

**THE UNIVERSITY OF TEXAS AT AUSTIN  
SCHOOL OF SOCIAL WORK**

**Course Number:** SWN360K/  
SWN393R23  
**Unique Number:** 96060 / 96145  
**Semester:** Summer 2008  
**Meeting Time:** Mon/Wed 1:30-4:00 pm  
**Meeting Place:** SSW2.116  
**Office Number:** SSW1.218G  
**Office Phone:** 471-0520  
**Office Hours:** Mon & Wed 1:00-1:30  
or by appointment

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**Instructor's name:**



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Work

**Teaching Assistant:**  
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## **TREATMENT OF CHEMICAL DEPENDENCE**

### **I. Standardized Course Description**

The course is designed to provide a basic understanding of contemporary treatment methods used in work with a diverse range of clients recovering from alcohol and/or drug dependence. Emphasis will be placed on integrating the use of Gestalt Therapy, Rational Emotive Therapy, and Behavior Therapy with the 12 Step Program of Recovery/ Minnesota model, Faith-based models, pharmacological model, the Therapeutic Community model and the Drug Court model.

### **II. Pre and/or Co-Requisites**

This course is one of a cluster of courses in the area of chemical dependence. Other courses include; “Dynamics of Chemical Dependence,” “Dual Diagnosis,” “Adolescent Chemical Dependence Prevention and Intervention” and “Relapse and Recovery”.

Students who plan to specialize in chemical dependence and wish to obtain state licensing as a chemical dependence counselor (LCDC), should take a minimum of three (3) courses in this area. It is suggested that the sequence include: “Dynamics of Chemical Dependence,” “Treatment of Chemical Dependence” and one or more from “Dual Diagnosis”, “Adolescent Chemical Dependence Prevention/ Intervention” or “Relapse and Recovery”.

### III. Standardized Course Objectives

By the end of the semester,

1. The student should be able to work with a broad range of clients with understanding, affirmation, and respect for the positive value of diversity.
2. The student should be familiar with basic theoretical concepts and treatment techniques of selected contemporary counseling theories, adjunctive methods and medically supervised programs for treatment of chemically dependent clients.
3. The student should be able to describe the concepts, procedures and preliminary outcome data related to six major models for treatment of chemical dependence: the Pharmacological, the 12 Step, the Minnesota, the Faith-based, the Therapeutic Community and Drug Court.
4. The student should be able to describe basic concepts, propositions, treatment techniques, and procedures of major psychosocial theories including: Gestalt, Rational Emotive, and Behavioral.
5. The student should be able to integrate counseling techniques derived from psychosocial theories covered in the course with the Pharmacological, 12 Step, Minnesota, the Faith-based, Therapeutic Community, and Drug Court models.

### IV. Teaching Methods

Teaching methods will include lecture, group discussion, group exercises, audio-visual materials, field trips, and guest lecturers.

### V. Required Texts, and Materials

#### Required:

— Reading package at University Copy Center in the Social Work Building (Room SSW G-14), (Telephone 471-1615).

— The Anonymous Press Mini Edition of Alcoholics Anonymous (2003) The Anonymous Press: Malo, WA (this little book can be purchased in class for 1\$)

Dr. Shorkey's website (<http://128.83.80.200/tattc/>) resources related to:

1. Social work and chemical dependence (social work knowledge, values and practice methods)
2. Chemical dependence with diverse population groups: adolescents, women, men, African Americans, Mexican Americans, Native Americans, Asian Americans, Gays and Lesbians and persons with mental disorders.
3. Models and frameworks of chemical dependence

4. Psychosocial theories related to chemical dependence treatments and other resources.

## VI. Course Requirements

Reading assignments should be completed prior to class and will provide the basis for discussion. Students are encouraged to ask questions and make comments during lectures. Student's questions and comments provide the instructor an important assessment tool for whether or not readings are being completed outside of class.

Quizzes: 30 points each

### Mid-Semester and Final Quiz

The quizzes will test students' knowledge of the therapeutic approaches covered in the course and students ability to critically analyze and compare these models. The test formats will include short answer questions and essay questions. The mid-semester quiz (Due July 9) will be a take-home quiz whereas the second quiz (July 28) will be an open book quiz that takes place in the classroom. Quizzes are scheduled at the times indicated on the course outline.

**UNDERGRADUATE Required Assignments:** 10 points each – Due on assigned date. If assignments are turned in after the assigned date, students can earn no more than 50% of the points for the assignment. Assignments that are turned in more than 1 week after the assigned date will be graded 0. All assignments must adhere to APA format and reference all sources as well as include in-text citations and a works-cited page.

1. 2 page *summary* (see instructions) of one journal article related to chemical dependence treatments for a selected population group using Dr. Shorkey's website resources on "chemical dependency treatments with diverse population groups" or from electronic databases such as EBSCO, MEDLINE, and PSYCHINFO. This paper must include a full reference for the article selected using APA style.  
Due June 16
2. 2- page *reaction paper* related to an "open" 12-step meeting. Due June 18
3. 2- page *reaction paper* related to Bill Wigmore's presentation. Due June 23
4. 2-page *reaction paper* related to a field visit to drug court. Due June 25
5. 2- page *reaction paper* related to field visit to Phoenix Academy. Due June 30
6. 2- page *reaction paper* related to field visit to Kyle Correctional Facility. Due July 2
7. 2- page *summary* of one journal article related pharmacological treatment of chemical dependence. Due July 7
8. 2- page *reaction paper* related to field visit to Salvation Army. Due July 9
9. 2- page *reaction paper* related to presentation by Mary Boone on Alcohol, Drugs, & the Family. Due July 14
10. 2 page *summary* of main points and your understanding of the social work perspective in CD treatment from one article selected from the instructor's web site related to Social Work and Chemical Dependence (Indexed file of "all articles published in Social Work professional journals for the last 45 years) or from electronic databases such as EBSCO, MEDLINE, and PSYCHINFO. This paper must include a full reference for the article selected using APA style. Due July 16

Students are expected to go beyond the course reference list and select other recent research articles to develop your summary. Articles can be found using Dr. Shorkey's website and electronics databases such as EBSCO, MEDLINE, and PSYCHINFO. Students are required to use APA style to format the bibliography.

**GRADUATE Required Assignments:** Due on assigned date. If assignments are turned in after the assigned date, students can earn no more than 50% of the points for the assignment. Assignments that are turned in more than 1 week after the assigned date will be graded 0. On designated assignments, Graduate students will research the recent literature regarding a designated treatment modality and attach a short critique (300 words) of a selected article and attach it to the assignment (\*). All assignments must adhere to APA format and reference all sources as well as include in-text citations and a works-cited page.

1. 1-2 page *summary* of one journal article related to chemical dependence treatments for a selected population group using Dr. Shorkey's website resources on "chemical dependency treatments with diverse population groups" or from electronic databases such as EBSCO, MEDLINE, and PSYCHINFO. 10 pts. Due June 16.
- \*2. 2- page *reaction paper* related to an "open" 12-step meeting. + *Critique* an article related to the AA approach. 15 pts. Due June 18
3. 2- page *reaction paper* related to Bill Wigmore's presentation. 10 pts. Due June 23.
- \*4. 2-page *reaction paper* related to a field visit to drug court. + *Critique* an article related to drug court. 15 pts. Due June 25.
- \*5. 2- page *reaction paper* related to field visit to Phoenix Academy. +*Critique* an article related to therapeutic community for adolescents. 15 pts. Due June 30.
- \*6. 2- page *reaction paper* related to field visit to Kyle Correctional Facility. +*Critique* an article related to therapeutic communities for adults. 15 pts. Due July 2.
7. 2- page *summary* of one journal article related pharmacological treatment of chemical dependence. 10 pts. Due July 7.
8. 2- page *reaction paper* related to field visit to Salvation Army. 10 pts. Due July 9
- \*9. 2- page *reaction paper* related to field visit to presentation by Mary Boone on Alcohol, Drugs & the Family. +*Critique* an article related to chemical dependency work with families. 15 pts. July 14.
10. 2 page *summary* of main points and your understanding of the social work perspective in CD treatment from one article selected from the instructor's web site related to Social Work and Chemical Dependence (Indexed file of "all articles published in Social Work professional journals for the last 45 years) or from electronic databases such as EBSCO, MEDLINE, and PSYCHINFO. 10 pts. Due July 16.

Students are expected to go beyond the course reference list and use other recent research articles to develop the bibliography. Articles can be found using Dr. Shorkey's website and electronic databases such as EBSCO, MEDLINE, and PSYCHINFO. Students are expected to use APA style to format the bibliography.

Professor Clay Shorkey

### **Journal Article Summary Outline**

2 PAGE DOUBLE SPACED, 12pt times new roman (not including works cited)

I. Introduction (1 paragraph)

Present the article you reviewed by stating if it is a research article, a literature review article, or a meta-analysis. Provide a rationale for why you chose this article. You may also provide information about the author(s) such as their educational and professional backgrounds. This is optional and should not constitute more than 1-2 sentences.

II. Article Summary (2-3 paragraphs)

In this section the student is expected to summarize the article providing information about the problem that the author attempts to address, the methodology used to conduct the research, and the findings.

III. Your Critical reaction about the article (2-3 paragraphs)

Discuss your reactions to the paper. Do you agree or disagree with the authors' main points? Why? How does this article relate to the class discussions and readings? Was any information missing from the article?

The student is expected to provide thorough rationale for points of agreement and disagreement with the author's main points. In this process, the students are to use either in-text citations from class readings and lectures or highlight additional dimensions within the same authors' research assumptions. Personal opinions must be presented in the form of logical and convincing arguments. Case examples and practice wisdom are also acceptable if the agency is clearly identified and appropriately cited.

\*For this section of the paper, the student does not have to answer all the questions. Only the ones that seem to generate a dynamic discussion about the article may be addressed\*

IV. Conclusion

The student is also expected to conclude their assignment with a 1-2 sentence summary of the main things they learned from analyzing the article.

**IMPORTANT: MUST INCLUDE BOTH IN-TEXT CITATIONS AND AN ATTACHED WORKS CITED IN APA FORMAT**

Professor Clay Shorkey

## Reaction Paper Outline

2 PAGE DOUBLE SPACED, 12pt times new roman (not including works cited)

### V. Introduction (1 paragraph)

The student is expected to identify the event that they attend with specific information such as the name of the program, the location, how many people were there etc. The date in which the student attended the event is also important. If the student is given a choice in the nature of the event, they will provide thorough rationale as to why they chose this specific event.

### VI. Observations (2-3 paragraphs)

In this section the student will briefly describe the proceedings of the event in which they attended. This includes the components of the event and the order in which they occurred. The student will also identify the treatment modality or practice model in which the event is classified and explain specifically how the event was an example of the model or modality. What elements of the specific event that you attended concur with the characteristics of its model as explained by the readings?

### VII. Your Critical reaction to the event (2-3 paragraphs)

Discuss your reactions to the event. Did the event deviate from the readings' account of its practice model? How did it differ and why? How did attending the event differ or concur with your expectations? Did you agree or disagree with certain elements of the event? Why? How did you feel about attending the event? Would you recommend it to a client faced with chemical dependence? Why or why not?

The student is expected to provide thorough rationale for points of agreement and disagreement. In this process, the students are free to use their personal opinion and are encouraged to cite in-class readings as well. Personal opinions can use life experiences or practice wisdom. However, multiple sides of the issue must be examined. Why would some individuals/clients find this treatment beneficial if you do not?

\*For this section of the paper, the student does not have to answer all the questions. Only the ones that seem to generate a dynamic discussion about the article may be addressed\*

### IV. Conclusion

The student is also expected to conclude their assignment with a 1-2 sentence summary of the main things they learned from attending the event.

**IMPORTANT: MUST INCLUDE BOTH IN-TEXT CITATIONS AND AN ATTACHED WORKS CITED IN APA FORMAT IF SOURCES ARE USED**

### VI. Class Policies

Class attendance is required to complete all of the assignments. Students may miss no more than two (2) class sessions. Students who fail to attend class on a regular basis (missing more than 2 classes without a valid excuse, e.g., medical documentation) will receive one course grade lower than their final grade when points are totaled. Students who miss more than three unexcused classes may receive two grades lower than their final grade. Students who are one or two points below the cut-off for a letter grade may receive the higher grade at the end of the semester based on class participation.

GRADING

	<u>Undergraduates</u>	<u>Graduates</u>
2 quizzes	60 (30 pts. each)	60 (30 pts. each)
10 assignments	100 (10 pts. each)	125(5@10 pts each) *(5@25 pts each)
Attendance	15	15
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	175	200

Attendance:

0 to 1 missed class: 15 points	157-175 (90%-100%) = A	188-200 (94%-100%) = A
2 missed classes: 10 points	140-156 (80%- 89%) = B	180-187 (90% - 93%) = A-
3 missed classes: 0 points	123-139 (70%- 79%) = C	174-179 (87% - 89%) = B+
	105-122 (60%- 69%) = D	168-173 (84% - 86%) = B
	0-104 ( 0%- 59%) = F	160-167 (80% - 83%) = B-
		154-159 (77% - 79%) = C+
		148-153 (74% - 76%) = C
		140-147 (70% - 73%) = C-
		134-139 (67% - 69%) = D+
		128-133 (64% - 66%) = D
		120-127 (60% - 63%) = D-
		119 & bellow (59% & below) = F

Grading Scale: (Grades are rounded up to the next number at .5). Grading of all written assignments will take into account the quality of the writing as well as the content. The APA (5<sup>th</sup> ed.) format should be followed. Written material should be carefully proofread and corrected for errors in punctuation, typographical errors, and spelling errors. Good writing requires a reiterative process that must be followed if quality is to improve. It is a good idea to read your paper several times and if possible have someone else read it.

Students requesting an incomplete for medical problems or family emergencies must fill out the required form available in the Student Service office and discuss their request with the instructor.

School of Social Work Policy

Read the School of Social Work Safety statement: As part of professional social work education, students may have assignments that involve being in agency settings and/or the community. As such, these assignments may present some risks. Sound choices and caution may lower risks inherent to the profession. It is the student's responsibility to be aware of and adhere to policies and practices related to agency and/or community safety.

Students should notify instructors regarding any safety concerns. Information shared in class about agencies and clients is considered to be covered by the NASW Code of Ethics regarding the sharing of information for supervisory purposes. Agencies are aware that information is shared in class for this purpose. However, discussion outside of class with individuals not in this class or with other class members in settings where you cannot assure that no one else may overhear the conversation is considered a breach of confidentiality and will result in recommendation against admission to the BSW program.

### University Policy

The University of Texas at Austin is proud of its students' commitment to academic integrity and their pledge to abide by its policy on scholastic dishonesty. The tradition of intellectual honesty is maintained by the cooperation of students and faculty members. School policy on this subject can be found in General Information 1994-1995. Scholastic dishonesty in this class may result in a grade of F for the course with possible reporting to the Dean of the School of Social Work and the Dean of the Graduate School.

The University of Texas at Austin provides upon request, appropriate academic accommodations for qualified students with disabilities. Any student with a documented disability (physical or cognitive) who requires academic accommodations should contact the Service for Students with Disabilities area of the Office of the Dean of Students at 471-6259 (voice) or 471-4641 (TTY for users who are deaf or hard of hearing) as soon as possible to request an official letter outlining authorized accommodations.

Excerpt from The Center for Teaching Effectiveness, The University of Texas at Austin, (No Date). Teachers and Students: A Sourcebook for UT-Austin Faculty, pp. C.8.b-7 - C.8.b-8

## VII Course Schedule

Date	Description	Text/Readings
JUNE 9 Class 1	Social Work and Chemical Dependence Treatment Course Introduction	Course Syllabus
JUNE 11 Class 2	<p>Spontaneous Recovery/Natural Recovery</p> <p>Motivational Interviewing (Readiness for Change)</p> <p>Intervention</p> <p><b>Reminder:</b> Attend "Open" AA Group, Reaction paper <b>due June 18<sup>th</sup> !! (Assignment #2)</b></p>	<p>Cunningham, Why do people stop their drug use? p.695-710.</p> <p>Johnson, Intervention: How to help someone who does not want help, p. 61-87. (handout)</p> <p>Ludwig, Cognitive processes associated with "spontaneous" recovery from alcoholism, p. 57-62.</p> <p>Prugh, Recovery without treatment, 24 &amp; 71.</p> <p>Liepman, Nirenberg &amp; Begin, Evaluation of a program designed to help family and significant others to motivate resistant alcoholics into recovery, p. 209-221.</p> <p>Loneck, Garrett &amp; Banks, A Comparison of Johnson intervention with four other methods of referral to outpatient treatment, p. 233-246.</p>
JUNE 16 Class 3	<p>Minnesota Model of Treatment and Secular Organization for Sobriety, Women for Sobriety, &amp; Rational Recovery</p> <p>Guest Lecture: Sandra Bruce, SIMS Foundation <b>Assignment #1 Due</b></p>	<p>Shorkey &amp; Uebel, Minnesota Model, p. 1-6.</p> <p>Shorkey &amp; Uebel, Secular Organizations for Sobriety, p. 1-4.</p> <p>More readings on next page Shorkey &amp; Uebel, Women for Sobriety, p. 1-4.</p> <p>Shorkey &amp; Uebel, Rational Recovery, p. 1-5.</p> <p>Whitten, Court-Mandated treatment</p>

		works as well as voluntary, p. 1 &6.  Clay, Reducing wait time improves treatment access, retention, p. 1-5.
JUNE 18  Class 4	12 Step  Guest Lecture: Bill Wigmore, Executive Director of Austin Recovery <b>Assignment #2 Due</b>	<i>Alcoholics Anonymous</i> , ch.1-5. Anderson, Perspective on treatment: The Minnesota experience, p. 65-76  Smith, Buxton, Bilal & Seymour, Cultural points of resistance to the 12-step recovery process, p. 97-108.
JUNE 23  Class 5	Drug Court  <b>*No class at regular time this date*</b>  <u>Field Visit:</u> Appear at 6 p.m. sharp at Court Room #4  6 <sup>th</sup> . Floor, Thurman Blackwell Justice Center on  JUNE 23 (Mon); JUNE 25 (Wed); JUNE 26 (Thurs) <b>Assignment #3 Due</b>	Cresswell & Deschenes, Minority and non-minority perceptions of drug court program severity and effectiveness, p. 259-292  . Finn & Newlyn, Miami's "Drug court": A different approach, p. 1-15  More readings on next pg Longshore, et.al. Drug Court: A Conceptual Framework p. 7-26.
JUNE 25  Class 6	Therapeutic Community  <u>Field Visit:</u> Phoenix House <b>Assignment #4 Due</b>	DeLeon, The therapeutic community and behavioral science, p. 74-99.

		<p>More readings on next pg. DeLeon, Melnick, Schoket &amp; Jainchill, Is the therapeutic community culturally relevant? Findings on race/ethnic differences in retention in treatment, p. 77-86.</p>
<p>JUNE 30 Class 7</p>	<p>Therapeutic Community – part 2 <u>Field Visit: Kyle Correctional Facility</u></p> <p><b>Assignment # 5 Due</b></p>	<p>Gudyish, Werdegar, Sorensen, Clark &amp; Acampora, A day of treatment program in therapeutic community setting: Six month outcomes-the Walden House day treatment program, p. 441-447.</p> <p>Knight, Simpson &amp; Hiller, Three-year reincarceration outcomes for in-prison therapeutic community treatment in Texas, p. 337-351.</p> <p>Waters, Fazio, Hernandez &amp; Segarra, The story of CURA, a Hispanic/Latino drug therapeutic community, p. 113-134.</p> <p>Marcus, Fine &amp; Kouzekanani, Mindfulness-based mediation in a therapeutic community, p. 305-311.</p>
<p>JULY 2 Class 8</p>	<p>Detoxification &amp; Pharmacotherapeutic Treatment Approaches</p> <p>Including: Methadone, Disulfiram/Antabuse, Buprenorphine, Naltrexone &amp; Clonidine</p> <p>Guest Lecture: Reid Minot, Pharmacotherapy</p> <p><b>Assignment #6 Due</b></p>	<p>Corelli &amp; Hudmon, Pharmacologic interventions for smoking cessation, p. 39-51 (this article will be posted on blackboard).</p> <p>Ling &amp; Smith, Buprenorphine: Blending practice and research, p. 87-92.</p> <p>More readings on next pg.</p>

		<p>Rawson, McCann &amp; Hasson, Pharmacotherapies for substance abuse, p. 18-24.</p> <p>Rubio et al, Clinical predictors of response to Naltrexone in alcoholic patients: who benefits most from treatment with Naltrexone?, p. 227-233.</p>
<p>JULY 7</p> <p>Class 9</p>	<p>Faith-Based Programs</p> <p>Field visit: Salvation Army</p> <p><b>Assignment #7 Due</b></p> <p><u>Reminder:</u> Begin completing midterm quiz</p>	<p>Salvation Army Adult Rehabilitation Center website at <a href="http://www.bakersfield.org/salarmy/">http://www.bakersfield.org/salarmy/</a></p>
<p>JULY 9</p> <p>Class 10</p>	<p>Faith-Based Treatment Programs</p> <p>Alcohol/Drugs &amp; The Family</p> <p>Guest Lecture: Mary Boone, LCDC, LCSW</p> <p><b>Assignment #8 Due</b></p> <p><b>Midterm quiz Due</b></p>	<p>Bensch, Kirshblum, Scruggs, &amp; Lord, Victory Ministries: Outcry in the Barrio, p. 1-12.</p> <p>Neff, Shorkey, &amp; Windsor, Contrasting faith-based and traditional substance abuse treatment programs, pp.49-61</p>
<p>JULY 14</p> <p>Class 11</p>	<p>Gestalt</p> <p><b>Assignment #9 Due</b></p> <p>Possible Guest Lecturers</p>	<p>Buchbinder, Gestalt therapy and its application to alcohol-ism treatment, p.49-67.</p> <p>Lacks &amp; Leonard, Fear of feelings:Addressing the emotional process during recovery, p. 69-80</p> <p>Shorkey &amp; Uebel, Gestalt Therapy, p., 1-6.</p>
<p>JULY 16</p> <p>Class 12</p>	<p>Behavior Therapy</p> <p><b>Assignment #10 Due</b></p> <p>More readings on next pg</p>	<p>Havermans, Increasing the efficacy of cue exposure treatment in preventing relapse of addictive behavior, p. 989-994.</p> <p>Higgins, Wong, Badger, Ogden, &amp; Dantona, Contingent reinforcement increases cocaine abstinence during outpatient treatment and one year follow-up, p. 64-72.</p>

		<p>O'Farrell &amp; Fals-Stewart, Behavioral couples therapy for alcoholism and drug abuse, p. 49-58.</p> <p>Petry, Martin, Cooney &amp; Kranzler, Give them prizes and they will come, p. 250-257.</p> <p>Shorkey, Use of behavioral methods with individuals recovering from substance dependence, p. 135-158.</p>
<p>JULY 21</p> <p>Class 13</p>	<p>Rational Emotive/ Cognitive Behavioral Therapy</p> <p>Guest Lecture: Mavis Bradsher, LMSW- Cognitive Behavioral Approach to Dual Recovery, Shoal Creek Hospital</p>	<p>Beck, Wright, Newman &amp; Liese, Cognitive therapy of substance abuse, p. 135-168.</p> <p>DiGiuseppe, Robin &amp; Dryden, On the compatibility of rational emotive therapy and Judeo-Christian philosophy: A focus on clinical strategies, p. 355-367.</p> <p>Ellis, McInerney, DiGiuseppe &amp; Yeager, Rational emotive therapy with alcoholics and substance abusers, p. 22-37.</p> <p>Johnson, Finney, &amp; Moos, End-of-treatment outcomes in cognitive-behavioral treatment and abuse in a community setting, p. 1007-1017.</p>
<p>JULY 23</p> <p>Class 14</p>	<p>Empirically Based Treatment Techniques &amp; Addiction, Stress &amp; Relapse</p> <p>Guest Lecture: Marilyn Bradford, LCSW</p>	<p>Miller &amp; Carolly, Drawing the scene together: ten principles, ten recommendations, p. 293-311. (handout).</p>
<p>JULY 28</p> <p>Class 15</p>	<p><b>In Class Second Quiz</b></p>	<p>Covering 2<sup>nd</sup> half of course</p>

## Bibliography

### **SPONTANEOUS RECOVERY & OTHER TABOO TOPICS**

Cunningham, J.A., Koski-Jännes, A., and Toneatto, T. (2000) Why do people stop their drug use? Results from a general population sample. *Contemporary Drug Problems*, 26, 695-710.

Johnson, VE. (1986). *Intervention: How to help someone who does not want help*. San Francisco: Harper & Row. 61-87.

Liepman, Nirenberg & Begin (1989). Evaluation of a program designed to help family and significant others to motivate resistant alcoholics into recovery. *American Journal of Drug and Alcohol Abuse*, 15(2), 209-221.

Loneck, Garrett & Banks (1996). A Comparison of Johnson intervention with four other methods of referral to outpatient treatment. *American Journal of Drug and Alcohol Abuse*, 22(2), 233-246.

Ludwig, A. (1985). Cognitive processes associated with “spontaneous” recovery from alcoholism. *Journal of Studies on Alcohol*, 46, 53-58.

Prugh, T. (1986). Recovery without treatment. *Alcohol Health and Research World*, ii (1), 24 & 71.

### **12 STEP & MINNESOTA MODEL**

Alcoholics Anonymous, (1996). *Alcoholics Anonymous*. New York: World Service, Inc.

Clay, R. (2007). Reducing wait time improves treatment access, retention. *Substance Abuse and Mental Health Services Administration*, 15(5), 1-5.

Shorkey, C. & Uebel, M. (Sage, 2008). Minnesota Model. *Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery*, 1-6.

Shorkey, C. & Uebel, M. (Sage, 2008). Secular Organizations for Sobriety (SOS). *Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery*, 1-4.

Shorkey, C. & Uebel, M. (Sage, 2008). Women for Sobriety, *Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery*, 1-4.

Shorkey, C. & Uebel, M. (Sage, 2008). Rational Recovery. *Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery*, 1-5.

Smith, D. E., Buxton, M. E., Bilal, R., & Seymour, R. B. (1993). Cultural points of resistance to the 12-step recovery process. *Journal of Psychoactive Drugs*, 25(1), 97-108.

Whitten, L. (2006). Court-mandated treatment works as well as voluntary. *NIDA Notes*, 20(6), 1 &6.

## **DRUG COURT**

Cresswell, L. S. & Deschenes, E. P. (2001) Minority and non-minority perceptions of drug court program severity and effectiveness. *Journal of Drug Issues*, 31(1), 259-292.

Finn, P. & Newlyn, A. K. (June 1993). Miami's "Drug court": A different approach, Dade County diverts drug defendants to court-run rehabilitation program. *Program Focus*. Miami: National Institute of Justice, 1-15.

Longshore, D., Turner, S., Wenzel, S., Morral, A., Harrell, A., McBride, D., Deschenes, E., & Iguchi, M. (2001). Drug Courts: A conceptual framework. *Journal of Drug Issues*, 31(1), 7-26.

## **THERAPEUTIC COMMUNITIES**

De Leon, G. (1988). The therapeutic community and behavioral science. In B.A. Ray (Ed.) *Learning factors in substance abuse*. Rockville, MD: Alcohol, Drug Abuse, and Mental Health Administration, 74-99.

DeLeon, G., Melnick, G., Schoket, D., & Jainchill, N. (1993). *Journal of Psychoactive Drugs*, 25(1), 77-86.

Guydish, J., Werdegar, D., Sorensen, J. L., Clark, W., & Acampora, A. (1995). A day treatment program in a therapeutic community setting: Six month outcomes - The Walden House day treatment program. *Journal of Substance Abuse Treatment*, 12(6), 441-447.

Knight, K., Simpson, D. D., & Hiller, M. L. (1999). Three year reincarceration outcomes for in prison therapeutic community treatment in Texas. *The Prison Journal*, 79(3), 337-351.

Marcus, M.T., Fine, M., & Kouzekanani, K. (2000). Mindfulness-based meditation in a therapeutic community. *Journal of Substance Abuse*, 5, 305-311.

Waters, J. A., Fazio, S. L., Hernandez, L., & Segarra, J. (2002). The story of CURA, a Hispanic/Latino drug therapeutic community. *Journal of Ethnicity in Substance Abuse*, 1(1), 113-134.

## **PHARMACOLOGICAL TREATMENT APPROACHES**

Corelli, R.L. & Hudmon K.S. (2006) Pharmacologic interventions for smoking cessation. *Critical Care Nursing Clinics of North America*, 18(1), 39-51.

Ling, W. & Smith, D. (2002). Buprenorphine: Blending practice and research. *Journal of Substance Abuse Treatment*, 23, 87-92.

Rawson, R. A., McCann, M. J., & Hasson, A. L. (2000). Pharmacotherapies for substance abuse treatment: The beginning of a new era. *Counselor*, 1 (1), 18-24.

Rubio, G., Ponce, G., Rodriguez-Jumenez, R., Jimenez-Arriero, M.A. Hoenicka, J., & Palomo, T. (2005) Clinical predictors of response to naltrexone in alcoholic patients: who benefits most from treatment with naltrexone? *Alcohol and Alcoholism*, 40(3), 227-233.

## **FAITH-BASED PROGRAMS**

Bensch, C., Kirshblum, L., Scruggs, E., & Lord, A. (2001). *Victory Ministries: Outcry in the Barrio*, 1-12.

Neff, A.; Shorkey, C.; & Windsor, L. (2006). Contrasting faith based and traditional substance abuse treatment programs. *Journal of Substance Abuse Treatment*, 30, 49-61.

## **GESTALT**

Buchbinder, J. (1986). Gestalt therapy and its application to alcoholism treatment. *Alcoholism Treatment Quarterly*, 3(3), 49-67.

Lacks, H. E. & Leonard, C. A. (1986). Fear of feeling: Addressing the emotional process during recovery. *Alcoholism Treatment Quarterly*, 3(3), 69-80.

Shorkey, C. & Uebel, M. (2008). Gestalt Therapy, *Encyclopedia of Social Work*, 1-5.

## **RATIONAL EMOTIVE THERAPY**

Beck, A. T., Wright, F. D., Newman, C. F., & Liese, B. S., (1993). *Cognitive therapy of substance abuse*. New York: Guilford Press, 135-168.

DiGiuseppe, R. A., Robin, M. W., & Dryden, W. (1990). On the compatibility of Rational Emotive therapy and Judeo-Christian philosophy: A focus on clinical strategies. *Journal of Cognitive Psychotherapy*, 4(4), 355-367.

Ellis, A., McInerney, J. F., DiGiuseppe, R., & Yeager, R. J. (1988). *Rational-Emotive therapy with alcoholics and substance abusers*. New York: Pergamon Press, 22-37.

Johnson, J.E.; Finney, J.W.; & Moos, R.H. (2006). End-of-treatment outcomes in cognitive-behavioral treatment and 12-step substance abuse treatment programs: Do they differ and do they predict 1-year outcomes? *Journal of Substance Abuse Treatment, 31*, 41-50

Morgenstern, J., Blanchard, K., Morgan, T., Labouvie, E., & Hayaki, J. (2001) Testing the effectiveness of Cognitive-Behavioral treatment for substance abuse in a community setting: Within treatment and Posttreatment findings. *Journal of Consulting and Clinical Psychology, 69*(6), 1007-1017.

## **BEHAVIOR THERAPY**

Havermans, R. C., Jansen, A.T.M. (2003). Increasing efficacy of cue exposure treatment in preventing relapse of addictive behavior. *Addictive Behaviors, 28*, 989-994.

Higgins, S. T., Wong, C. J., Ogden, D. E., & Dantona, R. L. (2001). Contingent reinforcement increases cocaine abstinence during outpatient treatment and one year follow-up. *Journal of Consulting and Clinical Psychology, 68*(1), 64-72.

O'Farrell, T. J. & Fals-Stewart, W. (2000). Behavioral couples therapy for alcoholism and drug abuse. *The Behavior Therapist, 23*(3), 49-58.

Petry, N., Martin, B., Cooney, J. L., & Kranzler, H. R. (2000). Give them prizes and they will come: Contingency management for treatment of alcohol dependence. *Journal of Consulting and Clinical Psychology, 68*(2), 250-257.

Shorkey, C. T. (1994). Use of behavioral methods with individuals recovering from substance dependence. In D.K. Granvold (Ed.) *Cognitive and behavioral treatment: Methods and applications*. Pacific Grove, CA: Brooks/Cole, 135-158.

## **ADDITIONAL READING**

Miller, W.R. & Carroll, K.M. (2006). In Miller & Carroll (Eds). *Rethinking substance abuse*. Guilford Press.