

## Alcohol Counselling A New Course for Professional Psychologists<sup>1</sup>

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In 1979 a masters level course in psychology for alcohol counsellors was begun at the University of Canterbury in conjunction with a community based counselling centre, both being supported for a three year period with funds from the Alcoholic Liquor Advisory Council. The course is based on a programme at Washington State University and an outline of the academic work required and the practicum is given. The centre which is staffed entirely by psychologists has policies of training young excessive drinkers to moderate their alcohol intake and of promoting abstinence for chronic alcoholics. Evaluation of both the course and the work of the centre is ongoing.

Alcohol counselling is a new and growing profession, especially in America, but there is no consensus as to how it should develop (Argeriou & Manohar, 1978; Carroll, 1978; Chalfant, Martinson & Crowe, 1978; Cooke, Wehmer & Gruber, 1975; Gideon, Littell & Martin, 1980; Hoffman & Wehler, 1978; Rosenberg, Gerrein, Manohar & Liftik, 1976; Rosenberg, Liftik & Manohar, 1978; Skuja, Schneidmuhl & Mandell, 1975; U.S. National Center for Alcohol Education, 1978; Wehmer, Cooke & Gruber, 1974; Valle, 1979; Willoughby, 1979). The impetus for development in America came from the creation of the National Institute on Alcohol Abuse and Alcoholism (NIAAA), established as a result of the *Comprehensive Alcohol Abuse and Alcoholism Prevention Treatment and Rehabilitation Act of 1970*.

In 1973 a masters programme in alcohol studies was developed at Washington State University to meet the need for new professional workers in the alcohol field and the result was a 12 month programme leading to a masters degree with associated practical field work. This provided a model for the masters degree in psychology for

alcohol counsellors which began in 1979 at the University of Canterbury, with financial support for a period of three years from the Alcoholic Liquor Advisory Council (ALAC). ALAC, which serves a function similar to NIAAA, was founded in 1977 as a result of an Act of Parliament passed in 1976 following the publication in 1974 of a report by a Royal Commission of Inquiry into the sale of liquor in New Zealand. Its major function is to encourage moderation in the use of alcohol and to reduce the ill-effects of alcohol abuse.

In the past the impetus for assistance to the alcohol impaired has come from non-professionals, notably members of Alcoholics Anonymous (AA), who have pioneered and promoted treatment facilities. The impact of AA is impressive and its approach has been adopted by every major treatment agency for alcohol abuse in the country. It gained the support of the medical profession and, as a consequence, alcoholism has been designated a disease (Jellinek, 1960). An alternative model has more recently been promoted by psychologists who have demonstrated the contribution which a social learning theory approach can make to the understanding of the acquisition and maintenance of alcohol problems (Marlatt & Nathan, 1978; Miller, 1976; Miller & Maistra, 1977; Miller & Munoz, 1976; Sobell & Sobell, 1978). Furthermore, psychologists have pointed out that the major group of problem drinkers do not in fact present

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themselves to traditional treatment agencies but remain largely undetected and unassisted in the community (Cahalan, 1970). Also as Armor, Polich and Stambul (1976) have shown in the first Rand report some "alcoholics" return to non-problem drinking having been through an abstinence programme. However most problem drinkers are in the under 30 age group, which contains the majority of drunken drivers and those in prison for offences many of which are regarded as being alcohol related. Based on this evidence and in conjunction with the masters course in alcohol counselling at Canterbury the Alcohol Counselling Centre was set up in Christchurch in December 1979 to promote moderation in the use of alcohol with young excessive drinkers as well as abstinence for those with chronic alcohol problems.

The Alcohol Counselling Centre is the only treatment facility in the country of the 51 centres listed in the *Directory of Treatment Facilities for Alcoholism in New Zealand* (1980) offering an alternative to the traditional abstinence oriented programme. Support for the approach taken at the Alcohol Counselling Centre has come from the recently published second Rand Report (Polich, Armor & Braiker, 1980) providing four-year follow-up data on admissions to alcoholism treatment centres in the United States. The results suggest that "for some alcoholics, particularly those in the younger and less dependent groups, both abstention and non-problem drinking should be regarded as forms of remission". (p. viii). Regrettably those agencies which adopt an abstinence only programme for all alcohol abusers view with misunderstanding and misgiving the suggestion that alternative programmes should be made available to those who are not chronically dependent on alcohol.

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The academic portion of the curriculum for the masters degree covers one full academic year and the students are required to take five courses (papers) and a research project on an alcohol related topic. The two basic courses are one on addictive

behaviour and one on behaviour modification and counselling. In addition to these two courses students select three of the following: personality; psychological statistics and measurement; organisational psychology; social psychology; developmental psychology; cognitive psychology; emotion; biological psychology. The project which is required in addition gives the student a chance to conduct research in the field of alcohol abuse and examples of completed projects are: personality characteristics of drunken drivers; the treatment needs of alcoholic women; the information processing ability of alcoholics working on memory tasks; an evaluation of a treatment programme for alcohol impaired drivers; self esteem in chronic alcoholics; evaluation of a treatment programme for chronic alcoholics; knowledge of alcohol, nicotine and other drug effects on pregnancy; interaction effects of alcohol and caffeine on orientation and movement.

To complement the academic activities an alcohol counselling practicum is designed to enable the students to put into effect what they have learnt. Throughout the year approximately 750 hours are spent in supervised practical work. A wide range of activities is involved including: behavioural analysis of clients' drinking patterns; administration of psychological tests which are used in settings where the counsellors will find work; attending staff meetings at the Alcohol Counselling Centre; viewing video tapes and films pertaining to counselling; accompanying traffic officers during a drinking driving blitz; receiving specialised instructions from professionals employed by other agencies in such topics as relaxation training, assertiveness, and marital and sex counselling. The aim of these endeavours is to prepare the students for seeing clients themselves at the Centre. Initially the students role play intake interview and counselling sessions with the aid of video tape with each person acting as therapists and "client". The students are gradually worked into real-life client contact, acting as a co-therapist with one of the authors (M. T. S.) from the initial interview. As experience is achieved the student assumes the primary therapist role while the other co-therapist serves in a

supervisory capacity. Subsequently students see clients on their own and build up a small caseload.

The 750 hours practicum includes 8-10 hours a week during the academic year in practical work and then a full time three month placement during the summer. One month of the summer placement is at Queen Mary Hospital, Hanmer Springs, which is the national hospital for the treatment of alcoholism. There students participate in an AA based programme for the recovery of chronic alcoholics (although recently alcohol abusers in the younger age groups have been accepted by the hospital for treatment as well). Following the one month at Queen Mary Hospital the students return to Christchurch and work full time in the Alcohol Counselling Centre in the city; the Centre accepts referrals from medical practitioners, lawyers, probation officers, other psychologists, other alcohol treatment agencies and self referrals as well.

#### Evaluation

Evaluation of the alcohol counsellors course has been planned from its inception at three levels. First, the Education Research and Advisory Unit of the University of Canterbury has been involved from the beginning of the programme to assess its effectiveness and to provide feedback to the course instructors in general terms from information gained from the students. Second, the Alcoholic Liquor Advisory Council carries out its own evaluation of the course and third, the authors plan to contact the graduates of the course after a year has elapsed to determine what they perceive to have been the adequacies and inadequacies in their training. Evaluation of the work of the Alcohol Counselling Centre itself is also being undertaken and it is planned to report this work separately.

To conclude: Alcohol counselling is a new course for professional psychologists. It is hoped that results of the new programme based at the University of Canterbury will be sufficiently encouraging for it to be established on a permanent basis. Psychologists have a distinctive

contribution to make to the treatment of alcohol abuse.

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