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Addressing the Need for Substance Use Prevention, Treatment, and Recovery Education to Prepare Social Work Students for Practice

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Addressing the Need for Substance Use Prevention, Treatment, and Recovery Education to Prepare Social Work Students for Practice

by

Tara Anderson

A Banded Dissertation in Partial Fulfillment

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Abstract

Social workers serve individuals, families, and communities affected by substance use. With lives lost daily to substance use, social work students must be prepared across settings to address substance use in practice. Using harm reduction as a conceptual framework, this banded dissertation includes three scholarly components that address substance use prevention, treatment, and recovery education and the importance of preparing students for social work practice.

First, is a conceptual article that argues for inclusion of substance use education into the BSW and MSW curriculum. Factors related to substance use are identified, incorporating the alignment of harm reduction with social work values. The intersection with social work practice, education, and the Grand Challenges of Social Work are explored. In response to the lack of required substance use training for social work students, macro, mezzo, and micro level implementation strategies are recommended.

Second, is a study aimed at understanding how substance use courses in Master of Social Work (MSW) programs are conceptualized, utilizing a qualitative content analysis of 29 syllabi. Though there was much diversity, common themes emerged. Content was focused primarily on substance use treatment including evidence-based practices, with a gap in course topics addressing prevention. Pedagogy frequently incorporated experiential learning. This review of courses provides support for inclusion of substance use concepts in social work education.

The third product is a poster presentation at the peer-reviewed NASW- Minnesota Chapter 2019 Annual Conference. The presentation included preliminary research findings from the qualitative content analysis of syllabi from MSW program courses focused on substance use. The poster included key components related to the current state of substance use education in
MSW programs, research methodology, preliminary findings, and recommendations for social work education.

This dissertation contributes to the body of knowledge related to substance use education in social work programs. Implications for social work education include the need for the development of academic standards specific to substance use to prepare students for practice. Implications for future research include gathering insights from multiple diverse perspectives including faculty, practitioners, and individuals in recovery on what is needed to prepare social work students for practice.

*Keywords*: substance use disorder, alcohol and other drug use, social work education, harm reduction, Grand Challenges for Social Work, MSW, syllabi
Acknowledgements and Dedication

I would like to extend my appreciation to all those who supported the completion of this dissertation, including the faculty and staff of both St. Catherine University and the University of St. Thomas. Thank you to the School of Social Work for supporting my growth and development as a scholar practitioner to serve on the CSWE Substance Use Task Force. I also want to offer my gratitude to the peer reviewers and Graduate Writing Assistant for feedback which strengthened my writing. From the first day of class, the faculty have role modeled excellence in teaching and leadership and demonstrated the characteristics we strive for in this doctoral program. I especially thank Dr. Whitebird for her advising over the course of the DSW program.

I would like to acknowledge the many social work educators that teach substance use courses or include substance use content in the courses they teach. The work you are doing to prepare students for practice is vital. I would also like to acknowledge the individuals, families, and communities impacted by substance use and the work of many interdisciplinary organizations and community members that are coming together to collaborate on efforts to end the opioid crisis and ensure individuals have access to recovery supports.

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Addressing the Need for Substance Use Prevention, Treatment, and Recovery Education to Prepare Social Work Students for Practice

Alcohol and other drug (AOD) misuse, substance use disorders (SUD), and the current opioid crisis are impacting individuals, families, and communities at an alarming rate. In 2018, around 21.2 million people aged 12 or older needed substance use treatment in the past year, while only about 3.7 million people received any treatment (SAMHSA, 2019). In 2018 there were 67,367 drug overdose deaths and 70% of these involved opioids (Centers for Disease Control & Prevention [CDC], 2020). Currently there are 128 lives lost each day from opioid overdoses (CDC, 2020). Additionally, around 88,000 people die in the U.S. each year related to alcohol (Stahre et al., 2014).

As social workers have historically led the way in responding to those impacted by substance use, we continue to have a role in preventing many safety, health, and social problems related to AOD misuse. Employment of social workers that provide treatment for addiction and mental health is expected to grow 22% from 2018 to 2028, which is faster than average, due to the need for addiction and mental health counseling (Bureau of Labor Statistics, 2020).

Substance use has been recognized as a social challenge that social work should address and has been incorporated into the American Academy of Social Work and Social Welfare (AASWSW) Grand Challenges for Social Work (GCSW), which is aimed at addressing significant social problems of our time (2020). The GCSW agenda promotes individual and family well-being, strengthening the social fabric, and a more just society (AASWSW, 2020). Social workers encounter AOD issues in many settings. In the challenge of Closing the Health Gap, and its initiative Reducing and Preventing Alcohol Misuse and Its Consequences, social work has a role to play in responding to the health concerns and social problems associated with
alcohol misuse, including alcohol misuse among youth and throughout the lifespan (Begun & Clapp, 2015). We have a role in addressing social stigma of individuals who use substances as identified in the challenge Achieve Equal Opportunity and Justice (Goldbach et al., 2015). Further, incorporation of substance use can be seen in the GCSW to Promote Smart Decarceration (Pettus-Davis & Epperson, 2015). Looking at some of these challenges from an upstream perspective, the GCSW to Ensure Healthy Development for All Youth initiative Unleashing the Power of Prevention, targets prevention interventions (Hawkins et al., 2015).

Despite incorporation of AOD use into the Grand Challenges of Social Work and the NASW Standards for Social Work Practice with Clients with Substance Use Disorders (National Association of Social Workers [NASW], 2013), the current Educational Policy and Accreditation Standards (EPAS) of the Council on Social Work Education (CSWE) lacks requirements for inclusion of substance use content into BSW or MSW curriculum. Consequently, education offered in this area is inconsistent. Wilkey et al. (2013) identified that MSW courses vary at institutions ranging from no classes, to an elective, to a required course, or a concentration, specialization, or AOD certificate program.

A review of the literature identifies a continued and consistent deficit in the amount of substance use course offerings in MSW programs (Minnick, 2019a; Quinn, 2010; Wilkey et al, 2013), though studies have shown the benefit of substance use training for students (Amodeo et al., 2002; Bina et al, 2008). When focusing on faculty, recent research includes a model for training social work faculty to better understand AOD identification and treatment methods as a strategy to increase student AOD knowledge and skills (Lundgren et al., 2018).

However, unanswered questions remain about courses that address substance use. It is necessary to have a comprehensive understanding of how substance use concepts are taught in
the field of social work to further our understanding as educators, inform current pedagogy, and enhance curriculum development related to substance use. Thus, this banded dissertation addresses substance use prevention, treatment, and recovery education to prepare social work students for practice. First, a conceptual article argues for education on substance use for all social work students. Next, is a research article based on a content analysis of MSW substance use course syllabi. Lastly, is a poster presentation conducted at the NASW- Minnesota Annual Conference.

Key terms are use, misuse, substance use disorder, and recovery. Substance use includes the use of alcohol, illicit drugs, prescription medications non-medically, and over-the-counter drugs with the risk of health and social problems (U.S. Department of Health and Human Services [HHS], 2016). Misuse describes AOD use which puts the user and/or others at risk for harmful effects (HHS, 2016). Substance use disorder is classified along the continuum as mild, moderate, or severe and diagnosed separately for each substance (American Psychiatric Association, 2013). Recovery is described as improved health and wellbeing, living a self-directed life, and working to reach one’s full potential (HHS, 2016).

**Conceptual Framework**

The concept of harm reduction as both a philosophy and an evidence-based practice provides a framework for this banded dissertation. Using the philosophy of harm reduction, consequences associated with substance use can be reduced. Harm reduction can be regarded as similar to the social work phrase of “meeting people where they’re at”, with a continuum of strategies including reducing risk with safer use, managing use, and non-use (Harm Reduction Coalition, n.d.). In harm reduction the reality of substance use in society is acknowledged and,
while not minimizing dangers, focuses on reducing harmful effects as opposed to ignoring them or stigmatizing users (Harm Reduction Coalition, n.d).

Integrating harm reduction in these scholarly works is fitting with social work. Straussner (2012) has indicated that the harm reduction ideology is a growing and current approach in the field. The *NASW Standards for Social Work Practice with Clients with Substance Use Disorders* supports the harm reduction approach as being in alignment with the social work values of self-determination and competence (NASW, 2013). When we support self-determination, it corresponds with the core ethical values and principles to respect the dignity and worth of the person (NASW, 2018). Harm reduction concepts continue to align with social work in their strength-based approach to partnering with the client and acknowledging the client as the expert in their own life (Vakharia & Little, 2017). The principles of harm reduction offer a framework that can be used in social work practice and education.

**Summary of Scholarship Products**

The first scholarly product is a conceptual paper arguing for the advancement of substance use education for BSW and MSW students. This paper puts the problem of addiction into context by examining factors related to AOD misuse and SUD, including the impact of social determinants. The role of social workers from past to present and the inclusion of substance use within the Grand Challenges of Social Work agenda confirms social workers’ prominent role in addressing this social problem. The state of substance use education in social work programs includes a review of student and faculty education, harm reduction education and curricular resources. In response to the lack of required training in substance use education, recommendations are made to implement strategies to enhance competency.
The research study conducted for the second scholarly component asks the question: What are MSW substance use courses teaching to prepare students to effectively address AOD associated problems in practice? Research on the content of substance use courses is needed to inform the field on methods utilized to prepare students to effectively address substance use in social work practice. The research design was a qualitative content analysis of a sample of 29 regionally diverse syllabi from MSW substance use courses incorporating traditional, online, and hybrid courses from public and private institutions. Major components of the syllabi were examined including course titles, course descriptions, required texts, objectives, assignments, and course topics. The article outlines key findings in each section of the syllabi. Findings of this study can be used to inform future substance use courses to prepare students for practice.

The third product is my poster presentation at the National Association of Social Workers- Minnesota Chapter 29th Annual Conference held in Brooklyn Center, MN on June 11-12, 2019. The poster I presented, on June 12th, was based on preliminary findings of research from the content analysis of syllabi from MSW program courses focused on substance use. The poster was titled, “What Schools of Social Work are Teaching about Substance Use Disorders: A Content Analysis of MSW Substance Use Course Syllabi.”

Discussion

Findings from this banded dissertation reinforce the critical importance of education for social work students on substance use. CSWE does not have requirements for education related to substance use in the EPAS and not all social work programs offer a course on substance use. This leaves numerous social work students graduating without preparation to encounter social and health problems related to substance use in their primary practice settings.
The study of syllabi demonstrates a vast amount of content is included in substance use courses. There are differing views on whether education on substance use should be taught in a stand-alone course or integrated across the curriculum. To further prepare students and increase learning opportunities, it is suggested content be delivered in a required course in addition to integrating concepts across the curriculum.

In alignment with current literature, this research study showed that substance use courses are not offered in all MSW programs, and when they are, it is typically an elective (Minnick, 2019a; Wilkey et al., 2013). Prior research on course descriptions found most courses were focused primarily on treatment as opposed to prevention or policy (Minnick, 2019a). In this study, prevention was minimally included in course topics, occurring in 21% of syllabi. While the emphasis on treatment and development of clinical skills identifies a strength, further attention is needed on evidence-based prevention methods to address the issue of substance use from an upstream perspective by tackling root causes. Knowledge of evidence-based practices that address substance use has been recommended (HHS, 2016; NASW, 2013). This analysis showed a strong inclusion of objectives and topics on evidence-based practices, with some specific interventions noted more frequently and a call for further inclusion of training in Screening, Brief Intervention, Referral to Treatment (SBIRT).

**Implications for Social Work Education**

Macro-level strategies are needed at both federal and state levels to support implementation for substance use education for social work. This consists of access to funding for social work addiction research and expansion of SBIRT training to all social work programs. It also involves implementation of policy changes and efforts towards collaboration through organizations such as CSWE, NASW, and community level organizations that can advance
social work education. The requirement of a foundation course is one approach for providing knowledge on substance use in BSW and MSW programs (Beimers et al., 2013; Osborne-Leute et al., 2019; Quinn, 2010). Creation of standard guidelines for substance use education by CSWE is recommended (Minnick, 2019b). The development of academic standards related to substance use content in social work education is needed for course design, implementation, and outcome evaluation. These findings could contribute to the development of best practice guidelines in teaching substance use focused courses. Additionally, these findings could inform future work by CSWE related to incorporating substance use education into the social work curriculum.

Mezzo level strategies are also needed. To implement any new policies, faculty training programs, including those focused on interprofessional education (Osborne-Leute et al., 2019), are recommended. Sponsoring conferences are another way to build knowledge (Wilkey et al., 2013) for both faculty and students. Social work programs may consider joining the GCSW by engaging in research, advocacy, policy, or education. Engaging with the GCSW is an opportunity for students to address some of the largest societal problems of our lifetime.

Micro level approaches can be implemented at the program level. Social work programs first need to be aware of how substance use is impacting their community. One way to better understand the regional impact of addiction is through engaging in dialogue with the program’s community advisory council (Wilkey et al., 2013). Programs can offer substance use specializations through a concentration or certification. If smaller programs lack resources to offer this independently, they could collaborate with other departments or local technical colleges to partner in developing an addiction specialization. When a program is unable to offer a specialization, individual courses and integrating field placement agencies that specialize in SUD treatment could be considered (Wilkey et al., 2013).
Finally, findings can be used by social work faculty to update and develop future AOD courses with continuity in the type of learning outcomes, topics, and course assignments utilized. This analysis found a strength in the emphasis on treatment of substance use disorders, but also revealed a gap in many syllabi related to inclusion of education on substance use prevention. Consideration should be made for balancing topics on prevention, treatment, and recovery concepts. A case is also made for consideration of incorporating harm reduction philosophies and strategies into substance use education, considering the alignment with social work values.

**Implications for Future Research**

A content analysis of syllabi included in a SUD concentration is recommended to analyze what is commonly included in this specialty track for social work. Including BSW syllabi in future studies can offer additional comparison. Interviews with social work faculty, practitioners, and individuals in recovery to explore perceptions of knowledge and skills students need in order to be prepared for practice could offer rich depth and enhance validity of future research.

Social workers are in position to lead the GCSW and address significant social and health problems associated with substance use. To do this will require standardized competencies for education so that no student will graduate without preparation to address substance use in social work practice settings. Given the vital role of social workers in working with individuals, families, and communities impacted by substance use, the CSWE must elevate education on SUD through inclusion of these concepts in the next EPAS. With lives at stake, it is necessary for the field of social work to rise to the challenge in implementing education on substance use prevention, treatment, and recovery concepts for all students.
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Are We Meeting the Challenge?

Substance Use Education for Social Work

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Abstract

The focus of this conceptual article is the critical need for substance use education for social work students. This article describes factors related to substance use disorders and alcohol and other drug misuse. How substance use intersects with social work practice and with the Grand Challenges for Social Work are identified and the current state of substance use education for social workers is explored. The alignment of harm reduction principles with social work values is also considered. Given the lack of standard comprehensive substance use training for social work students, strategies must be implemented at the macro, mezzo, and micro levels to prepare students for practice and to prepare the field of social work to lead the Grand Challenges.

*Keywords:* substance use disorder, alcohol and other drug misuse, social work education, harm reduction, Grand Challenges for Social Work
Are We Meeting the Challenge? Substance Use Education for Social Work

The American Academy of Social Work and Social Welfare (AASWSW), (2020) set forth the 12 Grand Challenges for Social Work (GCSW) initiative, which calls on the social work community to improve individual and family well-being, strengthen the social fabric, and promote a more just society. Addressing harms related to substance use as well as the community and governmental responses can be seen in many of the GCSW such as: Close the Health Gap, Achieve Equal Opportunity and Justice, Ensure Healthy Development for all Youth, and Promote Smart Decarceration (Begun & Clapp, 2015; Goldbach et al., 2015; Hawkins et al., 2015; Pettus-Davis & Epperson, 2015). The way social and health issues related to substance use weave throughout the GCSW demonstrates how it is similarly interwoven through multiple social work practice settings, reinforcing the need for all social workers to have training in substance use prevention, early intervention, treatment, and recovery supports.

Substance use disorders (SUD) and alcohol and other drug (AOD) misuse has an impact on individuals, families, and communities with deadly consequences. On October 26, 2017, President Trump declared a Nationwide Public Health Emergency to address the opioid crisis (White House, 2018). In 2017 there were 70,237 drug overdose deaths, and 47,600 (67.8%) of these involved opioids (Centers for Disease Control & Prevention [CDC], 2019). Additionally, around 88,000 people die in the U.S. annually related to alcohol use (Stahre et al., 2014).

Despite NASW Standards for Social Work Practice with Clients with Substance Use Disorders (National Association of Social Workers [NASW], 2013), the current Council of Social Work Education (CSWE) Educational Policy and Accreditation Standards (EPAS) does not include requirements for inclusion of substance use content into the BSW or MSW curriculum. Consequently, education in this practice area is inconsistent. Wilkey et al. (2013)
identified that Master of Social Work (MSW) courses vary at institutions ranging from nothing, to an elective, to a required course, or to a concentration, specialization, or AOD certificate program. *Facing Addiction in America: The Surgeon General’s Report on Alcohol, Drugs, and Health* identifies schools of social work as providing little to no mandatory education on substance use related problems or on substance misuse prevention, which are factors in the shortage of skills in the workforce and potentially a concern relevant to quality of care (U.S. Department of Health and Human Services [HHS], 2016).

This article first describes contextual factors related to substance use and the intersection with social work practice, including the GCSW agenda. Next, the state of substance use education in social work programs is reviewed with attention to student and faculty education, harm reduction education, and curriculum resources. Considering the lack of required standard training in substance use for students, recommendations are made to implement macro, mezzo, and micro level strategies to enhance competency. Students need substance use education to be prepared for social work practice and to lead the GCSW agenda.

**Context of the Problem**

Substance use related health and social problems have a wide scope. The field of social work historically has been on the front line responding to the needs of individuals, families, and communities. Education for social work students is both timely and needed going forward, as is evident by the incorporation of substance use into the GCSW.

**Substance Use, Misuse, Disorder & Recovery**

*Substance use* includes the use of alcohol, illicit drugs, prescription medications non-medically, and over-the-counter drugs with the risk of health and social problems (HHS, 2016). Both alcohol and drugs have potential for *misuse*, which refers to AOD use that puts the user
and/or others at risk for harmful effects (HHS, 2016). AOD misuse is not a diagnosis, though some who misuse substances meet criteria for a SUD as well. Substance use disorder is classified on a continuum as either mild, moderate, or severe and is diagnosed separately for each substance used (American Psychiatric Association, 2013). Recovery is characterized by improved health and wellbeing, living a self-directed life, and working to reach one’s full potential (HHS, 2016).

**Scope**

In 2018, around 21.2 million people aged 12 or older needed substance use treatment in the past year while only about 3.7 million people aged 12 or older received any treatment (SAMHSA, 2019). Direct and indirect impacts of substance misuse include physical and mental health at risk, lowered quality of life, increased criminal activity, vehicle crashes, health expenses and child maltreatment (HHS, 2016). Alcohol misuse can result in poor school performance, injuries, pre-term birth complications and fetal alcohol syndrome, development of chronic and infectious diseases, mental health problems, alcohol use disorders, intimate partner violence, and suicide (World Health Organization, 2018).

**Social Determinants**

Social determinants of health (SDOH) are economic and social conditions that influence health and can result in health inequalities (Walters et al., 2016). SDOH in racial and ethnic minority groups impact individuals with a SUD (Bowen & Walton, 2015). For example, there is increased risk for substance use among Hispanic and Black youth and LGBT individuals (Goldbach et al., 2015). Disparities are not likely to improve without addressing obstacles related to language, provider bias, attitudes towards treatment, and stigma (Manuel, 2017).

**Role of Social Work**
Past to Present

Historically, social workers have engaged with individuals, families, and communities impacted by AOD misuse. One of the earliest pioneers of social work, Mary Richmond, addressed treatment for alcohol use in her 1917 book Social Diagnosis. As opposed to the moral model of addiction, Richmond promoted it instead as a disease quite ahead of her time, considering the disease model of addiction was yet to be described by Jellinek decades later (Straussner, 2001). Recognizing the chronic nature of addiction, Richmond (1917) details the role of social workers to gather data, work in collaboration with the medical team, and continue with the patient for after-care. Social work later expanded to working with affected family members. For example, in the 1940s prominent social workers pioneered work with wives, in the 1960s with families, and in the 1980s with adult children (Straussner, 2001).

Social workers continue to have a role in responding to AOD misuse. To address the opioid epidemic, the U.S. Department of Health and Human Services (2018) has developed a strategy of: better addiction prevention, treatment, and recovery services; better data; better pain management; better targeting of overdose reversing drugs; and better research. Social work can play a part in meeting those goals. Employment of social workers that provide treatment for addiction and mental health is expected to grow 22% from 2018 to 2028, which is faster than average, due to the continued need for addiction and mental health counseling (Bureau of Labor Statistics, 2020).

Social workers need to be capable of working with people where they present, which is often outside of treatment centers. The NASW Standards for Social Work Practice with Clients with Substance Use Disorders (NASW, 2013) suggests social workers have specialized
knowledge and understanding to work with this population. If graduating students are to meet NASW standards, there is a need for minimal requirements on substance use education.

**Grand Challenges of Social Work**

Looking to the future, social work has tasked itself with the GCSW of *Closing the Health Gap* which includes the initiative, *Reducing and Preventing Alcohol Misuse and its Consequences* (AASWSW, 2020). Because social workers encounter AOD issues in many practice settings and with individuals throughout the lifespan, we have a role in addressing this challenge. Recommendations to meet this challenge include social work collaboration with researchers and practitioners in other fields, with governmental and nongovernmental organizations, and even with the alcohol industry (Begun & Clapp, 2015). Additional solutions include structural, scientific and emerging technological innovations, as well as prevention and treatment innovations which include integration of treatment models with technology (Begun & Clapp, 2015). Social workers can bring together key stakeholders in government, academia, businesses, and communities to ensure a unified response to prevention, treatment, and recovery practices (Begun & Clapp, 2015).

Substance use is also addressed in the GCSW to *Achieve Equal Opportunity and Justice* through the initiative *Promoting Equality by Addressing Social Stigma*, which identifies individuals with an addiction as being in a social category whose members experience social inequality, stigma, and marginalization in the (Goldbach et al., 2015). Stigma exists towards individuals who use substances in various settings, including by healthcare professionals, which impacts quality of care (Van Boekel et al., 2013). Addressing stigma as a cause of inequality and health disparities involves self-analysis of the profession on how socially stigmatized groups perceive social workers, what our role has been in sustaining structural and systemic inequities,
as well as individual examinations of implicit biases, and increasing our awareness (Goldbach et al., 2015).

Further, the GCSW to *Promote Smart Decarceration* calls for policy change to make reduction of disparities a key outcome in decarceration efforts, considering the majority of the imprisoned population is made up of people of color, people in poverty, and individuals with mental health and substance use disorders (Pettus-Davis & Epperson, 2015). Looking at some of these challenges from an upstream perspective, the GCSW to *Ensure Healthy Development for All Youth* initiative *Unleashing the Power of Prevention*, identifies that interventions targeting prevention of adolescent substance use are effective and recommends both universal prevention interventions for all youth as well as selective interventions focused on youth at elevated risk or with the beginning of problem involvement (Hawkins et al., 2015).

**Substance Use Education in Social Work**

Understanding the current state of social work education on AOD misuse and SUD is necessary as we consider a path forward. The EPAS have nine competencies and component behaviors including knowledge, values, skills, and cognitive and affective processes (CSWE, 2015). This competency-based educational framework focuses on student learning outcomes and it is up to the individual programs to develop the content, pedagogical approach, and educational activities to enable the students to perform these competencies (CSWE, 2015).

Resources are available for programs that implement AOD education into the curriculum. However, there are no requirements in the EPAS for students to have proficiency in knowledge of AOD misuse or skills in working with populations with a SUD. There is no indication of substance use in the EPAS at all, which is concerning because “social workers who are inadequately prepared to discuss alcohol and drug use with clients may fail to understand the
biopsychosocial effects of substance abuse, leading to negative consequences and unintentional harm to the client” (Beimers et al., 2013, p.2).

**Student Education**

SUD education in social work is inconsistently offered from program to program with no CSWE requirements on what knowledge, skills, values, cognitive and affective processes should be integrated into courses. Research findings indicate only 25% of BSW programs offer one or more courses on substance use (Decker et al., 2005). When students are offered courses, studies have shown BSW (Beimers et al., 2013) and MSW (Bina et al., 2008) students with an education course on substance use felt more knowledgeable of substance use concepts and prepared to work with clients with a SUD.

Wilkey et al. (2013) found, of all 210 accredited MSW programs, 64% of schools offered an addictions course elective, while only 4.7% of schools had one or more required addictions courses. Findings further indicated 14.3% of schools offered an addiction specialization, concentration, or certificate and only 5.7%, had an addiction-focused research center (Wilkey et al., 2013). Johnson’s (2012) study of MSW syllabi in Minnesota schools of social work found substance use education lacked sufficient integration into core curriculum. Continued deficits were found in a study of MSW program course listings that discovered 34% of programs reviewed did not offer a substance use course and only 3% had a mandatory substance use course (Minnick, 2019). In a study of graduate programs, Quinn (2010) indicates the lack of training “is so significant that this deficiency can only be described as *institutional denial or minimization*” (p. 10). With just over half of MSW programs minimally offering an elective, many students are at risk of graduating without preparation for working with a population they will encounter in practice.
Faculty Education

Building faculty expertise in SUD to expand education in social work programs is needed (Wilkey et al., 2013). An analysis of MSW faculty identified 27% of programs lack a full-time faculty with substance use practice history and interest in substance use research, which could impact implementation of new courses or integration of AOD content into curriculum (Minnick, 2019). In a study of clinical social work faculty participating in the Alcohol and Other Drugs Education Program (ADEP), faculty reported AOD content to be inadequately integrated into foundation curriculum and that barriers to integration included lack of space in the curriculum and the need for increased faculty expertise (Krull et al., 2018). The ADEP model is designed to increase student knowledge and skills through the enhanced training of social work faculty to better understand AOD identification and treatment methods and increase their confidence in teaching AOD content (Lundgren et al., 2018). Since being trained, participating faculty have included more content on substance use disorders, introduced evidence-based interventions such as motivational interviewing and Screening, Brief Intervention, and Referral to Treatment (SBIRT), and created a larger curriculum infusion of AOD content (Salas-Wright et al., 2018). Enhancing faculty knowledge is one piece of the puzzle in better preparing students.

Education on Harm Reduction

The harm reduction philosophy can offer a holistic and non-stigmatizing view of social and health problems associated with substance use and social work training needed for practice. Evidence-based harm reduction strategies can reduce and prevent harmful consequences of substance use. The principles outlined by the Harm Reduction Coalition (n.d) acknowledge the reality of substance use in society and, while not minimizing the dangers, focuses on reducing harmful effects as opposed to ignoring it or stigmatizing users. Harm reduction can be viewed as
similar to the social work motto of “meeting people where they’re at,” and utilizes a continuum of strategies aimed at reducing consequences related to substance use including reducing risk with safer use, managing use, and non-use (Harm Reduction Coalition, n.d.).

Straussner (2012) indicated the harm reduction ideology is a growing and current approach in the field. When exploring the integration of harm reduction in MSW substance use courses, Eversman (2012) found that it varies from highly present to minimally present and that faculty and student attitudes toward harm reduction also vary on a continuum ranging from acceptance to opposition. With more exposure to harm reduction concepts, student views became more accepting (Eversman, 2012). Estreet et al. (2017) found that education on harm reduction can improve MSW student attitudes and knowledge on addressing opioid use disorders.

Harm reduction concepts align with social work in their strength-based approach to creating a collaborative partnership with the client, acknowledging the client as the expert in their own life (Vakharia & Little, 2017). With harm reduction, a person’s relationship with substances is viewed non-judgmentally (Vakharia & Little, 2017). In addition, the NASW Standards for Social Work Practice with Clients with Substance Use Disorders (2013) supports the harm reduction approach as being in alignment with social work values of self-determination and competence. Supporting self-determination corresponds with the core ethical values and principles to respect the dignity and worth of the person (NASW, 2020).

Curriculum Resources

While no required guidelines are in place by CSWE mandating education on substance use, there are resources, such as the ATTC Educational Package for Opioid Use Disorders-Social Workers, available to support implementing AOD education into curriculum. Others are in development. CSWE convened a Substance Use Task Force to develop competencies and
resources for the *Curricular Guide for Substance Use*, which will be part of the 2015 EPAS Curricular Guide Resource Series (CSWE, 2018). In addition, CSWE received a SAMHSA grant to expand SUD education in social work that will include the development of standardized SUD curriculum, which will align with the curricular guide, as well as a field education component (CSWE, 2019). Yet more work is needed to fully integrate SUD education into the curriculum.

**Future Directions**

Social and health issues related to AOD misuse and SUD are complex and prevalent, frequently intersecting with social work practice. Historically, social work has played a helping role; today, social work can lead by responding to the call of the GCSW. However, social work education programs are lacking consistent requirements in providing foundational knowledge on substance use and recovery concepts to students. Considering the lack of standard training in substance use, implementing interconnected multilevel strategies to enhance competency is essential.

**Macro Level Strategies**

*Access to Funding*

Macro level strategies, such as the development and ongoing funding of federal and state-wide policies supportive of SUD education in the field and classroom, are recommended to support implementation and accountability for SUD education for social work. For example, expanded federal funding is recommended for implementation of SBIRT training in all programs of social work. Including SBIRT training for students and field instructors is a viable step in increasing student knowledge and reducing consequences of alcohol misuse (Putney et al., 2017). Federal grants such as the Opioid Workforce Expansion Program (OWEP) for
professionals that targets preparing students to provide prevention, treatment, and recovery services offer additional opportunities for social work programs to develop and implement addiction training (HHS, 2019). Finally, expanding federal funding is recommended for the development of additional social work addiction research institutes. Innovative social work research is critical in order to meet the goals set forth in the GCSW.

Policy Change

The Council for the Accreditation of Counseling and Related Educational Programs (2015), has already included requirements in the foundational curriculum for all counselor education graduates to understand theories and causes of addiction and has developed standards for addiction counseling as a specialty. In line with other professional organizations that are moving to mandating education on substance use content, social work too must enhance training of students to ensure the field does not lag further behind in training the workforce.

Organizations such as the CSWE play a critical role in advancing social work education. For substance use content to be consistently taught in all programs of social work, future versions of the EPAS should include requirements to include substance use content in the curriculum. The requirement of a foundational course is one strategy for providing knowledge on substance use in BSW and MSW programs (Beimers et al., 2013; Osborne-Leute et al., 2019; Quinn, 2010). Additionally, state licensure boards for social work should standardize requirements for coursework in substance use in the application for initial licensure and include SUD as a component of continuing education hours (Quinn, 2010).

Collaboration

An example of macro level collaboration is seen in the Social Work Education Core Principles for the Prevention and Management of Substance Misuse (2017), endorsed by
CSWE, which was prepared by the Governor’s Social Work Education Working Group on Substance Misuse. This collaboration between the Massachusetts governor’s office, NASW chapter, and the deans and program directors of the graduate schools of social work developed cross-institutional core principles on prevention and management of substance misuse for all social work schools in Massachusetts to adopt and integrate into the education for all social work students. Following Massachusetts, universities can partner with stakeholders to form a collaborative to identify training needs, share resources, and implement standards.

**Mezzo Level Strategies**

Considering the prevalence of encountering substance use in all areas of social work practice, educational standards are vital. To implement any new standards, continued faculty training programs, including those focused on interprofessional education (Osborne-Leute et al., 2019), are recommended. Community agencies with knowledgeable staff specializing in SUD could also be utilized to provide training to increase faculty knowledge (Wilkey et al., 2013).

Sponsoring conferences are another way to build knowledge (Wilkey et al., 2013). For example, hosting a conference addressing the opioid crisis may be a feasible first step for programs to offer addiction training for students and faculty. Additionally, social work programs could join the GCSW by engaging in research, advocacy, policy, or education. Responding to the GCSW is an opportunity for students to address some of the most crucial social problems of our time.

**Micro Level Strategies**

Micro level approaches can be implemented in social work programs. Recognizing barriers exist, identifying ways to increase training with the least roadblocks and funding challenges is critical. A first step is understanding the regional impact of addiction through
engaging in dialogue with the program’s community advisory council (Wilkey et al., 2013), which consideration should be made for being inclusive of the local recovery community.

Through interprofessional collaboration, social work programs can partner with other departments in the university or local technical colleges that may already offer an addiction specialization. Partnerships such as these are a good use of resources for smaller programs and those with limited faculty expertise in addiction. Programs that ensure the specialization aligns with any state licensing for substance use counseling professionals offers students the added opportunity for dual licensure. The addiction specialization is recommended for the most comprehensive training (Wilkey et al., 2013). When unable to offer a specialization, required and elective classes are recommended as well as incorporating field placement agencies that specialize in SUD treatment (Wilkey et al., 2013). Additionally, collaboration through cross-listing courses for BSW/MSW programs could increase opportunities for student learning.

**Harm Reduction**

Social workers are likely to interact with individuals with an opioid use disorder in generalist and specialty settings. Incorporating a harm reduction philosophy by training students to recognize and respond to an overdose with the use of naloxone, as well as provision of overdose kits for all students, is advised and in alignment with The Governor’s Social Work Education Working Group on Substance Misuse (2017) which has recommended students be able to demonstrate use of naloxone for an opioid overdose rescue. Naloxone is a life-saving medication used to reverse an opioid overdose. It is important that naloxone is accessible to first responders, opioid users, and the people in their lives (HHS, 2016). Opioid overdose fatalities decreased in communities with overdose education and nasal naloxone distribution programs.
which trained individuals in preventing, recognizing, and responding to an overdose and provided them with rescue kits (Walley et al., 2013).

**Conclusion**

The field of social work education must consider a way forward that positions social workers as leaders in the field by providing standardized educational competencies so that no student will graduate without preparation to address substance use with individuals, families, groups, and communities. Strategies can be implemented on the macro, mezzo, and micro level to enhance opportunities to increase competency.

There are currently 128 lives lost each day to opioid overdose (CDC, 2020). With many more lost in the battle of addiction to alcohol and other drugs, the lives of our family members, community members, and clients we serve are at risk. It is imperative that the field of social work hold itself accountable to implement substance use prevention, treatment, and recovery education to respond to the call of the Grand Challenges for Social Work and the calling of our profession. Social work has a vital role to play in preventing and responding to the many safety, health, and social problems related to AOD misuse. Social work students need education to respond competently, to serve compassionately, and to engage in advocacy.
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Teaching Substance Use in Social Work: A Content Analysis of MSW Course Syllabi

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Abstract

Health and social problems related to substance use intersect with social work across settings, populations, and communities. This study aimed to better understand how substance use courses in Master of Social Work (MSW) programs are conceptualized through a qualitative content analysis of major components of course syllabi. A glimpse into the state of substance use education for MSW students is provided through an in-depth examination of course titles, course descriptions, required texts, course objectives, assignments, and course topics of 29 regionally diverse syllabi with the purpose of better understanding how students are prepared to effectively address substance use in social work practice. These findings have implications for social work education.

*Keywords:* substance use, social work education, curriculum, MSW, syllabi
Teaching Substance Use in Social Work: A Content Analysis of MSW Course Syllabi

There are currently 128 lives lost each day to opioid overdose (CDC, 2020). The field of social work has a role to play in responding to the challenges facing individuals, families, and communities impacted by substance use and has done so from our early pioneers to the current role of social workers in fighting the opioid crisis. Substance use intersects with social work practice in specialty treatment settings but is also evident in other practice settings social workers can be found such as child welfare, hospitals, jails, or schools.

Yet there are no Council of Social Work Education (CSWE) required standards for curriculum specific to substance use. Previous studies have examined course listings and faculty profiles from program websites and handbooks (Minnick, 2019a; Wilkey et al., 2013). A consistent deficit in the amount of substance use course offerings in MSW programs has been identified (Minnick, 2019a; Quinn, 2010; Wilkey et al., 2013). MSW courses vary at institutions ranging from no courses, to an elective, to a required course, to a concentration, specialization, or alcohol and other drug (AOD) certificate program (Wilkey et al., 2013). Additionally, a study of MSW syllabi in Minnesota found education on substance use lacked sufficient integration into core curriculum (Johnson, 2012).

Given the scope and extent of substance use disorders (SUD), a comprehensive and in-depth understanding of how substance use concepts are taught in the field of social work is necessary. There are unanswered questions regarding the conceptualization of substance use courses including course topics or learning objectives. Addressing this gap offers an opportunity to expand our understanding as educators, inform current pedagogy, and enhance curriculum development related to substance use. This research asks: what are MSW substance use courses teaching to prepare students to effectively address AOD associated problems in practice? The
research design used a qualitative content analysis of a sample of syllabi from MSW substance use courses.

Key terms are use, misuse, substance use disorder, and recovery. Substance use includes use of alcohol, illicit drugs, prescription medications non-medically, and over-the-counter drugs with the risk of health and social problems (U.S. Department of Health and Human Services [HHS], 2016). Misuse describes AOD use that puts the user and/or others at risk for harmful effects (HHS, 2016). Misuse is not a diagnosis, though some who misuse substances also meet criteria for a SUD. Substance use disorder is classified as mild, moderate, or severe and diagnosed for each substance (American Psychiatric Association, 2013). Recovery is described as improved health and wellbeing, living a self-directed life, and working to reach one’s full potential (HHS, 2016).

Background

Substance Use Scope and Impact

The misuse of alcohol and other drugs is significant and widespread in its impact on individuals, families, and communities. Harmful use has direct and indirect effects on physical and mental health, the spread of infectious disease, crime and violence, economic and productivity costs, vehicle crashes, and child abuse and neglect (HHS, 2016). In 2018, around 21.2 million people age 12 or older needed substance use treatment in the past year and only around 3.7 million people received any treatment (SAMHSA, 2019). In 2017, there were 70,237 drug overdose deaths in the United States, 47,600 of which were opioid involved (CDC, 2019). These numbers are already staggering and does not include the additional 88,000 annual deaths of alcohol related causes (Stahre et al., 2014).

Social Work Education Addressing Substance Use
Competencies

Social workers have a role in addressing social and environmental factors related to substance use by providing direct services, implementing prevention strategies, coordinating care across systems, facilitating wrap-around services such as housing, employment and accessing recovery supports, as well as providing family supports (HHS, 2016). The need for training in this area is noted in Facing Addiction in America: The Surgeon General’s Report on Alcohol, Drugs, and Health, which indicates schools of social work and other health professionals should include curriculum on the science of prevention, treatment, and recovery (HHS, 2016).

The NASW Standards for Social Work Practice with Clients with Substance Use Disorders (2013) suggest social workers have specialized knowledge and understanding to work with this population, including awareness of:

- psychological and emotional factors, physiological issues, diagnostic criteria, legal considerations, and co-occurrence of mental health disorders and substance use. This knowledge shall include an understanding of family dynamics, the effects that SUDs have on parenting abilities, and the resulting consequences for children. Social workers shall also be knowledgeable about current evidence informed approaches and best practices. (p.11)

Additionally, the Specific Disciplines Addressing Substance Use: AMERSA in the 21st Century – 2018 Update is a multidisciplinary document developed with core competencies needed for practice with patients impacted by substance use (Rutkowski, 2019). This update to the 2002 document includes evidence-based information to support health professionals (medicine, nursing, pharmacy, social work, and physician assistants) in providing services to patients who use substances (Rutkowski, 2019). The broad domains of knowledge, skills,
attitudes, and interprofessional practice frame the core competencies specific to social workers addressing SUDs (Osborne-Leute et al., 2019). Competencies for all social workers should include knowledge of current diagnostic criteria, responding to SUDs across the continuum of care, theories and social work perspectives relevant to substance use (biopsychosocial perspective, ecological perspective, systems theory, transtheoretical model/stages of change, and harm reduction), professional attitudes that reduce stigma, and understanding interprofessional practice (Osborne-Leute et al., 2019).

Evidence-Based Practices. Education that is inclusive of evidence-based practices (EBP) for prevention, treatment, and substance use recovery is critical. EBPs have been found to be effective in preventing and reducing substance use and improving wellbeing (HHS, 2016). These include evidence-based prevention programs, community coalition-based prevention models, prevention policies, Screening, Brief Intervention, and Referral to Treatment (SBIRT), harm reduction (HR) programs, and evidence-based treatments (HHS, 2016). Evidence-based treatments (EBT) include medications and medication-assisted treatment (MAT), recovery support services (RSS), and behavioral therapies including cognitive behavioral therapy, contingency management, community reinforcement approach, motivational enhancement therapy, The Matrix Model, Twelve-step facilitation therapy, and family therapies (HHS, 2016). While not exhaustive, these are some examples of research informed practices that can be considered in the development of curriculum content.

Review of Substance Use Education in Social Work

In a 2013 national study of MSW programs, which examined the prevalence of substance use focused courses and specializations, the authors suggest “a nationwide lack of attention to the topic of addiction in graduate social work schools” (Wilkey et al., 2013, p. 207). They
recommend future research examine social work syllabi to increase understanding of the range of addiction content taught to better assess how prepared students are to encounter substance use in social work practice (Wilkey et al., 2013). Additionally, their review of course titles led them to assume the addiction courses being taught are more general and may lack depth in content (Wilkey et al., 2013).

Continued deficits were found in a national study on MSW substance use focused education which indicated 34% of programs did not offer a substance use course and only 3% had a mandatory course (Minnick, 2019a). The content analysis of MSW substance use course listings identified overall content to be 66% treatment, 18% prevention, 17% policy, 9% other, and 24% were unspecified (Minnick, 2019a). When institutional leaders of MSW programs were surveyed on perceptions of student preparedness to deliver clinical, prevention, and policy focused substance use services, findings indicated that 9% of MSW graduates are not prepared, 67% are somewhat prepared, 22% are prepared, and 1% are very prepared (Minnick, 2019b). Minnick (2019b) indicates the lack of preparedness is “alarming given social work’s role as the primary provider of mental health services in the United States” (p. 14) and recommends CSWE prioritize developing substance use guidelines for MSW programs (Minnick, 2019b). Taking substance use courses can impact preparedness by increasing knowledge (Senreich & Straussner, 2013).

**Council on Social Work Education**

Despite recommendations for social work education to address substance use, the CSWE does not require education for students on SUD. Substance use is not specifically included in the Educational Policy and Accreditation Standards (EPAS) of the CSWE. Without the CSWE standards, inconsistencies will remain on whether substance use concepts are taught in programs
of social work. Further, Minnick (2019a) has raised concern of potential ethical issues surrounding the deficit in substance use education and the “risk of harm to the populations receiving these services from social work clinicians” (p. 6) with inadequate training.

Yet, the CSWE is making strides. In conjunction with the curricular guide for social work practice with substance use in development, the CSWE is piloting expanding SUD education in several schools of social work which will allow for the development of a standardized SUD curriculum and include a field education component (CSWE, 2019). However, given the vital role of social workers in working with individuals on the continuum of AOD use, the CSWE must elevate education on substance use through inclusion of these concepts in the EPAS.

Summary

Graduate social work schools are not consistently providing education to prepare students for practice in the area of substance use. The current state of social work education leaves it possible for students to graduate without having taken a course on SUD and without preparation to encounter AOD use in practice. Using content analysis to study substance use focused syllabi answers the call to gain more understanding of the content and depth of courses available.

Methodology

Content analysis has been used to explore social work syllabi, such as teaching diversity and social justice courses (Mehrotra et al., 2017) and group work (Sweifach, 2014). Content analysis is a research method for systematically analyzing and making inferences from textual data (Engel & Schutt, 2017). Mehrotra et al. (2017), indicated that examining course descriptions and outcome objectives are important to understanding how courses are conceptualized and implemented. This descriptive analysis of course titles, descriptions, required textbooks, objectives, assignments and topics provided an in-depth examination on the content of included
courses to better understand how MSW students are prepared for SUD practice. This study was approved as exempt by the IRB at the University of St. Thomas for research using existing data.

**Data Collection & Sample**

To identify a sample of syllabi, a list of MSW programs was obtained from the CSWE Directory of Accredited Programs as of 7/30/2018 with 287 schools. Syllabi in this study are MSW elective or required substance use focused courses from public and private schools. In this study, an initial 42 programs were excluded, as the CSWE directory indicated an addictions concentration or certificate program. These were excluded as their set of courses would not be comparable to a single course as they are part of a more comprehensive specialization. The intent in this study was to review a typical syllabus a student in a substance use course may receive.

As not all programs offer a substance use course (Wilkey et al., 2013), an attempt was not made to search every program in the directory. Instead, a website search of 147 schools was conducted. An internet search was utilized to collect publicly available syllabi from school websites that met criteria. Syllabi were requested directly when the syllabus was not available on the website, as has been done in other studies using content analysis methods to analyze social work syllabi (Black & Ombayo, 2018; Sweifach, 2014). Schools were chosen using purposive sampling to meet the study aim for the sample to be regionally diverse and include public and private institutions.

Of the websites reviewed, 26 did not offer a substance use course. Thirty schools were excluded for various reasons. For example, some had concentrations not listed in the directory or “mental health & substance abuse” specializations. Programs with three or more courses were excluded, indicating a more comprehensive curriculum. Identified programs without a publicly available syllabus were sent up to two emails requesting participation. Of those schools, 2
responded that the course was not active. Schools contacted directly were informed data would be reported in aggregate and identifiable information would not be disclosed (Sweifach, 2014).

**Sample characteristics**

In this sample, there were 11 schools with syllabi publicly available and obtained online with a total of 12 syllabi. Of the syllabi requested, 16 additional schools provided 17 syllabi.

**Data Analysis**

A multi-phase approach was used to assess the collection of syllabi. First, a small set of syllabi were reviewed to examine the format, structure, and content of the data (Mehrotra et al., 2017). In the next phase, the syllabi were broken down into sampling units that corresponded with the structure of the syllabi including titles, course descriptions, course objectives, required texts, course topics, and assignments. A variety of strategies were used to analyze the sampling units. For example, a simple count for required texts and identifying key words in titles was completed. Course objectives were compiled and sorted multiple times to create groups with a common category (O’Neill & Renzulli, 2013). Excel spreadsheets were used to organize components. Categories were created to organize and describe the textual content in each major section of the syllabi. Both inductive and deductive approaches were used in analyzing the data.

**Findings**

The final sample was comprised of 29 substance use course syllabi from 27 schools. There was 1 required course and 28 electives from 17 public and 10 private institutions. The sample was regionally diverse, including nine of ten CSWE regions. There were 21 traditional courses, 6 online, and 2 hybrid courses. Two were cross listed as BSW/MSW. Findings demonstrate commonalities as well as differences as examined through the syllabi components.

**Course Title**
Typical course titles used language such as *addiction, alcohol and other drugs, substance abuse, substance use, substance use disorder or chemical dependence*. This variance identifies a need, in some cases, to update language to reflect DSM-5 diagnostic changes. Other components of the title included *social work* in 31% and *treatment* in 31%, with a typical title incorporating a SUD descriptor with either *treatment* or *social work*. Titles were primarily generalized, though a minority (n=4) indicated more specific foci. Finally, the word *recovery* is absent from most titles.

**Course Description**

In the sample, 16 syllabi identified one or more overarching course frameworks. The findings include 8 with biopsychosocial, 6 with systems, 2 with strengths, and 2 with other perspectives. This can be useful in understanding how instructors conceptualize their courses. It can also be seen incorporated into course objectives with language such as strengths-based interventions. Though biopsychosocial had the highest frequency, a dominant framework is not evident, rather a variety of frameworks were identified.

**Required Textbooks**

Required texts per course ranged from 0-6, with 52% requiring one book. Courses relied on traditional textbooks, popular books, biographies, and the SAMHSA TIP series. In the 29 syllabi, there were 37 different books. Of those, 26 books were used in one course, 7 were used in two courses, 3 were used in three courses, and 1 was listed in five courses. Most used (n=5) was *Addiction Treatment: A Strength’s Perspective* (Van Wormer & Davis, 2018). The next three books were each listed in three different courses: *Motivational Interviewing: Helping People Change* (Miller & Rollnick, 2013), *Treating Addiction: A Guide for Professionals* (Miller et al., 2011), and *Clinical Work with Substance-Abusing Clients* (Straussner, 2014).

**Course Objectives**
Objectives, also listed as learning outcomes, were reviewed from 23 syllabi, excluding syllabi without substance use specific objectives. Often intertwining content areas were incorporated into one objective such as screening, assessment and diagnosis. See Table 1 for categories of course objectives with high and moderate inclusion across syllabi.

Findings indicate that objectives are primarily written with a focus on developing knowledge. The most notable exception was related to assessment and treatment planning, which were primarily written from a skills perspective. Some categories had variations in how faculty conceptualized the learning outcome, for example, objectives related to interventions were written focused on building knowledge in some syllabi and as developing a skill in other syllabi.

Table 1

Content of Course Objectives with High and Moderate Inclusion across Syllabi

<table>
<thead>
<tr>
<th>Inclusion</th>
<th>Objective Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High</strong> over 50%</td>
<td>Demonstrate knowledge and skills in screening, assessment, diagnosis.</td>
</tr>
<tr>
<td></td>
<td>Identify evidence-based interventions for use with individuals, families, groups.</td>
</tr>
<tr>
<td></td>
<td>Identify historical &amp; contemporary social policies on substance use &amp; treatment.</td>
</tr>
<tr>
<td></td>
<td>Understand physiological effects, pharmacology, and drug classifications.</td>
</tr>
<tr>
<td></td>
<td>Recognize social work roles; apply social work ethical principles &amp; values.</td>
</tr>
<tr>
<td></td>
<td>Identify treatment needs and issues for special populations/diverse groups.</td>
</tr>
<tr>
<td></td>
<td>Understand the etiology and epidemiology of substance use disorders.</td>
</tr>
<tr>
<td><strong>Moderate</strong> 26-50%</td>
<td>Identify theories and models of treatment.</td>
</tr>
<tr>
<td></td>
<td>Develop a client-centered treatment plan.</td>
</tr>
<tr>
<td></td>
<td>Screening, assessment, &amp; treatment with persons with co-occurring disorders.</td>
</tr>
<tr>
<td></td>
<td>Apply knowledge of research findings in addiction to social work practice.</td>
</tr>
<tr>
<td></td>
<td>Describe the impact of AOD misuse on families.</td>
</tr>
<tr>
<td></td>
<td>Understand processes of recovery and relapse prevention strategies.</td>
</tr>
<tr>
<td></td>
<td>Describe prevention strategies for individuals and communities.</td>
</tr>
</tbody>
</table>
Course Assignments

See Figure 1 for the occurrence of assignment categories across syllabi, which includes course participation also receiving credit. The focus of topic and research papers observed most often was related to special populations (n=6). Several assignment categories were found to be experiential in nature and more unique to a SUD course including attendance at a community support group meeting and the abstinence project.

Figure 1
Assignment Categories

A substance use-specific assignment used often is attendance at community support group meetings (n=19). Eleven courses required 1 meeting, 4 courses required 2 meetings, and 4 courses required 3 or more. Meetings were described as support, self-help, mutual-help, community, or 12-step. Some specified Alcoholics Anonymous, others gave options including Narcotics Anonymous, or others including Al-Anon. The purpose described by some instructors was to develop a personal understanding of self-help groups and addiction, to understand the role
of meetings in the recovery process, as well as to use the experience in the role of a social worker that may educate others. This assignment often included instructions on confidentiality, introductions, and the difference between closed and open meetings. In many cases it included a reflection which, in some syllabi, included affective reactions, connecting the experience to theoretical concepts, and implications for practice. A separate self-reflection assignment (n=8) asked students to examine personal beliefs, biases, and values related to substance use.

Another experiential assignment was an abstinence project (n=8). This typically involves abstaining from a substance, food, or activity for a given time and self-reflective journaling their experience. Some syllabi indicated an alternate to acquire a new habit as opposed to abstaining. The rationale has been described by some instructors as a way of understanding challenges of addiction and recovery as well as personal awareness. Caldwell (2007) provides a detailed description on how to implement this experiential assignment to deepen student learning.

Course Topics

Course topics were listed in 28 of 29 syllabi. See Table 2 for the range of course topics broken down into primary categories with selected examples of key terms. Topics offered insight into the primary areas being taught. As with objectives, content at times is cross-categorical. In the broadest sense, topics found across syllabi addressed five main areas: populations, clinical skills, addiction science, policy, and prevention. The least mentioned category was prevention, which was explicitly listed in less than 25% of syllabi topics (n=6). Every syllabus was inclusive of at least one component of the addiction science category with the majority including a topic with the key term neurobiology, brain, or biology of addiction. The populations and clinical skills categories include several findings related to incorporation of EBT and the NASW Standards for Social Work Practice with Clients with Substance Use Disorders (2013).
Table 2

Course Topics and Selected Key Terms

<table>
<thead>
<tr>
<th>Course Topics</th>
<th>Selected Examples of Sub-categories &amp; Key Terms</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Populations</strong></td>
<td></td>
</tr>
<tr>
<td>Families</td>
<td>Family, therapy, interventions, co-dependency, roles</td>
</tr>
<tr>
<td>Clients with Co-Occurring Disorders</td>
<td>Co-occurring disorders, integrated treatment</td>
</tr>
<tr>
<td>Special Populations</td>
<td>Youth, gender, sexual orientation, race/ethnicity</td>
</tr>
<tr>
<td>Social Worker Roles &amp; Responsibilities</td>
<td>Culture-diversity; cognitive, affective, values- self-care, compassion fatigue; ethics-confidentiality; evaluation; practice principles in AOD treatment; interdisciplinary</td>
</tr>
<tr>
<td>Client Characteristics</td>
<td>Health, across the lifespan, client affective states</td>
</tr>
<tr>
<td>Community Supports</td>
<td>Support/12-step groups; community care systems</td>
</tr>
<tr>
<td><strong>Clinical Skills</strong></td>
<td></td>
</tr>
<tr>
<td>Assessment</td>
<td>Assessment; placement-ASAM level, DSM-5, diagnosis</td>
</tr>
<tr>
<td>Interventions/EBP</td>
<td>Interventions, HR, EBT, group, brief interventions, CBT, MI, transtheoretical model/stages of change</td>
</tr>
<tr>
<td>Screening</td>
<td>SBIRT, AUDIT, DAST</td>
</tr>
<tr>
<td>Treatment</td>
<td>Planning, settings, paradigms, models- public health, HR</td>
</tr>
<tr>
<td>Relapse Prevention/Recovery</td>
<td>Relapse prevention, stages of recovery, early recovery, interventions</td>
</tr>
<tr>
<td>Other Treatment Factors</td>
<td>Behavioral addictions; trauma</td>
</tr>
<tr>
<td><strong>Addiction Science</strong></td>
<td></td>
</tr>
<tr>
<td>AOD specific</td>
<td>Drug classifications, physiological effects</td>
</tr>
<tr>
<td>Pharmacotherapy</td>
<td>Medication assisted treatment (MAT)</td>
</tr>
<tr>
<td>Understanding Addiction</td>
<td>Addiction perspectives- introduction, concepts, trends, definitions; etiological factors- theories and models; SUD/misuse; epidemiology- rates, patterns</td>
</tr>
<tr>
<td>Brain/neurobiology/psych components</td>
<td>Brain/neurobiology, psychopharmacological/neuropsychological, biology/science of addiction</td>
</tr>
<tr>
<td><strong>Policy</strong></td>
<td>Historical perspectives; legal; policy- public, social</td>
</tr>
<tr>
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Discussion

The findings contribute to the existing literature by providing insight into how MSW students are prepared to address substance use through a systematic analysis of a sample of substance use course syllabi. Objectives, topics, and assignments should be viewed together for a better picture of the overall intertwining content included for student learning.

In alignment with current literature, this study showed that substance use courses are not offered in all MSW programs, and when they are, it is typically an elective (Minnick, 2019a; Wilkey et al., 2013). The findings of this study demonstrate that, though course titles may be generalized, the content of many courses are specific and in-depth. While a strong consensus was not shown in preferred textbooks, those most cited appear to be treatment oriented as opposed to books on policy or physical and mental effects of substance use, which were cited less often.

Current research indicates most substance use courses have treatment as a primary focus (Minnick, 2019a). The Substance Use Care Continuum includes enhancing health, primary prevention, early intervention, treatment, and recovery support (HHS, 2016). In this study, more emphasis is observed in the areas of early intervention and treatment. Students are focusing on developing skills in screening, assessment, diagnosis, treatment planning, and evidence-based interventions. Leaving these topics out of the MSW curriculum would create a gap in providing education on clinical skills for social work practice with clients with a SUD.

Faculty incorporated a range of topics into their courses, emphasizing knowledge development in course objectives. Many used innovative experiential learning activities and self-reflection in their course assignments. Teaching courses on SUD with experiential methods such as those used in these courses, can help students to better understand the subjective experience of individuals with a SUD. Understanding these contextual factors is a way for students to build
empathy and reduce potentially stigmatizing beliefs and attitudes which corresponds with the AMERSA recommendations for the development and role modeling of professional attitudes that reduce stigma (Osborne-Leute et al., 2019).

**Incorporation of Evidence Based Practices**

*Screening, Brief Intervention, Referral to Treatment*

SBIRT was listed as a topic in 29% of syllabi and SBIRT training was identified in a small number of assignments (n=3). As the topic of screening was listed in over half of the courses, there is reason to consider SBIRT may be included to a greater degree than specifically cited, considering resources available to expand implementation of SBIRT into the curriculum. This workforce development initiative has shown positive results in its implementation into social work programs with increases in student substance use knowledge, confidence in SBIRT skills, and attitudes towards using SBIRT in practice (Carlson et al., 2017; Putney et al., 2017).

**Harm Reduction**

Notably, multiple course frameworks were identified in this study. One that may be useful to consider further, in conjunction with current social work frameworks, is HR. “Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use” (Harm Reduction Coalition, n.d.). This EBP aligns with social work values and principles (NASW, 2013). HR concepts were noted in topics addressing interventions and models as well as indirectly in topics such as MAT.

**Prevention programs**

Previous research on course descriptions found that most courses were focused primarily on treatment as opposed to prevention or policy (Minnick, 2019a). In this study, prevention was
minimally included in topics. While the emphasis on treatment and clinical skills identifies a strength, further attention is needed on the topic of evidence-based prevention strategies.

**Behavioral Therapies and Counseling Approaches**

The language of evidence-based treatments or practices was observed frequently in both course objectives and topics in relation to interventions. The most commonly identified evidence-based interventions in the clinical skills category were motivational interviewing (MI), cognitive-behavioral therapy (CBT), and the transtheoretical model/stages of change. Cognitive-behavioral therapy and stages of change were moderately included in syllabi topics. Motivational interviewing (MI) was identified in over half of the syllabi (n=16). Additionally, some courses included MI for multiple weeks showing emphasis in this clinical approach.

Trauma and treatment of trauma was a topic occurring in 21% of syllabi. Trauma-informed concepts may be an emerging approach that could be argued for further inclusion in substance use courses. Straussner indicates “the linkage of trauma and addictions is the new frontier in this field” (p. 132). “The relationship between PTSD and substance use disorders is thought to be bidirectional and cyclical: substance use increases trauma risk, and exposure to trauma escalates substance use to manage trauma-related symptoms.” (SAMHSA, 2014, p. 87).

**Incorporation of NASW Standards**

The results of this study indicate many of these courses provide students with an introduction to several knowledge areas in the *NASW Standards for Social Work Practice with Clients with Substance Use Disorders* (2013). For example, physiological effects, screening, assessment, and diagnosis, and EBT are all included as course objectives in the majority of syllabi. Strong consensus was found to include families as a course topic, indicated in 85% of syllabi. Family was often listed generally, but several syllabi included specifics such as family
therapy or interventions, youth/children, and family roles. The topic of co-occurring disorders was also widely included, listed in 75% of syllabi. While one course can provide introductory knowledge on practice with clients with SUDs, it is likely not enough to meet the standard of specialized knowledge, which may come from enrolling in a substance use concentration track.

**Limitations & Future Research**

Syllabi offers only one representation of what occurs in a course and is not inclusive of everything that takes places in the learning process (Mehrotra et al., 2017; O’Neil & Renzulli, 2013). Some content was listed generally, such as “interventions” which may not distinguish specific content included. The content of required readings was not analyzed. Programs using an infusion approach and courses from programs with concentrations, certificates, and specializations were excluded. Lastly, due to sample limitations, findings are not intended to be generalizable. Not all programs sent syllabi that were requested, which could indicate some self-selection bias (Sweifach, 2014) of those with more SUD interest participating. However, this is limited as publicly available syllabi were included. Using purposive sampling, the reliability of data collection and analysis may be a limitation. While not generalizable, findings can be viewed as one piece of the picture of the current state of MSW substance use education.

Future research targeting syllabi from a SUD concentration is recommended to analyze what is commonly included in this specialty track as well as inclusion of BSW syllabi. For a deeper understanding of how to prepare social work students for practice, research could be conducted with faculty teaching these courses, social workers specializing in substance use disorder treatment, as well as include the voices of individuals in recovery.

**Implications for Social Work Education**
Findings indicate a need for consensus on language used in describing substance use and identifies a need, in some cases, to update language to DSM-5 terms. While this analysis identified a strength in addressing early intervention and treatment content, it revealed a gap in many syllabi related to inclusion of substance use prevention concepts. This area should not be overlooked. Students need knowledge of evidence-based prevention strategies to address risk factors from an upstream perspective by tackling root causes before there is ever a need for treatment. Consideration should also be made for further expansion of SBIRT training, while balancing concepts related to prevention, treatment, and recovery.

There are differing viewpoints on whether education on substance use should be taught in a substance use specific course or integrated across the curriculum. Programs that have both a required course and integrate content across the curriculum could strengthen preparedness. Education on substance use, delivered in a dedicated course, could provide depth in understanding the many facets of addiction, while integrating content across the curriculum also gives students an opportunity to explore addiction in multiple contexts, layering student learning.

Additionally, findings can be used to inform future AOD courses, particularly those not developed or taught by an instructor with an addiction practice background. If required standards on substance used education are not enacted by CSWE, there are implications for the practice arena to supplement this lack of training with agency in-services, continuing education offerings, or post-graduate education. Enhancing competency can result in better outcomes for clients and communities impacted by substance use that interact with social workers.

**Conclusion - Are students prepared?**

The results of this study lead to the belief that students who take these courses would be more prepared to address substance use in practice than those who do not have the opportunity to
take a substance use course. Even the addition of one course, if it were required as opposed to an elective, could enhance the level of preparedness. A critical issue in readiness for practice is ensuring content on substance use is incorporated into BSW and MSW curriculum. For this to be done consistently, substance use content guidelines must be incorporated into the EPAS by CSWE. With lives lost daily to the chronic effects of substance use, misuse, and fatal overdoses, social workers need preparation now more than ever to serve all individuals, families, and communities impacted.
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Poster Presentation: What Schools of Social Work are Teaching about Substance Use Disorders: A Content Analysis of MSW Substance Use Course Syllabi

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Abstract

This poster presents preliminary research findings from a qualitative content analysis of syllabi from MSW program courses focused on substance use. This research explores what MSW substance use courses are teaching to prepare students to effectively address alcohol and other drug related problems in social work practice. The poster includes an abstract, methodology, sample procedure, data analysis, sample characteristics, strengths and gaps in the syllabi, preliminary results, next steps, and recommendations for social work education.

*Keywords:* substance use disorder, syllabi, MSW, social work education
I was a presenter at the National Association of Social Workers- Minnesota Chapter 29th Annual Conference held in Brooklyn Center, MN on June 11-12, 2019. The poster I presented on June 12th is based on preliminary findings of my research from a qualitative content analysis of syllabi from MSW program courses focused on substance use. This research is exploring what MSW substance use courses are teaching to prepare students to effectively address issues surrounding alcohol and other drug use in social work practice. The title of my poster is, “What Schools of Social Work are Teaching about Substance Use Disorders: A Content Analysis of MSW Substance Use Course Syllabi.”

The conference theme was “I Am Somebody: Inspiring Innovative Practice.” My poster presentation was relevant to this year’s theme as the findings of this study could inspire and encourage innovative practice in teaching substance use and recovery focused courses for social work students. While social work practice intersects with substance use directly in treatment settings, social workers also encounter addiction in a multitude of other practice settings. Because social workers are on the front lines working with individuals with substance use disorders, they need education and training to respond competently, to serve compassionately, and to engage in advocacy for this highly stigmatized population. When social work students have training in substance use from a person-in-environment framework they can better understand the subjective experience of individuals with a substance use disorder and can practice the social work values of honoring the dignity and worth of each person.
**Abstract**
Social workers are on the front lines working with individuals, families, and groups impacted by substance use. There is no CSWE competency emphasizing curriculum content for substance use, contributing to insufficient implementation of education in this area. MSW courses vary at institutions ranging from nothing, an elective, a required course, or a concentration, specialization, or alcohol and other drug (AOD) certificate program. Addressing the gap in knowledge regarding what education is being provided within social work programs is critical. This study will expand our understanding, influence current pedagogy, and inform curriculum development related to substance use.

This research asks, what are MSW alcohol and other drug courses teaching to prepare students to effectively address AOD problems in practice?

A glimpse into substance use education for MSW students is provided through this exploration of 29 MSW substance use specific course syllabi.

The findings of this study are intended to inspire and encourage innovative and competent tracking of substance use specific courses for social work students.

### Methodology
- MSW syllabi included are specific to substance use B or an elective and “substance abuse” topic.
- Syllabi are excluded if the program offers a specialization, certificate, or certificate program in addiction.
- Notes are taken on a qualitative content analysis.

**Data Analysis**
An inductive thematic content analysis was conducted to code the thematic content of the MSW syllabi.

**Findings**
- Many programs with concentrations, certifications, and specializations beyond the directory and specifications of “Therapeutic & Substance Abuse” and “Behavioral Health” were found.
- Large breadth of topics attempting to be covered in just one course. Wide variety of available books related to substance use.
- Creative, experiential, and self-reflexive substance use specific assignments.

**Recommendations for SW Education**
Developing academic standards for substance use content in social work education is needed to guide course development, implementation, and evaluation with the goal of better preparing students to work competently and as social workers in a position to lead our field. With lives lost daily in the battle of addiction, the futures of our family members, community members, and clients are on the line.

**Next Steps**
Continued with analysis of course descriptions and overall analysis.
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Though the poster did not include references, this list is meant to highlight main sources related to the presentation.


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