Glossary

Baseline: A starting point or basis of comparison against which changes can be assessed.

Buprenorphine: A partial opioid receptor agonist classified as a Schedule III controlled substance (U.S. Drug Enforcement Administration [DEA], 2022). Buprenorphine is used in medication-assisted treatment that can help reduce withdrawal symptoms and craving (Substance Abuse and Mental Health Services Administration [SAMHSA], 2024).

Cognitive Behavioral Therapy (CBT): A psychological treatment modality that emphasizes helping patients/clients address and modify thinking patterns as a pathway to behavior change.

CBT tends to focus on current life circumstances and teaches patients how to cope with problems to reduce symptoms.

Community Reinforcement Approach (CRA): A community-based outpatient treatment approach designed to assist clients in gaining skills to avoid substance use and make positive lifestyle changes.

Comparison Group: A group of individuals who receive an alternative treatment condition.

Contingency Management (CM): A type of treatment that rewards individuals for demonstrating a desired behavior to instill positive behavior change.

Control Group: A group of individuals who received either no treatment or standard treatment (i.e., the most widely accepted treatment) within the context of experimental research.

Desipramine: A type of tricyclic antidepressant medication that is used for the treatment of depression.

Detoxification: A multicomponent intervention that seeks to reduce physical harm caused by substance abuse by managing acute intoxication and withdrawal.







Effect Size: A value that describes the strength of the relationship between variables or the extent of differences between groups. A large effect size indicates practical significance, while a small effect size indicates that a finding might have statistical significance but has limited practical applications.

Experimental Study Design: A type of research design that evaluates the effectiveness of an intervention by randomly assigning participants to either the intervention group or a control group.

Fidelity: The extent to which delivery of an intervention adheres to the model as originally developed.

Follow-up Assessment: A type of assessment conducted after the active treatment period ends in a research study. Its purpose is often to examine whether the outcomes achieved during the treatment are sustained.

Levo-alpha-acetylmethadol (LAAM): A longer acting opioid agonist maintenance medication used in treatment of opioid use disorder.

Medication-Assisted Treatment (MAT): The comprehensive treatment of substance use disorders through a holistic approach that combines FDA-approved medications with counseling and behavioral interventions (SAMHSA, 2019).

Medication-Based Contingency Management: A type of contingency management approach in substance use treatment where medication-related incentives are used to reinforce positive behaviors. For example, clients may earn take-home doses of medication (such as methadone) for maintaining abstinence from drugs or attending therapy sessions.

Methadone: A synthetic opioid medication primarily used in the treatment of opioid use disorder and chronic pain management. It reduces withdrawal symptoms and cravings without producing the intense euphoria associated with stronger opioids.

Methadone Maintenance: The use of methadone, a long-acting full opioid agonist, in an opioid treatment program.

Motivational Stepped Care (MSC): A type of adaptive intervention strategy which tailors the level of therapeutic support to align with each client's individual treatment outcomes and advancement (Brooner & Kidorf, 2002).

Naloxone: A medicine that rapidly reverses an opioid overdose by restoring a person's normal pattern of breathing.

Naltrexone: An opioid antagonist that blocks the activation of opioid receptors (National Institute on Drug Abuse, 2018).

Naltrexone Maintenance: The use of naltrexone as a long-term treatment for opioid use disorder.

Opioids: A class of drugs that are often used for pain management. They include prescription opioids such as oxycodone (OxyContin) and morphine, as well as the synthetic opioid fentanyl and the illegal drug heroin.

Opioid Agonist Treatment: A type of treatment where certified medical professionals administer carefully studied opioid agonists to individuals diagnosed with opioid dependence. This approach follows recognized medical practices and protocols, with the goal of achieving specific therapeutic outcomes (World Health Organization, 2024).

Opioid Use Disorder (OUD): A condition characterized by compulsive and prolonged misuse of illicit or prescription opioids, diagnosed when an individual exhibits at least two of several

criteria within a 12-month period, including loss of control over use, cravings, persistent social or occupational problems, and continued use despite negative physical or psychological consequences (American Psychiatric Association, 2022).

Placebo: A medicine or treatment with no active therapeutic effect. It is often used in medical research as a control to test the effectiveness of a real medicine or treatment.

Prize-Based Contingency Management: The provision of opportunities to win prizes as rewards for achieving a desired behavior, such as abstaining from stimulants, in a treatment program.

Reset: This term describes the consequence of non-compliance with contingency management program requirements, such as submitting a positive urine drug test or not attending a treatment session. In such cases, the value of vouchers or the number of earned draws reverts to the initial starting value.

Sedatives: A class of potentially addictive prescription medications used for various purposes, such as treatment for anxiety and insomnia, or as anesthesia.

Self-Report: A report about one's own behavior provided by the subject of the research.

Statistical Significance: Measures the probability that observed relationships can be attributed to chance or sampling error. A high degree of statistical significance means the observed relationship is unlikely to be due to chance.

Stimulants: A drug class covering a wide range of drugs that speed up the body's systems and processes, including increasing activity in the central nervous system. It includes "prescription drugs such as amphetamines, methylphenidate, diet aids, and other illicitly used drugs such as methamphetamine, cocaine, methcathinone, and other synthetic cathinones that are commonly

sold under the guise of 'bath salts.' Stimulants can come in multiple forms, such as 'pills, powders, rocks, and injectable liquids'" (DEA, 2020).

Therapeutic Workplace: An intervention approach that combines contingency management techniques with opportunities for paid job training or employment. In this approach, participants must provide drug-free urine samples to gain access to the work-related benefits. The program can also target other behaviors that support abstinence from drugs (DeFulio et al., 2022).

Treatment as Usual (TAU): A commonly used study condition or control/comparison group in therapeutic and clinical intervention studies. TAU groups often represent a study condition where no changes to practice or treatment are implemented. Participants assigned to this condition receive a version of treatment that is considered standard or typical within the discipline.

Researchers typically compare a TAU group to one or more groups that receive an intervention or treatment of interest.

Voucher-Based Contingency Management: The provision of vouchers with monetary value as a reward for achieving a desired behavior such as abstaining from stimulants for an individual in a treatment program.

Yoked condition: In the context of this review, "yoked condition" means a matching control procedure where participant experiences or outcomes in one group are directly linked to (or "yoked" with) with those in another group. The yoked participants receive the same stimuli or consequence (e.g., incentives) as the participants in the experimental group, but without any performance requirement.

References

- American Psychiatric Association. (2022). Opioid use disorder. In *Diagnostic and statistical*manual of mental disorders (5th ed., text rev.).

 https://doi.org/10.1176/appi.books.9780890425787
- Brooner, R. K., & Kidorf, M. (2002). Using behavioral reinforcement to improve methadone treatment participation. *Science & Practice Perspectives*, *1*(1), 38.
- DeFulio, A., Cosottile, D. W., Devoto, A., & Silverman, K. (2022). A pilot study of a therapeutic workplace in women arrested for prostitution. *Behavioral Interventions*, *37*(4), 1245–1253. https://doi.org/10.1002/bin.1906
- National Institute on Drug Abuse. (2018). *Medications to treat opioid use disorder*.

 https://irp.nida.nih.gov/wp-content/uploads/2019/12/NIDA-Medications-to-treat-opioid-use-disorder 2018.pdf
- Substance Abuse and Mental Health Services Administration. (2019). *Medication-Assisted Treatment (MAT) in the Criminal Justice System: Brief Guidance to the States*.

 https://store.samhsa.gov/product/medication-assisted-treatment-mat-criminal-justice-system-brief-guidance-states/pep19
- Substance Abuse and Mental Health Services Administration. (2024). *Medications for substance use disorders*. https://www.samhsa.gov/medications-substance-use-disorders
- U.S. Drug Enforcement Administration. (2022). *Buprenorphine*. https://www.deadiversion.usdoj.gov/drug chem info/buprenorphine.pdf
- U.S. Drug Enforcement Administration. (2020). Stimulants drug fact sheet.

 https://www.dea.gov/factsheets/stimulants

World Health Organization. (2024). *Opioid agonist pharmacotherapy used for the treatment of opioid dependence (maintenance)*. https://www.who.int/data/gho/indicator-metadata-registry/imr-details/2718