

Contingency Management and SARS-CoV-2 Testing Among People Who Inject Drugs

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People who inject drugs (PWID) are at greater risk than the general population for experiencing COVID-19 complications. Social health barriers (houselessness, living in congregate spaces, access to healthcare, transportation, etc.) and underlying health conditions like HIV and Hepatitis C contribute to the increased risk. However, the stigma of drug use among health care providers, as well as transportation and health insurance limitations, have contributed to low COVID-19 testing uptake among PWID. Nevertheless, syringe exchange programs (SEPs) provide access to resources and high quality, nonjudgmental medical care. This study aimed to see if the use of incentives at local SEPs would improve COVID-19 testing among PWID.

WHERE

SEPs across 4
Oregon counties



WHEN? February – April 2021



THE POPULATION

PWID seeking care at 1 of 9 SEPs across 4 Oregon counties



2 counties were rural and 2 were in small urban centers

Approximately 80% of participants were White, 10% Hispanic/Latino

30% were female

55% were temporarily housed or unhoused

WHAT HAPPENED

The research team implemented a COVID-19 testing program at 9 SEPs in 4 counties (2 rural, 2 small urban) in Oregon. The study team began the free testing program on February 1, 2021. Five weeks later, they started providing incentives for testing in the form of a \$10 gift card to either Walmart or Kroeger.

The study team tracked how many SEP clients COVID tested per week both before and after offering the \$10 gift card (during the contingency management period). It analyzed these data by phase and site to understand the effects of contingency management on COVID-19 testing rates.

KEY FINDINGS

Approximately one person tested per week when no incentives were provided versus approximately 6 people per week when incentives were provided. In this brief time frame, contingency management did not improve testing for COVID-19 among PWID in less populated areas.

RECOMMENDATIONS

In this study, contingency management (providing incentives) significantly increased testing among PWID. This suggests providing incentives could be an effective strategy to consider when working with this population. Uptake of these kinds of strategies will be important to continue among PWID given their increased vulner ability to COVID-19, barriers to health services access to that may influence vaccination uptake, and new COVID-19 variants that may lead to new waves.

Providing incentives may also help improve vaccine uptake and adherence among PWID for COVID-19 and other infectious diseases. Increasing the numbers of PWID receiving COVID-19 tests or vaccines is one way to help ensure members of this community are able to protect themselves and those around them. However, it is important to put monitoring systems in place to ensure people are not getting vaccines after already completing a vaccine series.

This summary was performed in September 2022. This summary includes only the results of a single study. Other studies may find different results. The study was supported by the NIH RADx® Underserved Populations (RADx-UP) initiative. www.radx-up.org

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