TEST ITEMS

True and False:

- 1. In 1926, the United States Congress passed the Purity in Food and Drug Act designed to control addiction by requiring labels on drugs contained in products including opium, morphine, and heroin.
 - a. True
 - b. False
- 2 A small minority of juvenile offenders (2 out of every 1000) will be offered Juvenile Drug Court (JDC) diversionary programs as an option to prison sentences.
 - a. True
 - b. False
- 3. Cognitive-behavioral models suggest a variety of motivations and reinforcers for taking drugs. One explanation suggests that people take drugs to experience variety.
 - a. True
 - b. False
- 4. The disease model of etiology, addiction is viewed as a primary disease rather than being secondary to another condition.
 - a. True
 - b. False
- 5. According to the moral model, addiction is incurable.
 - a. True
 - b. False

Multiple Choice:

- 1. Which U.S. Act required drugs to be classified according to their medical use, potential for abuse, and possibility of creating dependence:
 - a. Anti-Drug Abuse Prevention Act.
 - b. Harrison Act.
 - c. Controlled Substance Act.
 - d. None of the above.
- 2. Which etiological theory of addictions assumes that addicts are constitutionally predisposed to develop dependence on drugs:
 - a. Disease model.
 - b. Family systems model.
 - c. Biophysiological model.
 - d. Supracultural model.

- 3. Which etiology model explains addiction as a consequence of personal choice and, individuals, who are engaging in addictive behaviors, are viewed as being capable of making alternative choices:
 - a. Learning theory model.
 - b. Disease model.
 - c. Cognitive behavioral model.
 - d. None of the above.
- 4. According to this chapter, which of the following is NOT a psychological model of addiction etiology:
 - a. Psychodynamic.
 - b. Learning theory.
 - c. Personality theory.
 - d. Family Disease.
- 5. According to the syndrome model of Addictions, there are multiple and interacting antecedents of addiction that can be organized in at least three primary areas. Which of the following is NOT a primary area:
 - a. Shared neuro-biological antecedents.
 - b. Shared psychosocial antecedents.
 - c. Shared spiritual antecedents.
 - d. Shared experiences and consequences.

Matching:

- 1. _____ Integral model
- 2. Learning model
- 3. _____ Supracultural model
- 4. _____ Disease model
- 5. _____ Biological model
 - a. Influenced by B.F. Bales
 - b. Addiction is caused by genetics.
 - c. Influenced by E. M. Jellinek's work.
 - d. Influenced by A. Bandura's work.
 - e. A multi-causal model of addiction.

CHAPTER 2

SUBSTANCE ADDICTIONS

Journaling Exercises:

- (1) Spend some time reflecting on the information provided in this chapter. How did you respond to the descriptions of the effects of addictive substances? Were you surprised by anything you learned? Have your views of any of the substances changed?
- (2) Have you ever tried to stop consuming a substance (alcohol, other drugs, caffeine, sweets, etc)? What was your experience? Have you watched others try to stop? What sorts of thoughts and feelings did you notice in each case? What thoughts or feelings got in the way of your success reducing or abstaining from use, or made it difficult to support others in their efforts? What helped?
- (3) What role have drugs and alcohol played in your life? What is your experience with their effects on individuals, families, and society? What impact do you think your background will have on your ability to be an effective counselor to people with addictions?

Discussion Exercises:

- (1) Pay attention to portrayals of addiction and recovery in the media. What themes do you notice? How are different substances and types of users portrayed? How might these images and messages impact clients in recovery?
- (2) Do you think that psychological or physical dependence has more influence over addictive processes? Is one more or less important at various stages of the addictive or recovery process?
- (3) There are some very serious and disturbing long-term consequences of addictive behavior, for example the changes in the brain of many alcoholics. How would you address these consequences with your clients? What is your job to educate?

Group Exercises:

- (1) Ask groups of students to find personal stories about addiction and recovery and present short case studies to the class based on what they found. What factors shape the experiences? What issues are relevant to different people's use and recovery?
- (2) Play a game with the class in which the students identify which drugs are associated with a range of effects and outcomes.
- (3) Invite a panel of people who are recovering from different forms of substance abuse to speak to the class. How do their experiences compare? What is similar and what is different?

TEST ITEMS

True and False:

- 1. BAC is an abbreviation for Blood Alcohol Content.
 - a. True
 - b. False
- 2. The reward and disregulatory pathways are key to understanding addiction.
 - a. True
 - b. False
- 3. Current estimates indicate the extent of addiction disorders, with the exclusion of tobacco addiction, involve approximately 32 million Americans.
 - a. True
 - b. False
- 4. Most withdrawal symptoms can begin within 24 hours of last use and may continue for varying lengths of time, usually 4–10 days, depending on the substance, degree of physical dependence, genetic factors, and overall health of the person.
 - a. True
 - b. False
- 5. Alcohol is classified as a depressant to the central nervous system.
 - a. True
 - b. False

Multiple Choice:

- 1. The effect of ethanol can be moderated by a variety of factors such as:
 - a. food in the stomach
 - b. total body weight
 - c. gender and the response to alcohol (tolerance)
 - d. all of the above
- 2. The term used when describing women's' response to alcohol is
 - a. tolerance
 - b. dilution rate
 - c. telescoping
 - d. toxification

- 3. Binge drinking is defined as _____ or more drinks for males and _____ or more drinks for females in any one drinking episode.
 - a. 6, 5
 - b. 4,5
 - c. 7,6
 - d. 5,4
- 4. Barbiturates are classified as:
 - a. an opiod
 - b. a depressant
 - c. neither a. nor b.
 - d. both a. and b.
- 5. One example of an illicitly-manufactured amphetamine is:
 - a. Methcathinone
 - b. Ritalin
 - c. Tuinal
 - d. OxyContin

Matching:

- 1. _____ Benzodiazepine
- 2. _____ Withdrawal symptom
- 3. _____ Body efficiently processing and eliminating mood-altering substance
- 4. _____ Part of reward pathway
- 5. _____ Study of brain
 - a. Neurobiology
 - b. Valium
 - c. Metabolic tolerance
 - d. Delirium tremens
 - e. Nucleus accumbens