

A: Division:

Course Information

Applied Programs

B:	Department: Child, Family and Community Studies		New Course:			· >
	Service Wor	outh Care Counsellor, Communi ker, Community Support Worke terpreter Training	ity Social I er, Visual I		of Course ion Form:	
C:	CFCS 260	D: Community Practice: Ad	dictions	E:	3	
	Subject & Course No.	Descriptive Title			Semester Credit	
F:	Calendar Description: The development of skills and and working with people Students will explore and intervention strategies. To social impact of addiction for understanding addictive will be presented for example of the strategies.	Summary of Revisions: (Enter date & section) Eg. Section C,E,F				
G:	Type of Instruction: Hours	H: Course Prere	quisites:			
	Lecture / Practice Laboratory Seminar Clinical Experience	60 Hrs. Hrs. Hrs. Hrs.	Nil			
			I: Course Cored	uisites:	· · · · · · · · · · · · · · · · · · ·	
	Field Experience Practicum	Hrs.	Nil			
	Shop Studio	Hrs. Hrs. Hrs.	J: Course for w	hich this	s Course is a Prereq	 uisite:
	Student Directed Learning Other		Nil			
	TOTAL 60	60 HOURS	K: Maximum Cla	ass Size:		
	,		30			
L:	College Credit Transfer College Credit Non-transfer		M: Transfer Cred Request Granted Specify Court Credit as App	ted: : se Equiv	valents or Unassigne	ed
			U.B.C. S.F.U. U. Vic. Other:	opnate	•	
	Stave	Nonis	Am	Le	Lug	
(ST	EVE NORRIS)	COURSE DESIGNER(S)		11	DIVISIONA	L DEAN

12 November 1993

REGISTRAR

Date:

DIRECTOR/CHAIRPERSON

N: Textbooks and Materials to be Purchased by Students (Use Bibliographic Form):

T.B.A.

MAJOR CONCEPTS: - global ideas that guide the design and delivery of the course

The following global ideas guide the design of this course.

- 1. Studies of addiction abound with opinion and diverse theory. Making sense of the complex and often confusing and controversial addictions field requires integrating knowledge of theoretical foundations with one's own experiences, values, and beliefs.
- 2. Although addiction is typically seen as problematic, it can also be viewed from a functional (albeit maladaptive) perspective, as self-medicative and/or symptomatic of unmet needs. Competent helping requires understanding the whole human being as opposed to treating the addiction, focussing on what the addictive behaviour is saying about the person as well as what it is doing to him/her.
- 3. Addiction affects not only the mind, body, and spirit of the individual, but also the health of families, the workplace, other related social systems, and society as a whole the ecological or systems perspective.
- 4. Addiction recovery is a choice, involving education (knowing) and self-responsibility (doing), and includes psychological well-being (beliefs, attitudes), physical health (adoption of a healthy lifestyle), family/systems dynamics, and spirituality.
- 5. Increasingly, people seeking social and health service do not fit into discrete diagnostic categories/systems of treatment, support, and care. An awareness of the interconnectedness of addiction with other personal/societal ills demands a creative, collaborative, human response by professional care-givers.
 - alcohol/drug abuse is associated with a wide range of health-related concerns/risks (e.g., sexually-transmitted diseases, HIV/AIDS, fetal alcohol syndrome, organic dysfunction, mental health, impaired driving).
 - chemical dependency and other addictions are both the cause and the result of certain statuses (e.g., homelessness, poverty, unemployment, powerlessness, family breakdown, mental health).

- 6. Societal sub-groups (e.g., women, youth, the elderly, natives, athletes, ethnic groups) differ in both addiction causality and recovery processes.
- 7. Self-awareness regarding one's personal values and needs, the influence of one's past experiences, and respect for the limits of one's knowledge/ability and professional role, are essential prerequisites for skilled helping in the addictions field.
- 8. Problems of addiction are pervasive in our society, and are often the underlying cause of many other reasons people are in contact with a wide range of social services. Awareness of signs and symptoms, screening/assessment strategies, and a practical working knowledge of the local Alcohol and Drug Programs system of care, is necessary for identifying concerns and making effective referrals.
- 9. Content knowledge of basic drug concepts, terminology, myths, prevention, 12-step/self-help programs, and addiction/recovery processes is a necessary foundation for working in the social services.
- 10. Conceptual knowledge of addiction is necessary but insufficient for competent practice. Technical proficiency must be balanced with a caring attitude, empathy, sensitivity, acceptance of a wide range of behaviours and lifestyles, and respect for the rights of others, including their right to self-determination.
- 11. The term "addiction" relates not only to the field of chemical dependency, but also to a wide range of behaviours and processes (e.g., gambling, eating, working, relationships).
- 12. Addiction is a powerfully destructive but very treatable condition. The helping role is intense and personal, frustrating and rewarding.

EVALUATIONS:

Selection of evaluation and assessment tools for this course will be based on:

- 1. Adherence to college evaluation policy regarding number and weighting of evaluations, i.e. a course of three credits or more should include at least five separate evaluations.
- 2. A combination of evaluation instruments that includes opportunities for students to demonstrate different ways of knowing, i.e. oral, individual, group, narrative, research.
- 3. A developmental approach to evaluation that is sequenced and progressive.
- 4. Evaluation being used as a teaching and learning tool for both students and instructors.
- 5. Commitment to student participation in evaluation through such processes as self and peer evaluation, participation in instrument design and program/instructor evaluation.

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