

Youth and staff views about contingency management for AOD treatment attendance and engagement

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Acknowledgement of Country

The University of Queensland (UQ) acknowledges the Traditional Owners and their custodianship of the lands on which we meet.

We pay our respects to their Ancestors and their descendants, who continue cultural and spiritual connections to Country.

We recognise their valuable contributions to Australian and global society.



Contingency management

- Incentives / disincentives to promote / discourage behaviours
 - E.g., USA - vouchers or entry into prizedraws to encourage abstinence
- Potential benefits? (Clay, 2023, 2024)
 - Promote attendance / engagement?
- Critiques? (Clay, 2023, 2024)
 - Ethical concerns?



What are young people's and staff views?

Methods



In-depth interviews (N=26)
 - 16 young people
 - 10 staff

Young people demographics



Variable		N (%)
Gender	Male	11 (73.3)
	Female	2 (13.3)
	Non-binary/gender fluid	2 (13.3)
Age (years), <i>M (range)</i>		22.9 (<18 to 26)
Aboriginal or Torres Strait Islander Status	No	14 (93.3)
Birth country	Australia	14 (93.3)

May help to increase attendance

“Some people might be at that ‘contemplation stage’ where they're like, ‘yeah, maybe, maybe drugs is really stuffing my life up at the moment, but I don't know what to do?’ Obviously, that would be good then, because you're offering an incentive to those people, and they come in and they see what it's about, and then they can go from there, you know, like, it's a really good gateway into, like, treatment.” (Chris, Residential Rehabilitation Resident)

Engagement as tokenistic?

“Man, like, the real change is internal. Man, like, that's the real motivation, you know, they got to have. Like, the internal motivation, like, you know, recovery is an ‘inside job’.” (Sarah, Community-based client)

“I don't like it at all. I think it's extrinsically motivated, and I think it'll mean it won't work for them, because they're not doing it for them. They're doing it to get something, and it would teach like, ‘bribery’, almost like and what happens when that external motivation is gone?” (Janes, Psychologist, Residential Rehabilitation Service)

Contingency management design preferences

“I would have a level of discomfort trying to incentivise abstinence when it's not necessarily always the goal of the participant.” (Aliesha, Community-based youth worker)

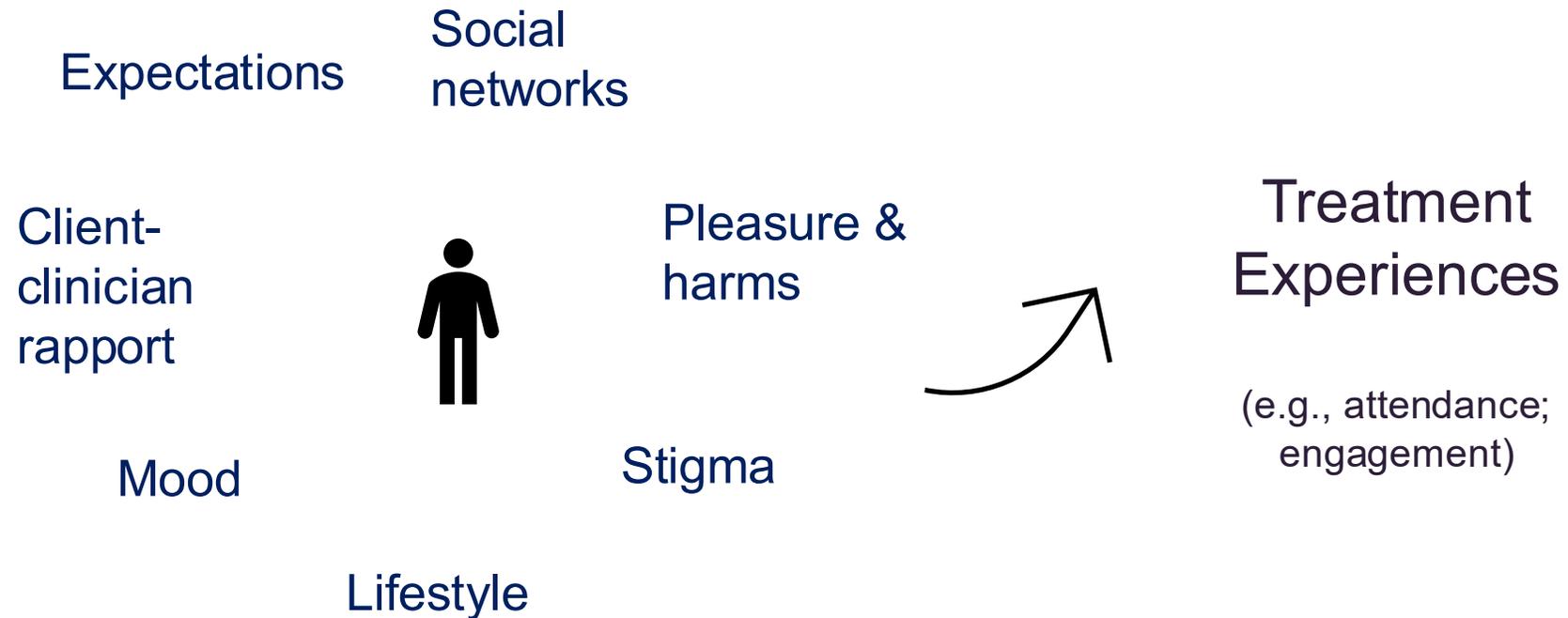
“I'd say money is very much a, not a good reward. I feel like it's very fake.” (Rob, Community based client)

“Toiletry pack when they got here, that's a good incentive. If you come into rehab, you get like a welcome pack.” (Jill, Residential Rehabilitation Staff member)

Key insights

- Contingency management viewed as potentially being useful to incentivise attendance / prosocial behaviours
- Concerns about contingency management as tokenistic
- Incentivising client abstinence was viewed as problematic in Australian settings
 - Perhaps more care needs to be taken about transposing things that work in the USA to Australia?
- Everyday helpful supports favoured over cash incentives

Intersectional thinking...



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