

Treatment Approaches

Classical Roots - I

- *Cue Exposure* – repeated exposure to cues that have become associated with drug use, but no UCR is produced (i.e. drug is not taken). It is an extinction model – over time, the cues lose their ability to elicit feelings that might lead to drug use. Theoretically sound, but empirical evidence of efficacy is not strong or consistent.

Treatment Approaches

Classical Roots - II

- *Aversive Conditioning* – this is a process of re-conditioning. It can be done *in vitro* or *in vivo*. The aim is to make the UCS appear unpleasant. Effects can be dramatic, but they tend to be short-lived. It is also probably not pure CC – there are elements of OC (punishment), hence 2-factor theory may be best explanatory model.
- *Naltrexone.....?*

Naltrexone is probably another extinction model within 2-factor theory. Opiate use as a behaviour is not rewarded (negative punishment) and the link between UCS and a pleasant UCR is weakened.

Treatment Approaches

Operant Roots

- *Disulfiram* – the behaviour of drinking is dramatically punished.
- *DRR* – this is a mix of operant and social learning.
- *Methadone maintenance* - ??

Treatment Approaches

Methadone treatment has clear elements of OC with the potential both to reinforce and punish behaviour. We are in the realms of *contingency management*.

Treatment Approaches

Social Learning Roots - I

These probably do not exist in a pure form – they are more like extensions of operant approaches, more holistic in their perspective.

- *Community Reinforcement Approach* – popular in USA, the person's work and social networks are utilised. Also, progress can bring benefits in terms of accommodation, training, work opportunities etc.

Treatment Approaches

Social Learning Roots - II

- *Behavioural Self-Management* – the person's motivation is harnessed to promote change through goal-setting, drinking rules, self-monitoring, and problem-solving.
- *Skills Training* – helping people develop the skills needed for daily living. These could include drink/drug refusal skills, mood and distress management, problem-solving, assertiveness, and promoting self-efficacy. Group work can be particularly beneficial here.