD: 6, 7	Readings and lectures exams, group project, field study reflection paper
4	Learn theories of substance use disorders, treatment methods and appropriate limitations considering relevant research, culture and language.	Institutional: 1, 2, 4 PsyD: 3, 7, 9	Readings and lectures exams, group project
5	Develop skills in the screening, diagnosis, and assessment of persons with substance use disorders.	Institutional: 1, 2, 6 PsyD: 6, 9	Readings and lectures, exams, group project
6	Demonstrate an ability to diagnose clients with SUDs using DSM-5 criteria and formatting.	Institutional: 1, 2, 6 PsyD: 6, 9	Readings and lectures, group project
7	Demonstrate cultural responsiveness in analyzing the influence of cultural considerations on diagnosis.	Institutional: 4 PsyD: 3	Group project
8	Know the basic principles of SUD treatments as a framework from which to plan treatment for specific patients, substances, and co-occurring conditions.	Institutional: 1, 2, 6 PsyD: 3, 7	Reading and lectures, group project
9	Become familiar with local resources for the treatment of persons with SUDs, including mutual help groups.	Institutional: 1, 4, 7, 8 PsyD: 4, 5	Reading and lectures, field study reflection paper
10	Identify stereotypes and understand the impact of stigma on persons with SUDs and SUD treatments.	Institutional: 1, 2, 5, 7 PsyD: 4, 5, 7	Readings and lectures, field study reflection paper

GRADING

Performance Evaluation Criteria:

Assignment	Points	% of Course Grade
Participation	10	10%
Substances Quiz	20	20%
Field Study Reflection Paper	25	25%
Group Project	20	20%
Final Exam	25	25%
TOTAL	100	100%

Grades will be assigned based on your total percentage points in the course:

Grading Scale
A+ = 98-100%
A = 93-97%
A- = 90-92%
B+ = 87-89%
B = 83-86%
B- = 80-82%
F < 80%

ASSIGNMENTS

Late Assignment Submissions: Generally, late assignments will not be accepted or accepted at the discretion of the instructor. Late assignments will be marked down 20%.

1. Participation (10 points)

Purpose: To facilitate engagement with the course content and enhance learning.

Task: Attend all lectures, arrive on time, complete readings and assignments, ask thoughtful questions, and engage in class discussions verbally or through chat.

Evaluation Criteria: Full points will be given to students who complete the tasks above. Students will have the opportunity to submit a self-rating of their participation score through Canvas Assignments.

Optional: Please feel free to submit thoughtful questions related to the readings on the Canvas Discussion board during the quarter that can be addressed by the instructor during class or through the board.

2. Substances Quiz (20 points)

Purpose: To facilitate knowledge and understanding of misused substances and prescription medications. Students will learn substance categories, street names, acute effects and health risks.

Task: Students will take the quiz in class on a computer through Canvas (with lockdown browser).

Evaluation Criteria: Points will be given for each question scored correctly. The grade will automatically be calculated and entered into Canvas Grades.

3. Field Study Reflection Paper (25 points):

Purpose: To become familiar with mutual help group meetings so that you can offer this resource to clients.

Task: Visit two different mutual help group meetings (in-person or online) and write a 3-page double-space reflection paper about your experience in APA-style (7th edition). Any online mutual peer help group for addictive behavior can be visited. A 12- Step group for alcohol or substances is recommended because they are the most common of mutual help groups. Meetings will be “open” or “closed.” Visitors are welcome at “open” groups. You can email the moderator in advance and list “visitor” or “student” next to your name if visiting a Zoom group. A sample of organizations is listed on Canvas.

Evaluation Criteria: APA Style (7th Edition): Cover page for student papers, title, etc. Does not use stigmatizing language (abuse, abuser, alcoholic, addict) unless quoting group member. (5 points)

Identification of two mutual peer help groups (AA, NA, etc.) and description of group types (e.g., speaker, step meeting, literature etc.). (2 points)

Experience of group or groups: What was the social climate? How did it differ from your expectations? What surprised you? How were the groups similar or different? (5 points)

Description of what you learned in the group and how it might impact your treatment approach with clients.

Would you recommend mutual help groups to clients? Why or why not? (8 points)

Overall quality of writing and thoughtfulness of paper (5 points)

Group Project (25 points)

Purpose: To apply case formulation, assessment, diagnosis, and evidence-based treatments learned in class to an actual client. This assignment is designed to help prepare you for the clinical comprehensive exam in Fall quarter.

Task: You will be assigned to a group with 2 other students in the course. Your group will choose a client with a Substance Use Disorder from one of your current or previous caseloads. The group will collaboratively form a case conceptualization and initial treatment plan using the outline provided. You will be expected to apply the evidence-based approaches discussed in class and/or one of the treatment manuals provided on Canvas.

Evaluation Criteria: See Canvas for detailed rubric. Overall Quality of Writing, Case Formulation, Assessment and Diagnosis, Treatment Plan, Treatment Course

Final Examination (20 points)

Purpose: To assess student's overall comprehension of course material and application of knowledge acquired. Cumulative exams can enhance long-term learning by synthesizing material from earlier in the course and encourage students to study and review the material more thoroughly throughout the quarter.

Task: The open-note, cumulative final exam that will consist of multiple-choice questions based on texts, articles and class materials. You will be expected to know fundamental concepts presented throughout the course. You should not confer with other individuals and need to complete the exam in one sitting.

Evaluation Criteria: Points will be given for each question scored correctly. The grade will automatically be calculated and entered into Canvas Grades.

Week	Date	• Topics	Readings (those numerated are required readings before class) Resources with * are treatment manuals or patient-facing materials	Due Dates/ Activity
Wk 1	Apr 2	<ul style="list-style-type: none"> • Introduction and Overview • Stigma and Language • Dimensions of Addiction • Etiology of Addiction 	<ol style="list-style-type: none"> 1. <u>Chapter 1</u>: Why Treat Addiction?, Miller et al., 2019, pp. 3-11. 2. <u>Chapter 2</u>: What is Addiction?, Miller et al., 2019, pp. 12-30. 3. <u>Article</u>: Broyles et al. (2015) Confronting Inadvertent Stigma and Pejorative Language in Addiction Scholarship: A Recognition and Response 4. <u>Article</u>: Kariisa et al. (2022) – Increases in Disparities in US Drug Overdose Deaths by Race and Ethnicity 5. <u>Article</u>: Kelly et al. (2015) - Stop Talking ‘Dirty’: Clinicians, Language, and Quality of Care for the Leading Cause of Preventable Death <p>Recommended Resources:</p> <ul style="list-style-type: none"> • APA (2023) Inclusive Language Guide (2nd ed.) • NIDA (2021) – Words Matter - Terms to Use and Avoid 	Review syllabus and assignments
Wk 2	Apr 9	<ul style="list-style-type: none"> • Psychoactive Drugs • Biological Mechanisms • Psychopharmacology • Medication-Assisted Treatment 	<ol style="list-style-type: none"> 1. <u>Chapter 3</u>: How do Drugs Work?, Miller et al., 2019, pp. 31-50. 2. <u>Chapter 18</u>: Medications in Treatment, Miller et al., 2019, pp. 271-292. 3. <u>Article</u>: The Surgeon General’s Report (2016). The Neurobiology of substance use, misuse and addiction. <p>Recommended Resources:</p> <ul style="list-style-type: none"> • NIDA Commonly Used drugs • NIDA Drugs, Brains, and Behavior: The Science of Addiction • NIDA Misuse of Prescription Drugs 	Guest Speaker: Anna Lembke, MD
Wk 3	Apr 16	<ul style="list-style-type: none"> • Screening, Diagnosis and Assessment • DSM-5 SUD • Stages of Change 	<ol style="list-style-type: none"> 1. <u>Chapter 4</u>: Engaging, Miller et al., 2019, pp. 53-70. 2. <u>Chapter 5</u>: Screening, Evaluation, and Diagnosis, Miller et al., 2019, pp. 71-91. 3. <u>Article</u>: Felner et al., (2020) - Stress, Coping, and Context: Examining Substance Use Among LGBTQ Young Adults 4. <u>Article</u>: Yoon et al., (2022) - Understanding the role of e-cigarette use in smoking cessation based on the stages of change model <p>Recommended Resources:</p> <ul style="list-style-type: none"> • ASAM Criteria • DSM-5 Checklist: Substance-related and addictive disorders • Miller - Guide for Using Assessment Instruments • NIDA Screening and Assessment Tools Chart • NIDA Screening for Drug Use in General Medical Settings 	

Wk 4	Apr 23	<ul style="list-style-type: none"> • Brief Interventions • SBIRT • Motivational Interviewing 	<ol style="list-style-type: none"> 1. <u>Chapter 9</u>: Brief Interventions, Miller et al., 2019, pp. 155-167. 2. <u>Chapter 10</u>: Motivational Interviewing, Miller et al., 2019, pp. 168-176. 3. <u>Article</u>: McLellan et al., (2022) – Preadiction - A Missing Concept for Treating Substance Use Disorders 4. <u>Article</u>: Satre et al., (2015) – Cultural Adaptation of SBIRT and MI <p>Recommended Resources:</p> <ul style="list-style-type: none"> • <u>Book</u>: Miller, W. R., & Rollnick, S. (2023). <i>Motivational interviewing: Helping people change (4th edition)</i>.* • <u>Manual</u>: Rosengren (2018). Building Motivational Interviewing Skills, 2nd edition. (pp. 265-300, Recognizing Change and Sustain Talk)* • <u>Manual</u>: SAMHSA (2019). Enhancing Motivation for Change in Substance Use Disorder Treatment.* 	Substances Quiz
Wk 5	Apr 30	<ul style="list-style-type: none"> • Mutual Help Groups • Spirituality 	<ul style="list-style-type: none"> • <u>Chapter 17</u>: Mutual Help Groups, Miller et al., 2019, pp. 251-270. • <u>Chapter 23</u>: Addressing the Spiritual Side, Miller et al., 2019, pp. 363-379 • <u>Article</u>: Kelly et al. (2009) – Systematic review of AA • <u>Article</u>: Rezende-Pinto & Moreira-Almeida (2023) - Guidelines for integrating spirituality into SUD prevention and treatment <p>Recommended Resources:</p> <ul style="list-style-type: none"> • Website: Peer-based Recovery Support • <u>Manual</u>: Nowinski (1992) Twelve-Step Facilitation therapy manual* • <u>Article</u>: Schenker - Clinical Pearls: Introducing 12-Step Programs 	Guest Speaker: Nicolas Bisconti
Wk 6	May 7	<ul style="list-style-type: none"> • Coping Skills • Cognitive-Behavioral Therapy • Case conceptualization • Harm Reduction • Relapse Prevention 	<ol style="list-style-type: none"> 1. <u>Chapter 11</u>: Behavioral Coping Skills Miller et al., 2019, pp. 177-190. 2. Liese & Beck (2022) – Chapter 2, Theoretical Model 3. Liese & Beck (2022) – Chapter 3, Case Conceptualization 4. Liese & Beck (2022) – Chapter 13, Relapse Prevention and Harm Reduction 5. <u>Article</u>: Hughes et al., (2024) - Black, Latinx, and Indigenous leadership in harm reduction and addiction treatment 6. <u>Article</u>: Milaney et al., (2022) - Review of opioid harm reduction interventions for equity-deserving populations <p>Recommended Resources:</p> <ul style="list-style-type: none"> • <u>Article</u>: Nicoară et al. (2024) – CBT techniques and stages of change • <u>Article</u>: Paquette et al., (2021) – Nonabstinence approaches • <u>Article</u>: Stasiewicz (2019) – Clinical Pearls: Between-session practice • <u>Manual</u>: Daley & Marlatt (2008). Overcoming your alcohol or drug problem. (Review pp. 59-87)* 	Field Study Reflection paper due Guest Speaker: Karen Osilla, PhD

Wk 7	May 14	<ul style="list-style-type: none"> • Dialectical Behavior Therapy • Acceptance and Commitment Therapy • Mindfulness-based interventions 	<ol style="list-style-type: none"> 1. Liese & Beck (2022) – Chapter 7, Standardized CBT techniques 2. <u>Chapter 12</u>: Meditation and Mindfulness, Miller et al., 2019, pp. 191-196. 3. Article: DelaCruz et al. (2023) - Review of third-wave therapies for SUD in people of color and collectivist cultures 4. <u>Article</u>: Garland & Howard (2018) - Mindfulness-based treatment of addiction: current state and next wave of research 5. <u>Article</u>: Korecki et al., (2020) Mindfulness-based programs for SUD 6. <u>Article</u>: Krotter et al., (2024) – Effectiveness of ACT for addictive behaviors <p>Recommended Resources:</p> <ul style="list-style-type: none"> • <u>Article</u>: Haug (2023) – Clinical Pearls – Addictive Behaviors and ACT • <u>Manual</u>: Bowen, S., Chawla, N., Grow, J., & Marlatt, G. A. (2021). <i>Mindfulness-based relapse prevention for addictive behaviors: A clinician's guide</i> (2nd ed.). The Guilford Press.* • <u>Manual</u>: Linehan, M. M. (2015). <i>Distress Tolerance Skills When the Crisis Is Addiction</i>. From DBT® skills training manual (2nd ed.). Guilford Press.* 	
Wk 8	May 21	<ul style="list-style-type: none"> • Contingency Management • Adolescents and family involvement • CRAFT • Couples Therapy 	<ol style="list-style-type: none"> 1. <u>Chapter 13</u>: Contingency Management, Miller et al., 2019, pp. 197-206. 2. <u>Chapter 15</u>: Working with Significant Others, Miller et al., pp. 221-227. 3. <u>Chapter 16</u>: Strengthening Relationships, Miller et al., 2019, pp. 228-250. 4. <u>Article</u>: Simpson et al. (2020) - Family Therapy for Substance Use among Sexual Minority Youth <p>Recommended Resources:</p> <ul style="list-style-type: none"> • <u>Manual</u>: McCrady & Epstein (2009). <i>Workbook for Couples</i>.* • <u>Manual</u>: Smith, J. E., & Meyers, R. J. (2022). <i>The CRAFT treatment manual for substance use problems: Working with family members</i>.* • SAMHSA (2021). Screening and Treatment of Substance Use Disorder Among Adolescents.* 	Guest Speaker: Bruce Liese, PhD
Wk 9	May 28	<ul style="list-style-type: none"> • Dual diagnosis • Integrated treatment • Trauma-informed care • Psychedelic therapies 	<ul style="list-style-type: none"> • <u>Chapter 20</u>: Treating Co-Occurring Conditions, Miller et al., 2019, pp. 311-330. • <u>Article</u>: Buckner et al. (2019). I-CBT for cannabis and anxiety • <u>Article</u>: Gomez-Escolar et al., (2024) - Psychedelic Drugs for Addiction Treatments • <u>Article</u>: Haller et al. (2016). I-CBT vs. CPT for depression, SUD, trauma • <u>Article</u>: Van Emmerik-van Oormerssen (2019). I-CBT for ADHD and SUD <p>Recommended Resources:</p> <ul style="list-style-type: none"> • <u>Manual</u>: Najavits et al. (2002). <i>Seeking Safety</i>. (Review pp. 1-62)* 	Guest Speakers: Aileen Kucsera, PsyD Ben Greenberg, PsyD Group Project due May 30

Wk 10	Jun 4	<ul style="list-style-type: none"> • Behavioral Addictions • Ethical Considerations • Professional Issues 	<ol style="list-style-type: none"> 1. <u>Chapter 19</u>: Stuff That Comes Up, Miller et al., 2019, pp. 295-310. 2. <u>Chapter 21</u>: Facilitating Maintenance, Miller et al., 2019, pp. 331-341. 3. <u>Chapter 24</u>: Professional Ethics, Miller et al., 2019, pp. 380-402. 4. <u>Article</u>: Brand et al. (2025) – Behavioral Addictions: Research to Practice 5. <u>Article</u>: Stevens et al., (2020) – Global prevalence of gaming disorder 6. <u>Article</u>: Wu et al. (2024) – Social anxiety and problematic social media use 	
Wk 11	June 11	No class	<ul style="list-style-type: none"> • Study for Final Exam 	Final Exam due

PAU POLICIES

See *Psy.D. Student Handbook* or Section 3 of the PAU Catalog or the [Institutional Policies Webpage](#)

Class Attendance. Students are expected to attend 100% of the classes for this course. To receive a passing grade, you must attend at least 8 of 10 class sessions, whether excused or not. Your participation grade will be affected if you miss class without an acceptable excuse. Please notify the instructor if you plan to miss all or part of a class.

In-Person Attendance

In-person attendance is expected and required for all classes scheduled to be held in person. Zoom participation for in-person classes is only allowed for students with an official OAE accommodation that specifically includes remote attendance. Students who are ill or otherwise unable to attend in person should prioritize their health and reach out to classmates or the instructor to catch up on missed material. This policy aims to support the learning experience of all students and ensure a consistent, equitable classroom environment.

Use of Technology. Electronic devices may only be used in classes for relevant academic activities (e.g., exams, presentation feedback) or for instructor advised Internet access. Engaging in misuse of electronic resources during class time may result in loss of half of a grade (e.g., An "A" would drop to an "A-"). Please do not text, chat or conduct other internet browsing activities during the designated class sessions. If the class is being held online, please keep your camera on and attend class in a private, quiet space. Because this class focuses on professional behavior, I will be especially attuned to violations of the technology policy (see PAU Netiquette Policy).

Recording in the Classroom. Electronic video and/or audio recording is not permitted during class unless the student obtains permission from the instructor. If permission is granted, any distribution of the recording is prohibited. Students with specific electronic recording accommodations authorized by the Office of Accessible Education do not require instructor permission; however, the instructor must be notified of any such accommodation prior to recording. Any distribution of such recordings is prohibited.

Academic Misconduct

Academic Writing and Student Responsibilities. Students writing in an academic setting are responsible for approaching all assignments with rigor, integrity, and in compliance with the University Code of Student Conduct. This responsibility includes:

1. Consulting and analyzing sources that are relevant to the topic of inquiry;
2. Clearly acknowledging when they draw from the ideas or the phrasing of those sources in their own writing;
3. Learning and using appropriate citation conventions within the field in which they are studying; and
4. Asking their instructor for guidance when they are uncertain of how to acknowledge the contributions of others in their thinking and writing.

When students fail to adhere to these responsibilities, they may intentionally or unintentionally “use someone else’s language, ideas, or other original (not common-knowledge) material without properly acknowledging its source” (<http://www.wpacouncil.org>). When the act is intentional, the student has engaged in plagiarism.

Plagiarism. Plagiarism is an act of academic misconduct, which carries with it consequences including but not limited to receiving a course grade of “F” and a report to the Office of the Dean of Students. Unfortunately, it is not always clear if the misuse of sources is intentional or unintentional, which means that you may be accused of plagiarism even if you do not intentionally plagiarize. **If you have any questions regarding use and citation of sources in your academic writing, you are responsible for consulting with your instructor *before* the assignment due date.**

As a condition of taking this course, all required papers may be subject to submission for textual similarity review to Turnitin.com for the detection of plagiarism. All submitted papers will be included as source documents in the Turnitin.com reference database solely for the purpose of detecting plagiarism of such papers. See: [Academic and Professional Integrity Policy](#)

Use of Advanced Automated Tools

Students are not permitted to use advanced automated tools (artificial intelligence or machine learning tools such as ChatGPT or Claude on the reflection paper, group project or the quizzes/exams in this course. **AI detectors will be used to enforce PAU course policies; the use of AI-based tools to cheat on exams or to plagiarize without citation constitutes an academic integrity violation.**

Students with Disabilities

If you are a student with a disability and wish to use your approved accommodations for this course, please contact me via email. Please have your Accommodation Notification available for verification of accommodations. Accommodations are approved through the Office of Accessible Education located at Calvin Campus in Building 3, Room 314. Accommodation forms and additional details on the application process can be found on the [PAU Portal](#), by clicking on the 'Student' tab.

Respect for Diversity

It is my intent that students from all diverse backgrounds and perspectives be well-served by this course, that students' learning needs be addressed both in and out of class, and that the diversity that students bring to this class be viewed as a resource, strength and benefit. It is my intent to present materials and activities that are respectful of diversity: gender identity, sexual orientation, disability, age, socioeconomic status, ethnicity, race, religion, culture, perspective, and other background characteristics. Your suggestions about how to improve the value of diversity in this course are encouraged and appreciated. Please let me know ways to improve the effectiveness of the course for you personally or for other students or student groups.

In addition, in scheduling exams, I have attempted to avoid conflicts with major religious holidays. If, however, I have inadvertently scheduled an exam or major deadline that creates a conflict with your religious observances, please let me know as soon as possible so that we can make other arrangements.

Statement of Inclusion

In this class, it is expected that: 1) everyone learns in a safe and supportive environment; 2) all individuals are treated with dignity and respect, irrespective of citizenship, race, ethnicity, religious affiliation, gender/sex, sexual orientation, gender identity, age, dis/ability, etc.; and 3) everyone plays a role in creating a positive classroom space (adapted from Sulik & Keys, 2014, p. 157). To that end, if there are verbal/non-verbal indignities consciously or unconsciously expressed in class (e.g.,

microaggressions), they may be used as learning opportunities to grow in awareness of ourselves and each other, to deepen understanding of course content, as well as increase/enhance our ability to create an inclusive learning environment.

PAU Netiquette Policy

1. Students should try to Zoom from a background that is appropriate for class to not distract other students. Using a virtual background is recommended. Examples of distracting activities include having your pet dog on your lap, roommates walking around in the background, constantly getting up from the computer, etc. That said, given the current situation, it is understandable if there are disturbances.
2. If possible, it is highly recommended that students use laptops (not mobile phones) to access Zoom.
3. Video must be ON at all times with face showing during class. If you have an accessibility concern and cannot meet this requirement, please speak to PAU Accessibility Specialist, Sharyn Moore, or address directly with the professor.
4. Volume must stay "mute" at all times unless the student is speaking.
5. Professionalism and classroom etiquette requires student attentiveness and engagement. Students will be asked to engage, have small group discussions (made possible through "breakout rooms"), make presentations, etc. It is unprofessional to engage in activities that are not directly related to the current class topic and presentation (e.g., doing other coursework during class, texting, etc.)
6. Professional behavior/demeanor is required during synchronous meetings and appropriate professional etiquette is expected in all communications with other classmates, TAs, and instructors.
7. Behavior and written or verbal exchanges that are disrespectful, harassing, or otherwise professionally inappropriate are not acceptable. Students need to treat classroom engagements in a similar manner as they would engage with colleagues in any professional setting.

Course Materials Copyright

This syllabus, course lectures and presentations, and any course materials provided throughout this term are protected by U.S. copyright laws. Students enrolled in the course may use them for their own research and educational purposes. However, reproducing, selling or otherwise distributing these materials without written permission of the copyright owner is expressly prohibited, including providing materials to commercial platforms such as Chegg or CourseHero. Doing so may constitute a violation of U.S. copyright law as well as PAU's Code of Student Conduct.

Faculty as Mandatory Reporters

Students at Palo Alto University have the right to live and learn in an academic environment that is free from all forms of discrimination including sexual and gender-based discrimination, harassment, and violence including sexual assault, relationship violence, and stalking. If you (or someone you know) has experienced or is experiencing these types of behaviors, please know that you are not alone. Resources and support are available at PAU. PAU has confidential resources available to you through the Office of Student Success. These services are available to provide support, resources, and referrals to numerous community agencies that can provide the information and support you need.

Please know that if you choose to confide in me, I am required by the university to report to the Title IX Coordinator/PAU Office of Student Success, as PAU and I want to ensure you are connected with all

the support the university can offer. You are not required to respond to outreach from the university if you do not want to do so. Reports can be submitted by using the online reporting form available on PAU's webpage, available at this link:

https://paloalto.co1.qualtrics.com/jfe/form/SV_3Faq3d6Kp5Ik1Y9 or by submitting a written complaint by email to the Title IX Coordinator, Stephanie Montes, at smontes@paloalto.edu.

Mental Health and Wellness

PAU strives to create a culture of support and recognizes that your mental health and wellness are equally as important as your physical health. We want you to know that it's OK if you experience difficulty, and there are several resources available to help you succeed emotionally, personally, and academically.

While Palo Alto University does not have a counseling center on campus for students, we do have several mental health support options. If you need mental health support, please reach out to the Student Success Office at studentsuccess@paloalto.edu.

Some services available include (subject to change):

- Through [TimelyCare](#), part of [TimelyMD](#) a leading telehealth company specializing in higher education, all students have access to:
 - 24/7 virtual access to medical and mental health care from anywhere in the United States - at no cost. Any PAU student has access to a licensed provider via a smartphone or any web-enabled device. Licensed providers are available to offer medical and mental health support via phone or secure video visits.
 - **Medical** - On-demand virtual access to a medical provider that can treat a wide range of common illnesses like cold and flu, sinus infection, allergies, and more
 - **Scheduled Medical** - Appointment-based options to speak with a medical provider
 - **TalkNow** - 24/7, on-demand access to a mental health professional to talk about anything at anytime
 - **Scheduled Counseling** - Speak to a licensed counselor (up to 12 visits per year)
 - **Group Sessions** - Weekly Guided Meditation and Yoga Group Sessions, plus specialized discussions throughout the year.
- [Session Sync](#): Session Sync is a telehealth platform that provides clinicians across 43 states. It is free to search, and care is provided exclusively by licensed psychologists with secure messaging, online booking, and is HIPAA compliant. For insurance reimbursement, contact your insurance provider to see if they offer out of network coverage for mental health and discuss superbills with your selected clinician.
- [American Psychological Association \(APA\) Psychologist Locator](#): This website provides you the opportunity to find practicing psychologists in your area.
- PAU encourages all students to become familiar with personal insurance plan coverage to access additional mental health and healthcare as needed.

Other potential therapy support resources:

- Loveland Therapy Fund: <https://thelovelandfoundation.org/therapy-fund/>
- National Queer & Trans Therapists of Color Network: <https://nqttcn.com/en/mental-health-fund/>
- Asian Mental Health Collective: <https://www.asianmhc.org/lotus-therapy-fund/>
- Open Path Collective: <https://openpathcollective.org/>

Appendix A: *Alcohol/Chemical Dependency Detection and Treatment A minimum of fifteen (15) contact hours from a degree-granting educational institution or in an extension course offered by an approved/accredited institution [BPC § [2914\(e\)](#) & CCR § [1382.3](#)]*

California Board of Psychology – Laws and Regulations Relating to the Practice of Psychology, Article 3. Education and Experience.

§ 1382.3. Training in Alcoholism/Chemical Dependency Detection and Treatment.

The requirements set forth in Section 2914 (e) of the code shall be satisfied by completion of a graduate level course which meets the following criteria:

- (a) The course shall be devoted solely to the topic of alcoholism and chemical dependency detection and treatment and shall not be less than a semester or a quarter term in length.
- (b) The course must be obtained at an educational institution, or in an extension course offered by an institution, which is either credited under Education Code Section 94310.1, or approved under Education Code Section 94310.2, by the State Department of Education.
- (c) An original transcript indicating successful completion of the course shall be deemed sufficient evidence for purposes of satisfying this requirement.
- (d) The course shall include training in each of the following subjects as they relate to alcoholism and chemical dependency:
 - (1) The definition of alcoholism and other chemical dependency, and the evaluation of the user.
 - (2) Current theories of, and research on, the etiology of substance abuse.
 - (3) Physiological and medical aspects and effects of alcoholism and other chemical dependency.
 - (4) Psychopharmacology and the interaction of various classes of drugs, including alcohol.
 - (5) Diagnosing and differentiating alcoholism and substance abuse in patients referred for other clinical symptoms, such as depression, anxiety, psychosis, and impotence.
 - (6) Populations at risk with regard to substance abuse.
 - (7) Cultural and ethnic considerations.
 - (8) Prenatal effects.
 - (9) Adolescent substance abuse.
 - (10) Implications for the geriatric population.
 - (11) Iatrogenic dependency.
 - (12) Major treatment approaches to alcoholism and chemical dependency, including research and application.
 - (13) The role of persons and systems which support or compound abuse.
 - (14) Family issues which include treatment approaches with families of alcoholics and/or substance abusers.
 - (15) The process of referring affected persons.
 - (16) Community resources offering assessment, treatment and follow-up for the abuser and family.
 - (17) Ethical and Legal issues for clinical practice.
 - (18) Prevention of substance abuse.

Credits

Note: Authority cited: Section 2930, Business and Professions Code. Reference: Section 2914(e), Business and Professions Code.