This guide is designed to help develop social work education on the subject of substance use at qualifying levels.

**Terminology**
There are many terms used to describe alcohol and other drug use, their effects and the people who use them. Some are drawn from medical models of substance use, e.g. alcoholism, others are pejorative and judgmental, e.g. junkie. Care needs to be taken over the language used as this can convey values, attitudes and specific perspectives. The following terms are recommended:

- **Substance use**: the use of alcohol and other drugs – licit and illicit.
- **Problematic substance use**: substance use that has become problematic in some way, for example, contributing to, or exacerbating, mental distress or physical ill health, preventing individuals from fulfilling their roles and responsibilities to others in their care, legal or financial problems.

**Key curriculum issues**

- **Substance use** cuts across all service user and carer groups and overlaps with a full range of social problems for which people seek support.

- Problematic substance use is particularly prevalent among the service user groups of social workers working with children and families, young people, people in the criminal justice system as well as among those experiencing domestic violence, mental distress, and homelessness. Social workers working with older people/those with disabilities report increased use of substances (Galvani et al. (2011)¹).

- People experiencing loss, change, stress or trauma in their lives may be particularly vulnerable to substance use; nonetheless some will also be able to draw on strengths and resilience to recover.

- People experiencing problems with substances often also encounter adverse attitudes in society that can in their own right be problematic.

- Social workers consistently encounter substance use in their practice and feel ill equipped to deal with it by their social work training (Galvani et al. (2011)¹). They identify the need to learn how to ‘assess’ and ‘respond’ to substance problems. Many are also unclear of the range of specialist services available and how to make referrals (Galvani and Forrester (2011)²).

- Importantly, social work education needs to convey that engaging with substance use is a legitimate part of the social workers’ role and responsibility towards service users whatever their specialist area of practice.

- Given social work’s principles, values and generic skills base, social workers are well placed to engage with problematic substance use and the social problems that stem from, or lead to, substance use.

- There are different perspectives about the roots of problematic substance use (e.g. illness/addiction versus behavioural response) and different models of intervention based on these (e.g. abstinence versus control).

- Families/carers of those with problematic substance use may themselves need support and help.

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Curriculum fit

Core education on substance use is needed for all social workers at qualifying levels to ensure they are prepared for practice realities and understand how it relates to their specialist area of practice.

Pathway teaching at qualifying level should develop knowledge specific to that specialist area of practice.

1. Specialist modules/half modules
As a subject that is relatively new to the qualifying social work curriculum, it might be easier to allocate specific teaching time to focus on alcohol and drugs. This allows for the full involvement of practitioners and service user groups in teaching and learning as well as leaving time for reflection, discussion and role plays focusing on communication, assessment and intervention.

2. Core teaching
Substance use education can be integrated into core teaching on values, communication and assessment skills, areas social workers highlight as presenting particular difficulties in practice with people with substance problems (especially risk assessment and the types of intervention available – Galvani and Forrester (2011), Galvani et al. (2011)). Alternatively substance use can also be part of modules on social exclusion/inclusion, youth justice, theories and methods, diversity, human development, or research skills to name a few.

3. Adults and children’s pathway teaching
Modules focusing on practice with adults or children offer ideal opportunities to develop a better understanding of substance use in relation to particular service user groups. For example, children’s pathways could include teaching on the impact of parental substance use on children and how to intervene where it raises concerns about child welfare. Teaching on young people could explore their (often experimental) substance use as part of maturation and risk taking versus using to forget experiences of abuse. Teaching on older people could include what is different about older people’s alcohol use and particular considerations when working with older adults. In final year studies, it may be possible to use students’ own practice examples as a focus for learning and reflection.

4. Other
Maximise practice placements in alcohol/drug agencies, homelessness and/or youth offending.
Include case studies or exercises in practice learning documentation or portfolios.
Consider including substance use as a focus in assessed work, for example with elective essay titles, dissertations, case study based assignments or as a topic focus for research skills training.
People’s own use of, and attitudes to, substances should be explored in teaching on critical reflection.

Interdependencies with other curriculum areas (see other curriculum guides ☞)
Evidence from social work practice shows substance use overlaps with many other behaviours or areas of people’s lives in which they need care and support. These interdependencies may be addressed in other areas of the curriculum, highlighting the need for holistic assessment and joint working in practice. These include:

Child abuse and neglect (including harm to unborn children): Neglect, violence and abuse. ☞
Adult domestic and sexual violence (including abuse of older adults, adult dependents or abuse of carers).
Young people who are looked after, who are experiencing problems at home, or who have offended. ☞
Mental ill health (including fear, loss, trauma as well as depression and schizophrenia). ☞
Physical health problems (including heart conditions and some cancers but also blood borne viruses).
Working with older adults.
Anti-social behaviour and crime.
Supporting carers (young carers or adult carers).
Inter-professional working, multi-agency or partnership practice.

Produced in partnership to support curriculum development in initial social work education(2012)
Key resources

1. SWAP Box. Search ‘substance use’ as keywords for materials on substance use teaching and learning. http://www.swapbox.ac.uk including:


Teens are affected by substance use when they use substances themselves and when they experience the consequences of substance use by family members and other adults. Parental alcoholism increases the risk of teen alcoholism as a result of genetic and environmental factors. Peers can be a major influence on the use of alcohol and other drugs in adolescents. The risk of harm the teen associates with substance use, and the extent to which her friends disapprove of it, influence the teen’s decisions regarding substance use. Any teen experimenting with substances requires education and guidance about the risks of substance use and clinical follow-up. Substance use in young teens is of special concern. Assess the teen for risk factors. Treating substance use disorders. A Quick Reference Guide. Based on Practice Guideline for the Treatment of Patients With Substance Use Disorders, Second Edition, originally published in August 2006. A guideline watch, summarizing significant. The development of the APA Practice Guidelines and Quick Reference Guides has not been financially supported by any commercial organization. For more detail, see APA’s Practice Guideline Development Process, available as an appendix to the compendium of APA practice guidelines, published by APPI, and online at http://www.psych.org/psych_pract/treatg/pg/prac_guide.cfm. 76 â€“ treating substance use disorders. Outline. A. General Treatment Principles. Addressing substance use issues through specifically designed curriculum that aids in interventions with a person under supervision who has a substance use disorder. 7. Examples include: Moral Reconation Therapy®, Thinking for a Change®, Choices & Changes®, and The Change Companies®. Clinical interactions between the person under supervision and a trained and certified counselor. The following language may provide guidance when imposing a substance use testing or substance use disorder treatment condition. Galvani, S. (2012). Curriculum guidance: Substance use. London: The College of Social Work. From the front line: Alcohol, drugs and social care practice. Substance use is being identified and assessed in social care but often at a late stage with little to no guidance on how to do so effectively. View. Show abstract. Guidance for substance misuse education Guidance document no: 107/2013 July 2013. provide advice on tailoring substance misuse programmes to the needs of particular audiences (e.g. those already misusing, those at risk, those in primary education) and target groups (e.g. Looked After Children, those involved in the Youth Justice system, those in danger of exclusion/not in mainstream formal education and those with additional learning needs). The school curriculum in Wales provides clear opportunities for learners to acquire the skills, knowledge and understanding they need to make informed choices when they encounter illegal drugs and legal substances such as alcohol, tobacco, medicines and volatile substances. For details see Annex E (page 50).