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WHAT IS SAP TREATMENT?

In my travels as a representative of a Substance Abuse Professional (SAP) services company, I am often asked this question: "What kind of treatment do you provide?" The questioners, unfamiliar with SAP services, usually go on to ask if we favor medication assisted treatment, 12-step oriented treatment, inpatient treatment, behavioral treatment, rapid detox, cognitive therapy, motivational interviewing, etc., etc. I typically respond with "We don't provide a *kind* of treatment because we don't provide treatment at all." This reply initially stuns the individual into silence, and then typically opens to a conversation where the SAP process can be explained and discussed.

I explain, in that conversation, that a SAP services provider such as mine supplies a national network of SAPs backed by an administrative quality assurance system to manage drug free workplace cases and related services for employers. SAP services make case managed treatment available to DOT mandated employees who have violated drug and alcohol testing regulations. The SAP, an independent clinical practitioner with appropriate qualifying

credentials, recommends treatment that he/she determines will be most effective for a particular individual. There are virtually no restrictions on treatment recommendations; any and all types of treatment may be recommended by the SAP.

The last time this question was raised, my rote reply didn't sit well with me. If we do not provide treatment, then why is the treatment that is provided, regardless of treatment approach, so successful? National measures of treatment success (measured in treatment completion rates) usually fall within a 20–25% range, while treatment completions rates for SAP cases (as reported by American Substance Abuse Professionals) frequently exceed 75%! Why?

The answer may have less to do with the type of treatment provided than the way the treatment is packaged. The packaging, or design of substance abuse treatment, has been studied by researchers under the rubric of Contingency Management (CM) intervention. In the volume *Con-*

tingency Management in Substance Abuse Treatment, edited by Stephen Higgins, Kenneth Silverman and Sarah Heil, CM interventions "are based upon operant conditioning and involve systematic application of behavioral consequences to promote changes in drug use or other therapeutic goals such as attendance at therapy sessions and medication compliance, among others."

Can SAP "treatment" be called a CM intervention? Operant Conditioning is the construct championed by behavioral psychology pioneer B.F. Skinner to describe the effects of the consequences of a behavior upon future behavior: A behavior that is rewarded is more likely to be repeated and a behavior that is punished is more likely to be discontinued. The reward or punishment is contingent upon the behavior that precedes it. Researchers in CM argue that substance abusing behaviors originate and persist because of their powerful reinforcing qualities

and that substance abusers will choose abstinence, if abstinence is rewarded and relapse is punished by *reinforcers* that are sufficiently powerful.

Eligibility for employment is the powerful reinforcer at the heart of SAP CM. When an employee violates DOT drug and alcohol testing regulations by testing positive for a prohibited substance, the individual is either suspended from safety sensitive duties or terminated, depending upon the employer's policy. A good job is in serious jeopardy or altogether lost. Restoration of eligibility to either resume safety sensitive duties or to assume a new DOT regulated job is determined by the individual's success in the SAP CM process. The more the individual needs a job, the more powerful the reinforcer becomes and the more likely it is that abstinence behaviors will be repeated. A powerful reinforcer, in the parlance of CM research, is said to possess high reinforcement *magnitude*.

Exposure to a high magnitude reinforcer alone, however, is not enough to change a substance abuser's behavior over the long term. According to CM intervention research, the strength of the reinforcer is one of two companion factors determining the success of CM intervention for substance abuse. The second factor concerns the design and duration of the *reinforcement schedule*. Reinforcement schedule refers to how, when and under what circumstances behaviors are rewarded or punished. Numerous controlled studies have shown that a well-designed reinforcement schedule using a high magnitude reinforcer can yield remarkable results when it comes to substance abuse CM interventions. A successful reinforcement regimen typically provides a clearly identified sequence of behavioral choices that are followed by timely deliveries of appropriate contingent consequences. Researchers also tell us that longer reinforcement schedules generally lead to longer-lasting and more robust

therapeutic outcomes. In this regard, the SAP CM process, after the individual completes treatment and returns to safety-sensitive duty, includes a follow-up phase that lasts from 12 to 60 months according to SAP recommendations.

The DOT SAP process, from a CM perspective, can be viewed as a therapeutically sequenced reinforcement schedule for progressively shaping abstinence behaviors. When an individual begins SAP CM intervention, behavioral choices determine corresponding rewards or punishments. In DOT drug and alcohol testing terminology, the choices translate to compliance or non-compliance behaviors, i.e., behaviors that are either consistent with DOT regulatory policy or in violation of it. The SAP CM reinforcement schedule rewards compliance behaviors by maintaining the individual in a process that can lead to restoration of employment eligibility and punishes non-compliance (violations) by removing the individual from said opportunity. Within the SAP CM process, there are successive strategically placed junctures where behaviors are evaluated and contingent consequences are delivered, e.g., the initial SAP evaluation, admission to treatment, treatment compliance monitoring, treatment test results, the follow-up SAP evaluation, the return-to-duty test(s), aftercare treatment monitoring and follow-up testing results. The individual who successfully complies with the entire process completes a long reinforcement schedule designed to help the substance abuser achieve and maintain a drug-free lifestyle. ■



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