

**Core Competencies for  
Social Workers in Addressing the  
Needs of Children of Alcohol and Drug  
Dependent Parents**

**A Project of NACoA's Social Work Initiative**



National Association for Children of Alcoholics  
11426 Rockville Pike, Suite 301  
Rockville, MD 20852

**Acknowledgments**

This report was prepared by the National Association for Children of Alcoholics under a contract for the Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP), part of the U.S. Department of Health and Human Services (DHHS). Patricia Getty, Ph.D., served as the CSAP Government Project Officer.

**Disclaimer**

The views, opinions, and content of this publication are those of the expert panel participants and authors and do not necessarily reflect the views, opinions or policies of SAMHSA or DHHS.

**Public Domain Notice**

All material appearing in this report is in the public domain and may be reproduced or copied without permission from SAMHSA. Citation of the source is appreciated. However, this publication may not be reproduced or distributed for a fee without the specific, written authorization of the Office of Communications, SAMHSA, DHHS.

**Originating Office**

Center for Substance Abuse Prevention  
Substance Abuse and Mental Health Services Administration  
1 Choke Cherry Road  
Rockville, MD 20857

---

## Table of Contents

Introduction .....	1
Core Competencies for Social Workers in Working with Children and Families Affected by Parental Substance Use Disorders.....	3
Scope of the Problem: Impact of Alcohol and Drug Disorders .....	5
Substance Use Disorders Initiatives for Social Workers .....	6
COA Education Needed by Social Workers .....	6
Council on Social Work Education: Status of Education Policy Statement .....	7
Dissemination and Infusion of the Core Competencies into Social Work Schools and Continuing Education .....	7
Next Steps .....	9
References.....	11
Appendix .....	13

# Core Competencies for Social Workers in Addressing the Needs of Children of Alcohol and Drug Dependent Parents

A Project of NACoA's Social Work Initiative

## Introduction

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP) is committed to reducing the likelihood that children initiate alcohol and illicit drug use and to increasing the resiliency of children at-risk for using alcohol or illicit drugs. SAMHSA/CSAP seeks to build the community's capacity to identify and provide brief interventions to at-risk children by working with key segments of the community.

SAMHSA/CSAP identified social workers as one of the key groups crucial to the task of preventing substance abuse and building resilience in children. Social workers are found in many different settings and systems of care including primary health, family agencies, child welfare, welfare-to-work agencies, schools, mental health, employee assistance programs, and substance abuse treatment agencies. In these capacities, they have multiple opportunities to intervene with families and children. The approximately 400,000 social workers in the United States are in a unique position to support families and children impacted by substance use disorders.

In 2005, SAMHSA/CSAP contracted with the National Association for Children of Alcoholics (NACoA) to develop core competencies<sup>1</sup> for social workers on children of substance using parents. NACoA was asked to undertake this assignment based on the organization's experience working with multi-disciplinary professionals on similar projects and its extensive experience working with families and children impacted by substance use disorders (SUDs)<sup>2</sup>. It has overseen the development of competencies for primary care medical staff, early childhood professionals, and clergy and other pastoral ministers. These core competencies are being infused into the educational and training systems of these respective professions through the development of curricula for pre-service and in-service education, distance education courses and community training programs.

The approximately 400,000 social workers in the United States are in a unique position to support families and children impacted by substance use disorders.

To develop the core competencies, NACoA convened two meetings of leading social work educators and clinicians, one on June 6, 2005 and the other on January 18, 2006. The purpose of these meetings was twofold: to articulate the knowledge and skills needed by social workers to address COA<sup>3</sup> issues; and to develop strategies to disseminate this information to schools of social work and continuing education programs. This report is a synthesis of the two expert panels meetings. Panelists at the meetings represented social work educators, practitioners, student assistance professionals and staff from both the National Association of Social Workers (NASW) and the Council on Social Work Education (CSWE). (A list of attendees of both meetings is in Appendix.)

*1 For this report, competencies are defined as measurable human capabilities required for effective performance. Elements of competencies are knowledge, skills and attitudes.*

*2 When used in this report, the term substance use disorders (SUDs) includes alcohol or drug abuse, and alcohol or drug dependence as defined by the Diagnostic and Statistical Manual-TR put out by the American Psychiatric Association (2000).*

*3 For the purpose of this report, the abbreviation COA will include all children impacted by parental SUDs.*

## **Core Competencies for Social Workers in Working with Children and Families Affected by Parental Substance Use Disorders**

### **Preamble**

Substance use disorders (SUDs) create widespread problems impacting one in four children in the United States. Children of parents who have SUDs (hereby referred to as COAs) often experience both short-term and long-term effects in their mental and physical health, emotional and cognitive development, social adjustment, and spiritual and economic well-being. COAs are a vulnerable, at-risk population that requires the attention of the social work profession. Working with this population upholds the profession's core values of social justice, dignity and worth of the person, importance of human relationships, integrity and competence, and the ethical principles delineated in the Code of Ethics of the National Association of Social Workers (1999).

The strengths and needs of COAs are diverse, complex, and unique. Each individual is influenced by his or her stage of human development and level of individual ability, as well as by family functioning, social supports, and social context. Operating from a social justice perspective, social workers endeavor to empower people, and to alleviate oppression and economic inequity. Social workers also address problems in people's lives in the context of the social environment. Social work practice has the potential to have a profound influence on the lives of COAs.

Social workers practice in a variety of community and treatment settings and are ideally positioned to identify and address the effects of parental SUDs on children and their families. In order for social workers to work with COAs effectively, they need to have an understanding of the nature of SUDs and how they affect children in the context of the family system. In addition, social workers need to be aware of their personal values and experiences regarding SUDs, and to recognize the impact that these personal circumstances may have on their professional attitudes and actions. To work effectively with COAs, it is essential for social workers to possess the following core competencies.

### **Social Work Competencies**

1. Understand substance use disorders (SUDs) including the causes, prevention, progression, consequences, and recovery.
2. Understand the biopsychosocial, cultural, and spiritual ramifications of SUDs as they impact on COAs and their families from neonatal development through all stages of life.
3. Understand the impact that SUDs have on parenting abilities and the consequences for children.
4. Understand the intersection of SUDs and other family, health, and social problems, including:
  - a. family violence (intimate partner violence and child maltreatment)
  - b. mental health disorders

- c. physical health
  - d. crime (vulnerability to victimization and risk for criminality)
  - e. poverty, unemployment, and homelessness
  - f. educational and vocational opportunities
  - g. social/cultural biases (including, but not limited to, race, ethnicity, class, sexual orientation, and disability)
5. Value the importance of early intervention and prevention of SUDs, and prevention of mental health and social problems for COAs and their families.
  6. Ability to engage COAs in a manner that is respectful and non-judgmental of their parents.
  7. Ability to screen and assess COAs using developmentally appropriate assessment tools and methods.
  8. Ability to identify, evaluate, and utilize existing research relevant to COAs and their families.
  9. Ability to use developmentally appropriate and empirically supported interventions with COAs and their families, and evaluate the effectiveness of the interventions being used.
  10. Understand the concept of resiliency and how risk factors can be diminished and protective factors can be facilitated in COAs.
  11. Ability to help children identify developmentally appropriate formal and informal supports in their lives, and work with them to enhance their resiliency and mitigate the impact of parental SUDs.
  12. Knowledge of how to access formal and informal community resources on behalf of COAs and their families.
  13. Ability to provide referrals for appropriate services and supports to COAs and their families.
  14. Knowledge of social policies pertinent to COAs and their families.
  15. Ability to advocate for individual clients, as well as to identify and advocate for appropriate policies to help COAs and their families.

## Scope of the Problem: Impact of Alcohol and Drug Disorders

Alcohol and drug dependence are the nation's most pervasive health problems with an estimated 22.5 million (9.4 percent) Americans over 13 years of age classified with substance use disorders in 2004. Of these, 15.2 million suffered from alcohol dependence or abuse, 3.9 million abused or were dependent on drugs, and 3.4 million had disorders related to both alcohol and drugs (SAMHSA 2006). However, only 3.8 million people received any treatment for alcohol or drug disorders. In addition, a high incidence of co-occurring mental illness and substance dependence or abuse was reported. Approximately 21 percent of people with serious mental illness also abused or were dependent on alcohol or other drugs (SAMHSA 2006).

Substance use disorders impact far more than just the alcoholic or drug dependent individual. They dramatically affect the families and children living in households with people who have SUDs. Research supported by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) found that nearly one in four children live with alcohol abuse or dependence in their family (Grant 2000). Many other children are exposed to families where there is illicit drug use.

The impact of exposure to parental alcohol and other drug dependence on children is staggering. Parents who abuse alcohol or illicit drugs are three times more likely to abuse their children and four times more likely to neglect their children than parents who do not abuse alcohol or use drugs (Reid et al. 1999). In fact, 80 percent of parents with children in the child welfare system have alcohol or drug problems that interfere with their caretaking (Reid et al. 1999). Without help, COAs are at a greater risk for a myriad of problems including physical and emotional abuse, mental health problems, health problems, poor school performance, truancy, and encounters with the law (Famularo et al. 1992; Duke et al. 2001; Anda et al. 2002; Earls et al. 1988; Sher 1997; Moss 1995). They are also more likely to experience depression, conduct disorders, or anxiety and have a higher risk of abusing alcohol or drugs to self-medicate (Anda et al. 2002; Kumpfer 1999).

Research shows that with appropriate help and support, COAs can develop resilience and lead productive lives (Werner & Johnson 2000; Werner 1986). Therefore, professionals who encounter COAs in their work must have basic knowledge about SUDs and their impact on developing children. They must possess the appropriate skills necessary to intervene early in these children's lives in order to minimize the damage associated with children's familial exposure to SUDs and promote resilience in these children.

Therefore, professionals who encounter COAs in their work must have basic knowledge about SUDs and their impact on developing children.

## Social Work and Its Relation to COAs

Dr. S. Lala Ashenberg Straussner, Professor of Social Work at New York University, served as Chair of the two NACoA panel meetings. She described the historical interest of social workers in working with individuals with alcohol problems and their children. This began in 1917 when the "mother of social work," Mary Richmond, called inebriety a disease that could be treated and not a moral failing. This set the foundation for the continued social work interest in alcoholics and their families by Margaret Bailey, as reflected in her publication "Alcoholism and Family Casework" (1968), and by Margaret Cork, who wrote the classic, "The Forgotten Children" in 1969 (Straussner, S.L.A. 2001).

As noted earlier, social workers provide services in many systems of care. Given the extensive nature of alcohol and drug problems in the population, and the many problems associated with

substance use disorders, all social workers need to have basic competencies in screening, brief interventions and referral for both the individual suffering these disorders and the impacted children to reduce the inter-generational transmission of SUDs.

## Substance Use Disorders Initiatives for Social Workers

A number of organizations and Federal agencies have focused on increasing social workers' knowledge and skills in dealing with SUDs. This growing attention to SUDs is evidenced by a number of initiatives which started in the 1990s. An important step was the formation of NASW's specialty practice section on Alcohol, Tobacco and Other Drugs (ATOD) in 1996. Shortly thereafter, NASW developed a certification for social workers specializing in the ATOD field. In 2001, a peer review publication, the *Journal of Social Work Practice in the Addictions* was introduced.

The Association for Medical Education and Research in Substance Abuse (AMERSA) developed a Strategic Plan for Interdisciplinary Faculty Development (2002) which included a set of core competencies for 14 distinct healthcare disciplines, including social work. In addition, the chapter of the AMERSA strategic plan devoted to educating social workers about SUDs included a set of core competencies for generalist social workers (Straussner & Senreich 2002).

Within the federal government, NIAAA, the National Institute on Drug Abuse, SAMHSA/CSAP, SAMHSA Center for Substance Abuse Treatment, and the Health Resources and Services Administration have supported various SUD research and educational projects in social work. SAMHSA/CSAP produced Curriculum Modules on Alcohol and Other Drug Problems for Schools of Social Work in 1995. The intent of this project was to expand the content of social work education in the area of alcohol and drug disorders prevention. NIAAA has an online curriculum, the NIAAA Social Work Education for the Prevention and Treatment of Alcohol Use Disorders, which can be found at <http://pubs.niaaa.nih.gov/publications/Social/main.html> (accessed on June 12, 2006), designed specifically for social work educators to use in their course work. The panelists recommended the NIAAA curriculum as an excellent science-based resource.

## COA Education Needed by Social Workers

The consensus of the panelists was that, although substance use problems permeate the social systems and client populations that social workers serve, social work education and practice pays minimal attention to these issues. Therefore, the panelists recommended that content on COAs be taught in the foundation social work curriculum to ensure that all social workers possess the knowledge and skills to work effectively with COAs.

When asked to define broadly the critical knowledge that social workers should receive as part of their basic education to support COAs, there was consensus on these areas:

- Understand the effects of SUDs and their impact on children, families and community
- Knowledge of SUDs prevention strategies
- Knowledge of SUDs treatment strategies
- Knowledge of the impact of substance use on child and adult development.

These general knowledge areas were the basis for the competencies.

## Council on Social Work Education: Status of Education Policy Statement

To assist the panelists in their consideration of the core competencies and infusion strategies in social work education, Dr. Julia Watkins, Executive Director of the CSWE, presented a brief update on the work of the CSWE Commission on Curriculum and Educational Innovation (COCEI). COCEI is responsible for the development of the curriculum policy statement used to formulate accreditation standards. Historically, the accreditation standards have been reviewed every eight to nine years and new requirements for content areas have been added. This approach has resulted in an overloaded curriculum that has become unwieldy for social work schools and departments to utilize.

The existing model of accreditation is input focused, and programs are evaluated on their compliance with mandated course content and curricular structure. However, the current trend in higher education is to be outcome focused. In order to be consistent with the practices of universities which house social work programs, and to streamline the educational policy, COCEI is working on an innovative plan that would revamp social work education. Under this plan, social work schools would be asked to develop their curriculum in relation to expected competencies and outcomes, and to identify measures to evaluate the education of graduates.

As part of the proposed changes, the Commission identified six knowledge and value domains that are viewed as essential to social work practice: (1) ethical reasoning, (2) science to service to science, (3) analytical reasoning, (4) professional identity, (5) diversity, and (6) use of context. Five to six competencies will be identified for each domain, and CSWE will look to expert panels in various fields of practice to provide the specific competencies for their fields. The endorsement of competencies from expert groups is likely to become the backbone of social work programs. To keep the competencies current, they would be updated, as research and practice evolves. CSWE would define the domains and core competencies, but it would be up to each school of social work to develop the specific program components that are appropriate to the mission of its school.

## Dissemination and Infusion of the Core Competencies into Social Work Schools and Continuing Education

Defining the core competencies is the first step in the process to impact the education of social workers. Developing strategies that will infuse specific knowledge, skills and attitudes into the curriculum are critical steps in creating change and developing competent professionals. Recommendations about methods of infusion were explored and suggestions about dissemination approaches were integral to the expert panels' discussions.

### ***Infusion of Content on COA into the Social Work Curriculum***

#### ***Foundation Curriculum***

SUDs and associated problems are pervasive in American society, and negative consequences for children growing up with SUDs in their families often last throughout their lives. Social workers in all fields of practice need to recognize and respond appropriately to substance use problems and to the children impacted by them. Therefore, the core knowledge and skills for working with COAs should be taught in the foundation social work curriculum as part of its generalist education.

Two major elements for infusion of COA material into the social work curriculum were recommended by the panelists: 1) add content to the foundation social work courses and 2) develop a module/toolkit that would be easily accessible to faculty.

### Module/Toolkit

In order to infuse COA content into the social work curriculum, panelists recommended that faculty be supplied with a course module and associated resources (toolkit) that they can use. To make these resources readily available and easily updated they should be web-based. The course modules should show the connection between COA issues and other social problems, as well as the effects of SUDs on children and families across human services systems. The course modules should be easily integrated into a syllabus. The toolkit should contain case studies, study questions, power point slides that can be used by faculty as lectures and handouts, fact sheets and a list of resources (DVDs/websites/references).

### **Recommendations for Dissemination**

Critical aspects of dissemination include: engaging faculty and increasing their understanding of the impact that alcohol and drug addiction has on children, families and society; gaining the support of NASW and CSWE; and, collaborating with key groups, such as those cited below. NASW is the professional association for social workers and the most effective mechanism to reach the greatest number of social workers. Since NASW is recognized as a vital organization with major outreach, its involvement in the dissemination process is crucial. CSWE, as described previously, sets curriculum standards for schools of social work, and is also a key player in encouraging schools of social work to infuse content on SUDs and COAs in their programs.

### Engaging Faculty

Engaging faculty by demonstrating the importance of incorporating content on COAs is vital to dissemination efforts. This will require developing partnerships with all key stakeholder groups involved in social work education including: the National Association of Dean and Directors of Schools of Social Work (NADD); Baccalaureate Program Directors (BPD); Group for Advancement of Doctoral Education (GADE); and North American Network of Field Directors. These groups can be enlisted to help promote the core competencies and infusion of content into curriculum and field practice. Building support among these groups includes presenting workshops and keynote addresses at major conferences, and finding opinion leaders who can garner the interest of their peers.

### Research and Evidence-Based Practice

With the emphasis on evidence based practice in social work education and practice, expanded research on interventions with COAs increases the likelihood that appropriate intervention and prevention strategies will be integrated into social work practice. Therefore, panelists urged the major research institutes of the National Institutes of Health, the Institute for the Advancement of Social Work Research (IASWR) and AMERSA to encourage and support research on COAs. Panelists also noted the importance of increasing the number of articles about COAs written in peer reviewed journals. To promote social work education and research on COA issues, awards could be given through appropriate organizations for best article, dissertation or best course.

### Continuing Education

Most states have licensure requirements for social workers that include ongoing continuing education. Encouraging and providing continuing education training for social workers is another useful dissemination strategy. Schools of social work and local NASW chapters often have continuing education programs, which could include workshops related to COAs. An online course should be developed and offered through NASW's website. Regional conferences and training workshops could also be conducted through groups such as CSWE and NASW. To maximize participation, continuing education credits would need to be granted. Regardless of the venue, continuing education workshops need to be of high quality and highly marketable.

## Next Steps

The panelists recommended that the following steps be taken to advance the acceptance of the core competencies and the dissemination and infusion of curriculum based on the core competencies.

- Publish this report and market the COA Core Competencies throughout the social work profession
- Develop a curriculum module, based on the COA Core Competencies, including a toolkit of resources and materials which should be available online for easy access by social work faculty
- Promote the curriculum developed by NIAAA for faculty in schools of social work as a major resource on issues dealing with alcohol abuse and alcoholism
- Develop a curriculum for continuing education training, and seek opportunities to provide training for social workers on the COA competencies
- Work with researchers and research institutions to promote research on COA issues, and encourage the publication of articles
- Expand collaborations with NASW, CSWE and other organizations that can help foster the acceptance of the COA competencies into social work practice and the infusion of curriculum into social work foundation course content.

## References

- Anda, R.F., Whitfield, C.I., Felitti, V.J., Chapman, D., Edwards, V.J., Dube, S.R., & Williamson, D.F. (2002). Adverse Childhood Experiences, Alcoholic Parents, and Later Risk of Alcoholism and Depression. *Psychiatric Services*. 53 (8) 1001-1009.
- Dube, S.R., Anda, R.F., Felitti, V.J., Crogt, J.B., Edwards, V.J., & Wayne, H.G. (2001). Growing up with parental alcohol abuse: exposure to childhood abuse, neglect and household dysfunction. *Child Abuse & Neglect*. 25 1627-1640.
- Earls, F., Reich, W., Jung, K.G., & Cloninger, C.R. (1998). Psychopathology in children of alcoholic and antisocial parents. *Alcoholism: Clinical and Experimental Research*. 12, 481- 487.
- Famularo, R., Kinscherff, R., & Fenton, T. (1992). Parental substance abuse and the nature of child maltreatment. *Child Abuse and Neglect*. 16 (4) 475-483.
- Grant, B.F. (2000). Estimates of US Children Exposed to Alcohol Abuse and Dependence in the Family. *American Journal of Public Health*. 90 (1) 112-114.
- Haack, M.R. & Hoover, A. (Eds.) (2002). Strategic Plan for Interdisciplinary Faculty Development: Arming the Nation's Health Professional Workforce for a New Approach to Substance Use Disorders. *Substance Abuse*. 23 (3). Supplement.
- Kumpfer, K.L. (1999). Outcome measures of interventions in the study of children of substance-abusing parents. *Pediatrics*. Supplement. 103 (5) 1128-1144.
- Moss, H.B., Vanyukov, M., Majumder, P.P., Kirisci, L., & Tarter, R.E. (1995). Pre-pubertal sons of substance abusers: influences of parental and familial substance abuse on behavioral disposition, IQ, and school achievement. *Addictive Behaviors*. 20 (3) 345-358.
- National Association of Social Workers. (1999). *Code of Ethics of the National Association of Social Workers*. Washington, D.C.
- National Institute on Alcohol Abuse and Alcoholism. Social Work Education for the Prevention and Treatment of Alcohol Use Disorders, Available online at: [www.niaaa.nih.gov/publications/Social/main.html](http://www.niaaa.nih.gov/publications/Social/main.html). (Accessed on July 22, 2005).
- Reid, J., Macchetto, P., & Foster, S. (1999). *No Safe Haven: Children of Substance-Abusing Parents*. Center on Addiction and Substance Abuse at Columbia University.
- Sher, K.J. (1997). Psychological characteristics of children of alcoholics. *Alcohol Health and Research World*. 21 (3).
- Straussner, S.L.A., & Senreich, E. (2002). Educating social workers to work with individuals affected by Substance Use Disorders. In Haack, M.R. & Hoover, A. (Eds.) (2002). Strategic Plan for Interdisciplinary Faculty Development: Arming the Nation's Health Professional Workforce for a New Approach to Substance Use Disorders. *Substance Abuse*. Supplement. 23 (3) 319-331.

Substance Abuse and Mental Health Services Administration. (2005). *Results from the 2004 National Survey on Drug Use and Health: National Findings* Office of Applied Studies, NSDUH Series H-28, DHHS Publication No. SMA 05-4062. Rockville, MD. (Available at <http://oas.samhsa.gov/NSDUH/2k4NSDUH/2k4results/2k4results.htm#toc>. Retrieved April 28, 2006)

Werner, E.E. & Johnson, J.L. (2000). The role of caring adults in the lives of children of alcoholics. *Children of Alcoholics: Selected Readings*. Volume 2. National Association for Children of Alcoholics Rockville, MD.

Werner, E.E. (1986). Resilient offspring of alcoholics: a longitudinal study from birth to age 18. *Journal of Studies on Alcohol*. 47 (1) 34-40.

Note: An online resource of current research in SUDs and COA issues is available at:

[www.xxxxx.org](http://www.xxxxx.org)

**Appendix**  
**Expert Panels Participants**  
**June 6, 2005**

**S. Lala Ashenberg Straussner, DSW, Chair**  
Professor  
NYU School of Social Work

**Maryann Amodeo, MSW, PhD**  
Associate Professor  
School of Social Work  
Boston University

**Audrey Begun, PhD**  
University of Wisconsin, Milwaukee  
School of Social Welfare

**Frances L. Brisbane, PhD**  
Dean  
School of Social Welfare  
State University of New York at Stony Brook

**Ashley Brooks-Danso, MSW**  
Co-Director, Gero-Ed Center  
National Center for Gerontological Social  
Work Education  
Council on Social Work Education

**Christine Fewell, LCSW, CASAC**  
Adjunct Assistant Professor  
School of Social Work  
New York University

**Ellen Morehouse, ACSW, NCAC II**  
Executive Director  
Student Assistance Services

**Carol Sisco, PhD**  
Practitioner

**Charles D. Syms, LMSW/ACSW**  
Clinical Assistant Professor  
Chair, Alcohol and Other Drug Problems  
Concentration  
School of Social Work  
University of Buffalo

**Rita Vandivort, MSW**  
Public Health Analyst  
Organization & Financing Branch  
Division of Services Improvement  
SAMHSA/CSAT

**Julia M. Watkins, PhD**  
Executive Director  
Council on Social Work Education

**NACoA Staff**

**Sis Wenger**  
President/CEO

**Linda Kaplan, MA**  
Special Projects Consultant

## January 18, 2006 Meeting

**S. Lala Ashenberg Straussner, DSW, Chair**

Professor  
NYU School of Social Work

**Frances L. Brisbane, PhD**

Dean  
School of Social Welfare  
State University of New York at Stony Brook

**Ashley Brooks-Danso, MSW**

Co-Director, Gero-Ed Center  
National Center for Gerontological Social  
Work Education  
Council on Social Work Education

**Mimmie Byrne, MSW, LICSW, CAC**

Director of Outpatient Addiction Services  
West Virginia University  
Department of Behavioral Medicine &  
Psychiatry

**Sharon Herlehy, LCSW-R, RN**

Assistant Director of Field Education  
School of Social Work  
University at Buffalo

**Jerry Flanzer, PhD**

Health Science Administrator  
National Institute on Drug Abuse  
National Institutes of Health

**Timothy Tunner, PhD, MSW**

Senior Policy Associate- Behavioral Health  
National Association of Social Workers

**Cheryl Waites, EdD, MSW**

Department of Social Work  
North Carolina State University

**Julia M. Watkins, PhD**

Executive Director  
Council on Social Work Education

**Flavio Marsiglia, PhD**

Foundation Professor of Cultural Diversity  
and Health  
SIRC Director  
School of Social Work  
College of Public Programs  
Arizona State University

**NACoA Staff and Consultants**

**Sis Wenger**

President/CEO

**Linda Kaplan, MA**

Special Projects Consultant

**Shelly A. Wiechelt, PhD**

Social Work Initiative Consultant

**Steve Hornberger, MSW**

Program Consultant

## Field Reviewers

**R. Ann Myers, MSW**

Head, Department of Social Work  
Director of the Aging, Family and  
Intergenerational Studies Programs  
James Madison University  
Harrisonburg, Virginia

**Darla Spence Coffey, PhD, MSW**

Interim Associate Vice President for Academic  
Affairs West Chester  
University West Chester, Pennsylvania

**David W. Springer, PhD, LCSW**

Associate Dean for Academic Affairs  
University of Texas at Austin  
Austin, Texas

**Claudia Black, PhD, MSW**

Author and International Trainer  
Faculty at University of Washington  
Seattle, Washington

**Catherine L. Herzog, PhD, MSW**

NACoA Board of Directors



National Association for Children of Alcoholics

11426 Rockville Pike, Suite 301

Rockville, MD 20852

Phone: 888-55-4COAS

or

301-468-0985

Fax: 301-468-0987

E-mail: [nacoa@nacoa.org](mailto:nacoa@nacoa.org)