



Published in final edited form as:

Addiction. 2017 May ; 112(5): 763–764. doi:10.1111/add.13752.

Making Recovery More Rewarding: Difficult with Possible Unintended Consequences, But Successful Examples are Out There

James R. McKay, Ph.D.

University of Pennsylvania, Philadelphia Veterans Affairs Medical Center

I want to thank the people who wrote these four commentaries for their thought-provoking reactions and suggestions. David Best highlighted theoretical and interventional work with criminal justice populations that has stressed the importance of meaningful activities, relationships, and the community to sustained desistance. The findings from these studies appear to be quite consistent with the arguments I am making, and I greatly appreciate Best's references to this body of work.

Kari Lancaster cautioned against conveying that to be in recovery, one must not only be abstinent but also improve in other major domains of functioning and become a productive citizen. I completely agree, which led me to think that I must not have been entirely clear in my arguments. My point wasn't that those with substance use disorders ought to be striving to both stop using alcohol and drugs and become good citizens according to societal norms. Rather, I proposed that providing more opportunities to engage in enjoyable and meaningful activities might convince some individuals that there were compelling reasons to continue to abstain from alcohol and drugs.

Emma Wincup highlighted potential problems with incentives, including that they can be coercive. She also questioned how incentive focused treatment would handle clients who do not get better. I recommend providing help in finding and engaging in rewarding activities for a relatively long period, say a year, regardless of whether the client has stopped using, in the hope that participation in such activities will eventually help to increase rates of sustained recovery. Wincup's second concern, that incentives can erode intrinsic motivation, particularly applies to the use of cash or voucher based incentives linked to drug free urine samples or attendance at treatment sessions. However, I'm not proposing greater use of these kinds of incentives. Instead, I'm suggesting individuals with substance use disorders be given more help to identify and engage in activities that will be pleasurable and rewarding. At least in some cases, these could be activities that are essentially cost-free or at least not terribly expensive, and could be sustained by individuals in recovery once they come to value them. However, the potential for unintended consequences should be acknowledged when providing incentives or rewards, whether contingent on performance or not.

John Kelly makes three excellent suggestions that would advance work on how to make recovery more attractive: Asking people in recovery how they got better (which Lancaster also recommended), promoting recovery support services in the community that can provide an entree to rewarding activities, and recognizing that there will be important individual differences in the kinds of experiences that will be most rewarding. The insights of those who have been successful in recovery might not always be relevant to those who continue to struggle. However, I agree that we can still learn much from these individuals. And I entirely support greater use of and research on recovery support services. Finally, as Kelly so clearly states, interventions consistent with what I have proposed, whether provided by the treatment systems or other agencies, will have to be highly individualized.