Contingency Management in the Wild: Rural Substance use provider experiences with evidence-based practice targeting stimulant use

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Northwest (Region 10)

ROTA C Rural Opioid Technical Assistance Collaborative
Funded by Substance Abuse and Mental Health Services Administration

# Land Acknowledgement

https://wsu.edu/about/wsu-land-acknowledgement/

Washington State University acknowledges that its locations statewide are on the homelands of Native peoples, who have lived in this region from time immemorial. Currently, there are 42 tribes, 35 of which are federally recognized that share traditional homelands and waterways in what is now Washington State. Some of these are nations and confederacies that represents multiple tribes and bands. The University expresses its deepest respect for and gratitude towards these original and current caretakers of the region. As an academic community, we acknowledge our responsibility to establish and maintain relationships with these tribes and Native peoples, in support of tribal sovereignty and the inclusion of their voices in teaching, research and programming. Washington State University established the Office of Tribal Relations and Native American Programs to guide us in our relationship with tribes and service to Native American students and communities. We also pledge that these relationships will consist of mutual trust, respect, and reciprocity.

As a land grant institution, we also recognize that the Morrill Act of 1862 established land-grant institutions by providing each state with "public" and federal lands, which are traced back to the disposition of Indigenous lands. In 1890, Washington State received 90,081 acres of Indigenous Lands designated to establish Washington State University (see data). Washington State University retains the majority of these lands to this day. We acknowledge that the disposition of Indigenous lands was often taken by coercive and violent acts, and the disregard of treaties. For that, we extend our deepest apologies. We owe our deepest gratitude to the Native peoples of this region and maintain our commitment towards reconciliation.



# Funding Acknowledgement

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The content of this presentation is solely the responsibility of the authors and does not necessarily represent the official views of SAMHSA.

### Disclosure

#### K. Michelle Peavy, PhD

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#### Katherine Pinell

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#### Danielle Helm

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## What is Contingency Management?

A behavioral treatment for substance use disorders that uses positive reinforcement to encourage substance abstinence.

#### CM Protocol

WHO we're trying to help?

People who use stimulants

WHAT is the behavior of focus?

**Stimulant-negative urine tests** 

WHICH type of reward?

**Vouchers traded for gift cards or prizes** 

How big are rewards?

\$540 max earnings/cal yr; base reward \$10; escalate with stim-neg UDS.

**HOW OFTEN do people get rewards?** 

Twice weekly

WHEN people get rewards?

**Directly after urine drug screen** 

**HOW LONG does the intervention last?** 

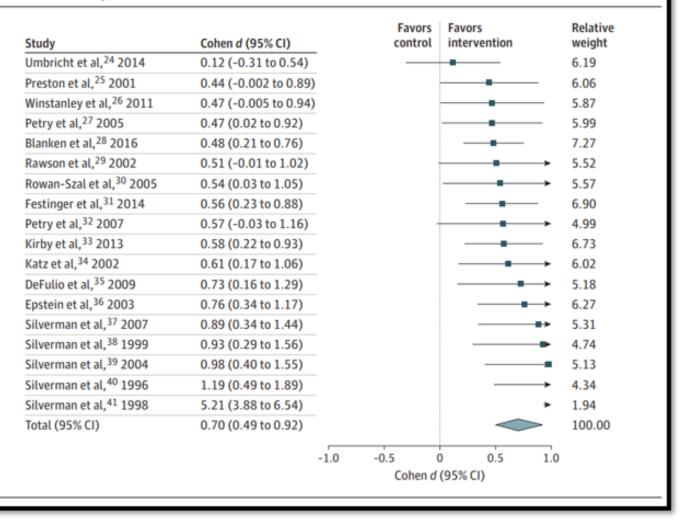
12 weeks

# CM: Does it work?

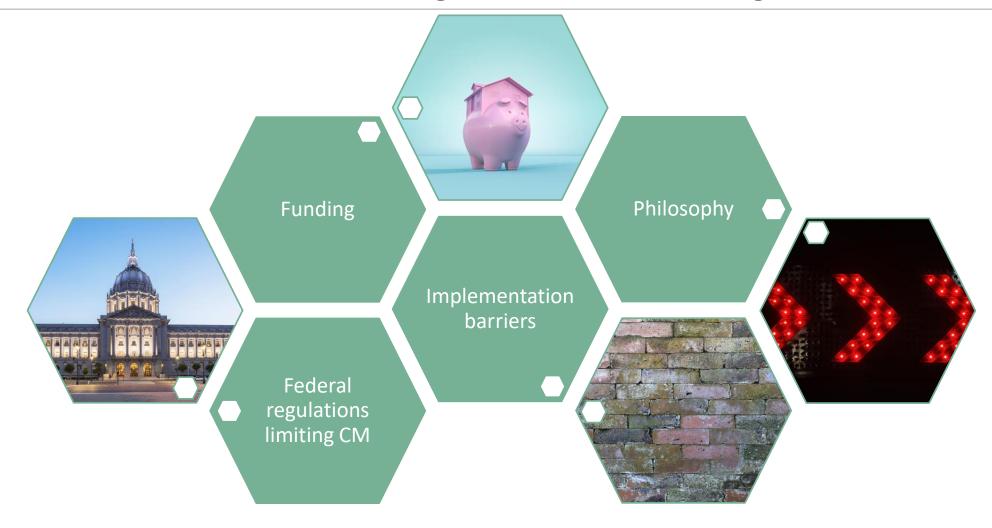
Meta-analysis of 60 studies of CM for MOUD patients

CM targeting stimulant use date back to the late 1990s.

Figure 2. Forest Plot of Treatment Effect Sizes of Contingency Management vs Controls: Abstinence From Psychomotor Stimulant Use

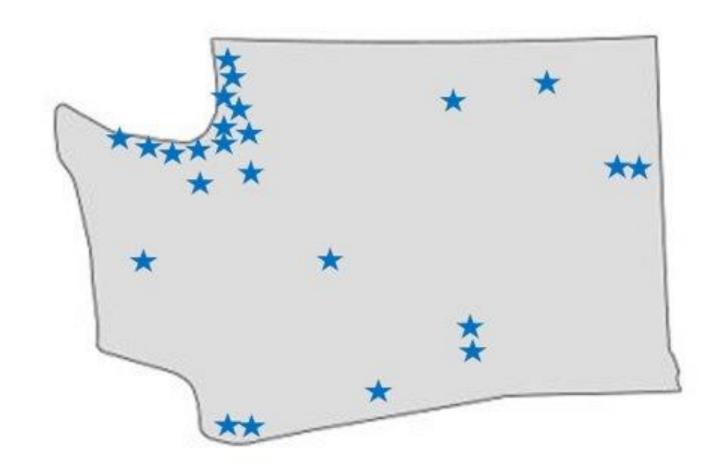


# If CM works so well, why is it not widely available?



## Washington State's efforts

Health Care Authority supported State Opioid Response sites in CM training and implementation.





# Panel Discussion

CHALLENGES IN CM IMPLEMENTATION

OVERCOMING BARRIERS TO IMPLEMENTATION

CM SUCCESS STORIES



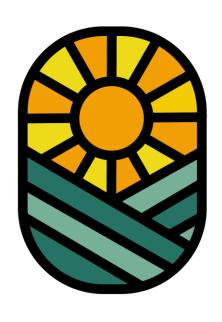


**CM Prize Closet** 





#### **CM Prize Closet**



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YOUR RESPONSE IS REQUESTED BY SAMHSA, AND WILL ASSIST US IN OUR GRANT REPORTING.