

## Motivational Interviewing

### Review 15

Terplan, M., & Lui, S. (2007). Psychosocial interventions for pregnant women in outpatient illicit drug treatment programs compared to other interventions. *Cochrane Database of Systematic Reviews*, Issue 4, Art. No. CD006037. PubMed abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/17943878>.

<b>Objectives</b>	Assess the effectiveness of psychosocial interventions in pregnant women enrolled in illicit drug treatment programs on birth and neonatal outcomes on attendance and retention in treatment, and drug abstinence.
<b>Studies Included</b>	Nine U.S. and international studies published from 1995 to 2004
<b>Participants in the Studies</b>	Pregnant women with drug, alcohol, or nicotine use or dependence
<b>Settings</b>	Academic or hospital-based outpatient illicit drug treatment programs
<b>Outcomes</b>	Birth outcomes, neonatal outcomes, substance abuse treatment attendance and retention, prenatal care attendance, substance use
<b>Limitations of the Studies</b>	Only two of the nine included studies reported the method of randomization to group, some samples were very small and underpowered, and studies differed in length of treatment. The majority of participants in the included studies were low income, with low levels of education, and African American, limiting the generalizability of the results to other populations.

### Results

Nine randomized controlled studies were included in this review; five evaluated contingency management (CM), and four evaluated manual-based interventions such as MI. The overall findings suggest CM strategies are effective in improving retention of pregnant women in illicit drug treatment programs but only produce a small effect in illicit drug abstinence. There was insufficient evidence supporting the effectiveness of MI for this population, and although not statistically significant, there was a trend toward a decrease in treatment retention in those who received MI. Birth and neonatal outcomes were rarely captured in the included studies; therefore, there is insufficient evidence supporting the effectiveness of any specific psychosocial intervention for these outcomes.