NIH
HEAL
INITIATIVE

CONNECTIONS

Partnering to Accelerate Research into Action

#NIHhealInitiative

National Institutes of Health
HEAL Initiative

NIH HEAL Initiative and Helping to End Addiction Long-term are service marks of the U.S. Department of Health and Human Services.

HEAL CONNECTIONS
SHARING SESSION

Research Dissemination Spotlight with Justice Community Opioid Innovation Network (JCOIN) Strategies

Christoph Hornik
Principal Investigator
HEAL Connections

Faye Taxman
Principal Investigator
JCOIN

Jessica Hulsey
CEO & Founder
Addiction Policy Forum

Tisha Wiley
Chief, Services Research Branch,
National Institute
on Drug Abuse (NIDA)

TODAY'S AGENDA

1:00–1:10 p.m.
HEAL Connections Welcome and Overview

1:10–1:40 p.m.
JCOIN Case Study

1:40–1:55 p.m.
Interactive Q&A

1:55–2:00 p.m.
Meeting Close and Evaluation

WHAT YOU WILL LEARN

- Actionable tips and real-world case studies for engaging stakeholders across the HEAL research spectrum from JCOIN peers
- How to apply knowledge translation and dissemination resources developed by JCOIN and other research teams to optimize the sharing of HEAL science and help close the research-to-practice gaps
- How to partner with HEAL Connections to support community engagement and dissemination of HEAL research

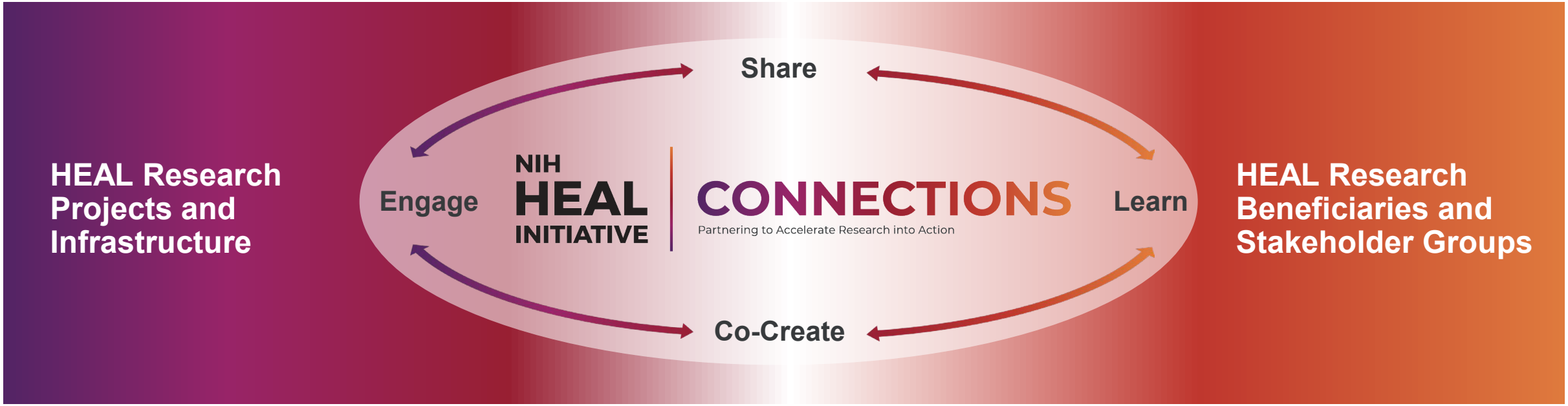
NIH HEAL INITIATIVE | CONNECTIONS
Partnering to Accelerate Research into Action

HEAL Connections Overview

Introducing a New Center to Accelerate Research into Action by:

Creating pathways to **further build and sustain community partnerships**

Supporting HEAL researchers to **meaningfully share research results**



HEAL's Vision is to Make Research Results Useful for Communities

Understand community needs

Help HEAL researchers work with communities

Build partnerships with communities who can benefit from HEAL research

Make research findings user-friendly to broaden their reach and impact

Meaningful Engagement of Communities

HEAL Connections will further **bi-directional partnerships** between HEAL research teams and broader communities of intended beneficiaries and stakeholder groups such as:

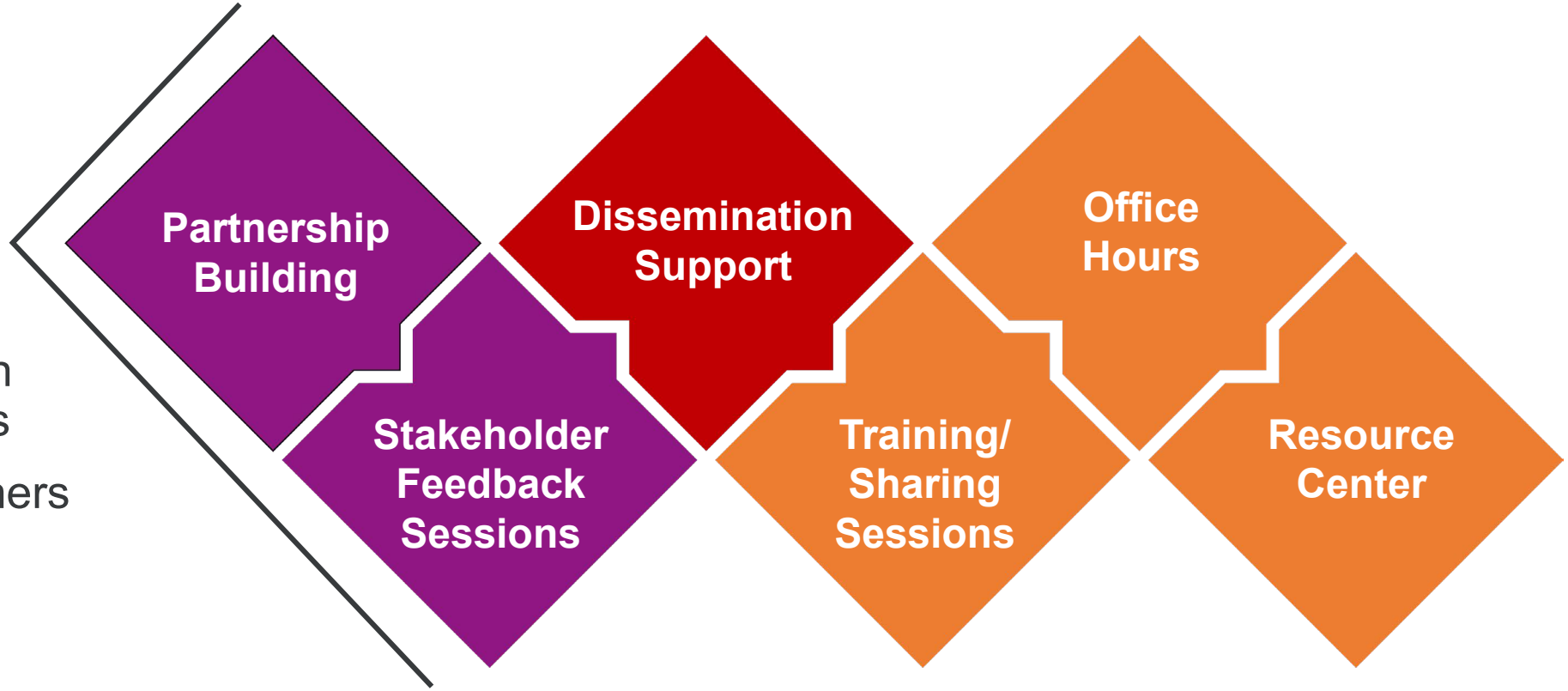
- patients
- priority populations
- people with lived experiences
- practitioners
- national association partners
- other researchers

To help **broaden the reach and impact of HEAL research results** beyond academic channels

HEAL Connections Services

Primary Objectives

- Create pathways to further build and sustain community partnerships
- Support HEAL researchers in meaningfully sharing results

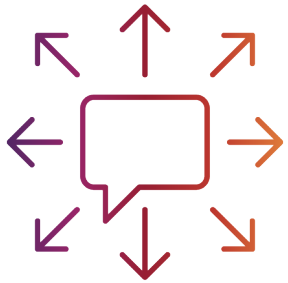


Engagement of Communities Research Team Support Workforce Development

Dissemination & Implementation Support

HEAL Connections will provide knowledge translation, dissemination, and implementation support and content development services (e.g., infographics, data visualizations, plain language summaries, etc.) to help HEAL studies extend their research findings beyond academic channels.

Knowledge Translation:
the right information to the right people in the right format at the right time.



Dissemination:
communicating findings to a wide range of people who may find it useful via plain-language summaries and infographics, traditional and social media, and/or giving talks at non-scientific conferences and events.

Implementation:
priming research findings so that they can be put into practice. This means using research findings to influence appropriate decisions and changes to health and social care policy and practice.

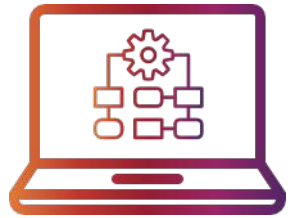
Services to Support HEAL Researchers

HEAL Connections Sharing Sessions

- Peer-to-peer training/sharing sessions
- Topics selected to build capacity to extend research findings beyond academic journals and into formats and channels that reach communities

HEAL Connections Office Hours

- Office hours held after sharing sessions for deeper exploration of topics
- Offers HEAL research projects the opportunity to share your experience, and to consult with our in-house experts and your peers on dissemination issues and opportunities facing your projects



HEAL Connections Resources

- An online, curated set of resources to assist HEAL research projects with dissemination and implementation

HEAL CONNECTIONS
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Partnering to Accelerate Research into Action

JCOIN
JUSTICE COMMUNITY OPIOID INNOVATION NETWORK

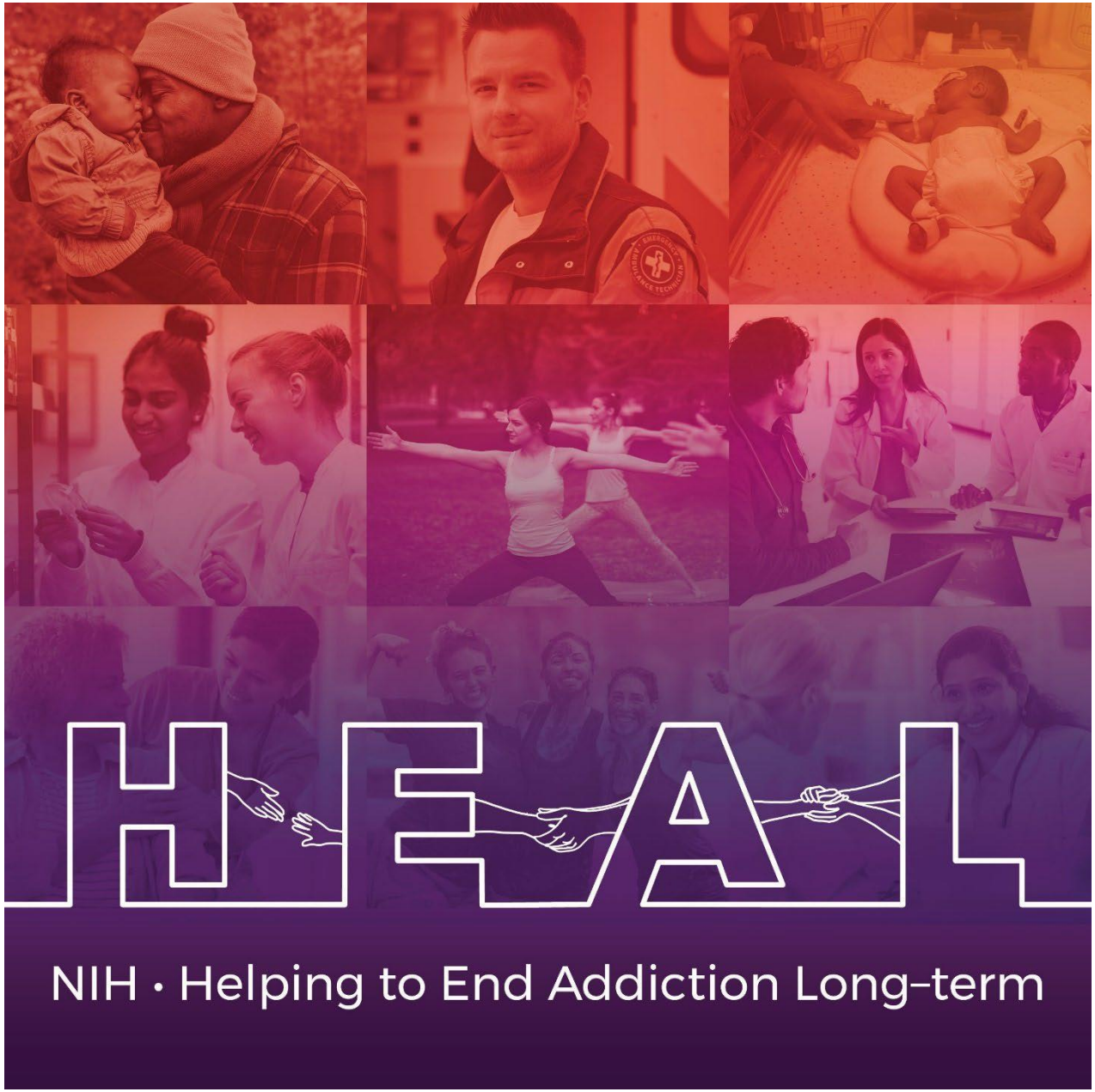
Engaging Health and Justice Practitioners + Individuals with Lived Experience:

JCOIN's Framework for Stakeholder Engagement

Tisha Wiley
National Institute on Drug Abuse

Faye S. Taxman
George Mason University

Jessica Hulsey
Addiction Policy Forum



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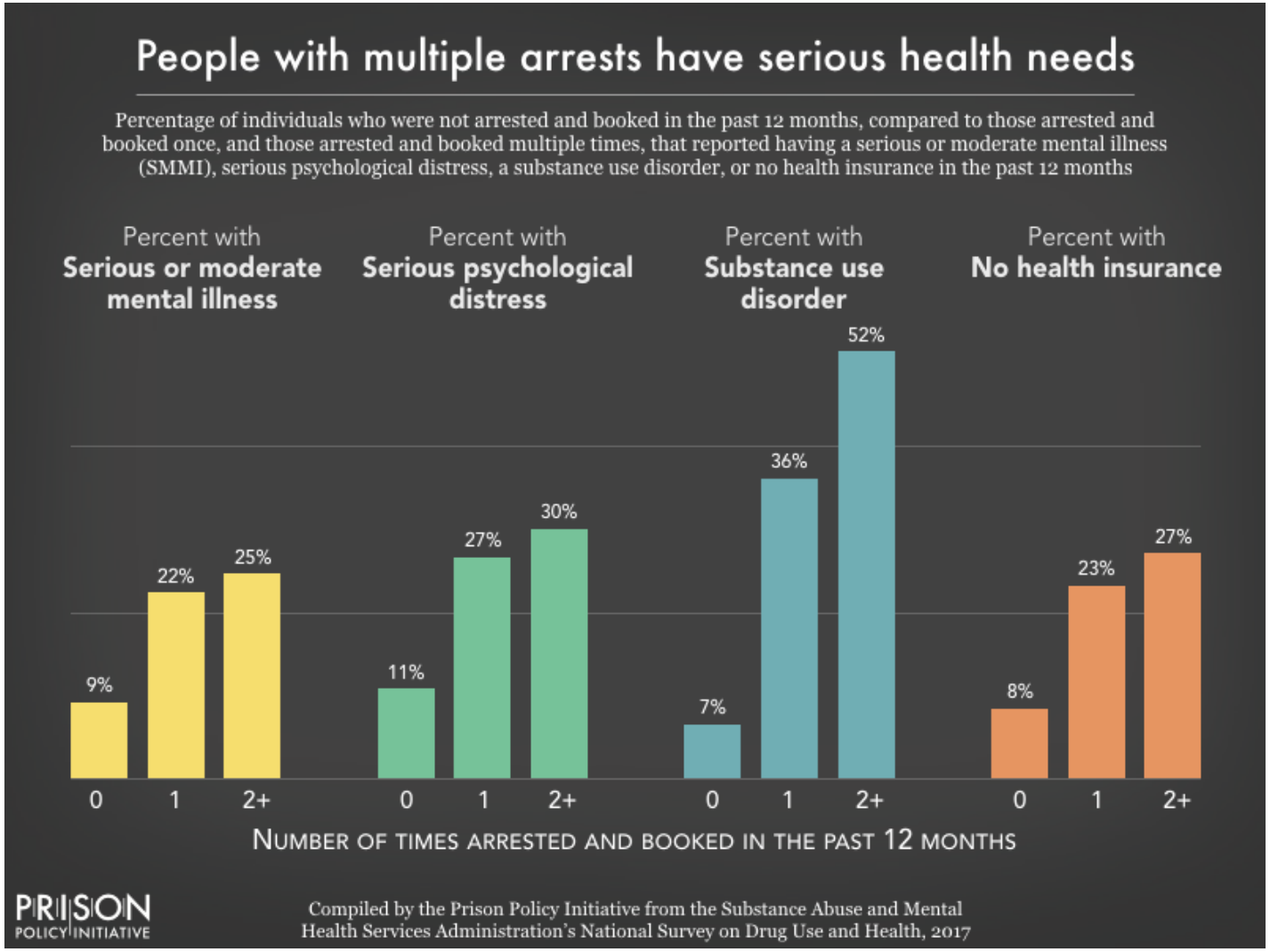
Why focus on the justice system?

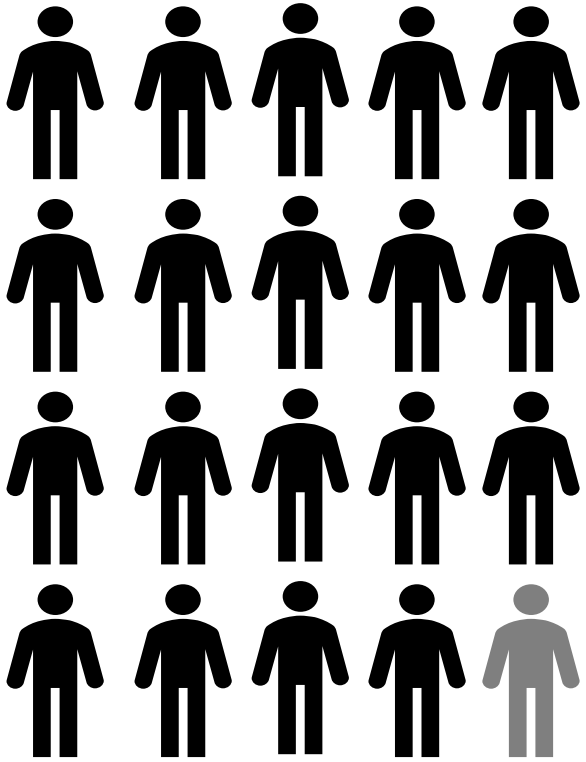
People with Substance Use Disorders Are Disproportionately Represented in the Justice System

63% Of People Serving Sentences in **Jail** Have a SUD

58% Of People in State **Prisons** Have a SUD



Nearly All People Who Pass Through the Justice System Return to the Community



95% Return to the community

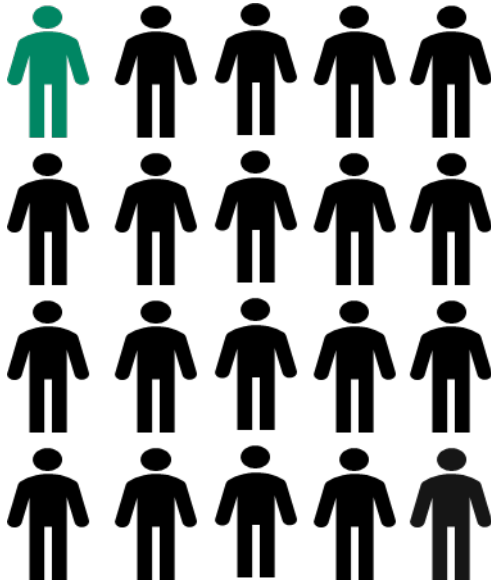
Heightened Risk of Relapse During Reentry.

→ **13-129x** greater fatality risk during the first 2 weeks after release from prison

Providing Medications for Opioid Use Disorders (MOUDS) can **cut mortality by 50 - 80%**

Justice-Involved People Encounter Barriers to Receiving Care Even In The Community

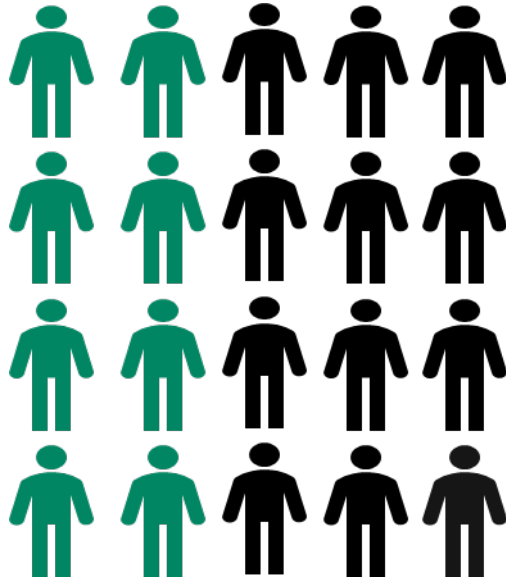
5%



Justice-Referred Adults Received Methadone or Buprenorphine When Referred to Community Treatment

VS.

40%



Non-Justice-Referred Adults Received Methadone or Buprenorphine When Referred to Community Treatment

Source: Krawczyk et al., 2017

Justice Community Opioid Innovation Network (JCOIN):

Reimagining Justice System Responses to Addiction

Launched in 2019
Active Through 2025

NIH HEAL INITIATIVE JCOIN JUSTICE COMMUNITY OPIOID INNOVATION NETWORK

JCOIN Vision & Priority Goals

Vision

Every individual involved in the justice system with a substance use disorder **should have access to effective treatment**, while detained and while in the community.

Priority Goals

- Generate **new evidence** about what works and how to effectively implement

- Develop a **network of researchers collaborating with practitioners** across justice and community-based service settings.

- Become a **go-to resource** for researchers and practitioners

- **Build capacity** to conduct and apply research in justice settings

- Speed translation of **science to solutions** and create feedback loops.

NIH HEAL INITIATIVE
JUSTICE COMMUNITY OPIOID INNOVATION NETWORK (JCOIN)

JCOIN Vision & Structure

Every individual involved in the justice system with a substance use disorder **should have access to effective treatment**, while detained and while in the community.

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Every individual involved in the justice system with a substance use disorder **should have access to effective treatment**, while detained and while in the community.

Goal: Generate **new evidence** about what works and how to effectively implement

- **Accelerator Supplements:** Rapidly awarded (FY18) small grants to address high priority, short-term research questions
- **Clinical Trials:** Provide rigorous evidence through large-scale, multi-site clinical trials
- **Policy Scans, Surveys, Modeling, & Methods Projects:** Complimentary approaches to generating evidence
- **Small grant program, diversity, and administrative supplements:** Rapid turn around & more approachable funding mechanisms in later years

JCOIN Vision & Structure

Every individual involved in the justice system with a substance use disorder **should have access to effective treatment**, while detained and while in the community.

Research

13 Multi-site Clinical Trials

Modeling projects

Policy scans

Public & System Surveys

Accelerator supplements

Diversity & admin supplements

Methods & measures projects

Small grant programs

Special Issue Featuring All Clinical Trials Published in ***Journal of Substance Abuse Treatment*** in 2021

2 STATE POLICY ROLLOUTS

What are the effects of comprehensive MOUDs (buprenorphine, methadone, naltrexone) in jails and drug courts?

7 LINKAGE FACILITATION

How best to support service linkages for MOUDs between justice and community treatment settings (e.g., peer navigation, telehealth, organizational connections)?

2 MOUD COMPARATIVE EFFECTIVENESS

Which long-acting MOUDs work best, for whom, within justice contexts?

2 ORGANIZATIONAL IMPLEMENTATION

Which approaches to implementing evidence-based practices are most effective?

JCOIN Vision & Structure

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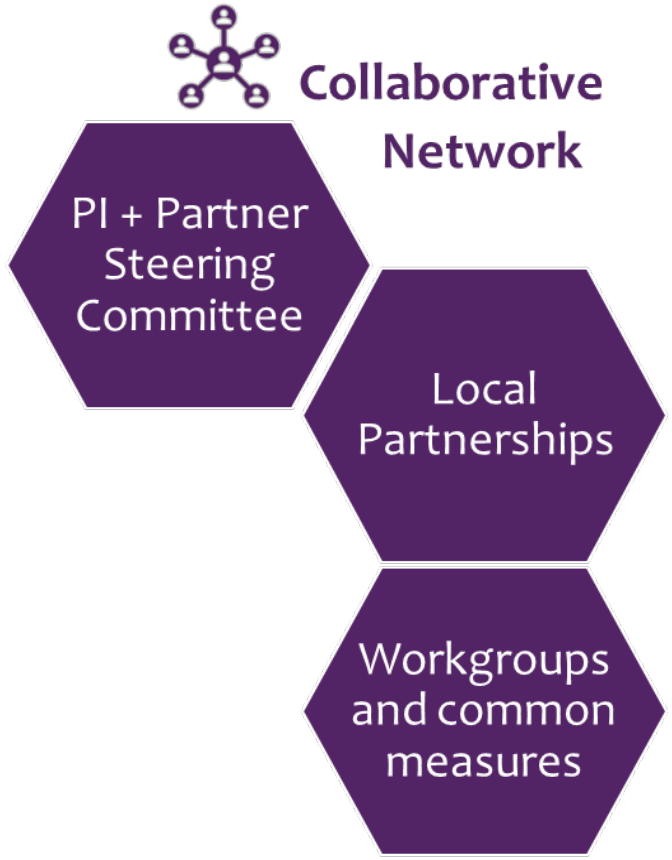

Goal: Develop a **network of researchers collaborating with practitioners** across justice and community-based service settings.

- Cross-Sector work requires cross-sector engagement
- Leadership in both justice and treatment sectors required at **both local and overall study level** –*this needs to be true for every study*
  - Multi-site study required >5 communities because it was critical to **build a national footprint** and show that these interventions worked at scale
- Perspective of community partners critical throughout the entire research process, including at the study design and measure selection phase
- This partnership model can yield unexpected benefits and collaborations

JCOIN Vision & Structure

Every individual involved in the justice system with a substance use disorder **should have access to effective treatment**, while detained and while in the community.

Stakeholder Engagement

Practitioner & Stakeholder Boards

Federal Partners

Goal: Become a **go-to resource** for researchers and practitioners

- Must engage stakeholders at multiple levels
- Must make sure key stakeholders know about the work you are doing
- Must understand the evolving needs in the field
- Must create ways to meaningfully respond to feedback
- Importance of engaging with professional societies

JCOIN Vision & Structure

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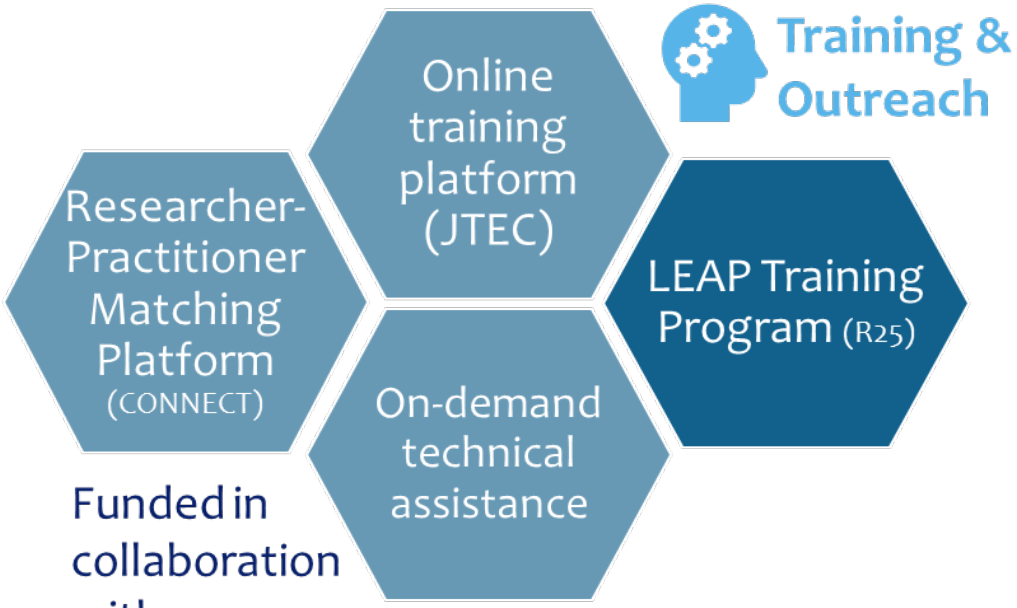


Funded in collaboration with Bureau of Justice Assistance

Goal: Build capacity to conduct and apply research in justice settings

- Capacity building needed among both researchers AND in the field
- Gap in support for people in the field who want to use data but who do not currently have partners
- Researchers can't always find partners
- Important to make materials easy to find and tailored to the needs of particular audiences

JCOIN Vision & Structure

Every individual involved in the justice system with a substance use disorder **should have access to effective treatment**, while detained and while in the community.

Goal: Speed translation of **science to solutions** and create feedback loops.

- Dissemination channels offer key tools for translating research to practice
- Data is critical to disseminate, but only one element—products and tools are also incredibly important
- Create regular channels and engaged audiences for sharing information

JCOIN Vision & Structure

Every individual involved in the justice system with a substance use disorder **should have access to effective treatment**, while detained and while in the community.

JCOIN is much more than the sum of the parts or the metrics we track

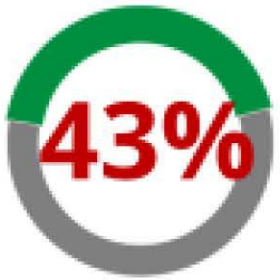
- 65+ Research Protocols
- >15,000 participants enrolled
- 141 counties across 39 states
- >100 publications
- >8000 podcast subscribers
- 34 courses, 18 webinars
- 73 trainees from diverse backgrounds
- And much, much more!

JCOIN: What Have We Learned So Far?

Accelerator supplements

Public & System Surveys

Medications for Opioid Use Disorder in Jails & Prisons Have Become More Common, But We Have A Long Way to Go



In 2020-2021

of jails in communities with high overdose rates offer all 3 MOUDs.

Only 20% offer MOUD to all eligible.

Other Key Findings

- **70% of jails have some aspects of each of the 10 OUD best practices**
- **72% of jails facilitate continuity of care during release**
- The **greatest needs** included: additional funds for MOUD (81%), clinical staff (80%), diversion prevention (76%), transportation to MOUD (65%), and MOUD in the community (61%).

2022-2023 Update Expected Later this Summer/Fall

10 OUD Best Practices

Screening of OUD

Clinical assessment by qualified tx provider

Medically managed withdrawal

MOUD administration

Services for pregnant women

Counseling and wrap-around services

Collaborative relations with community MOUD providers

Assistance with applications for state Medicaid/insurance coverage

Re-entry services

Overdose prevention

Scott, C. K., et al. (2022). Availability of best practices for opioid use disorder in jails and related training and resource needs: findings from a national interview study of jails in heavily impacted counties in the U.S. Health & justice, 10(1), 36. https://doi.org/10.1186/s40352-022-00197-3

JCOIN: What Have We Learned So Far?

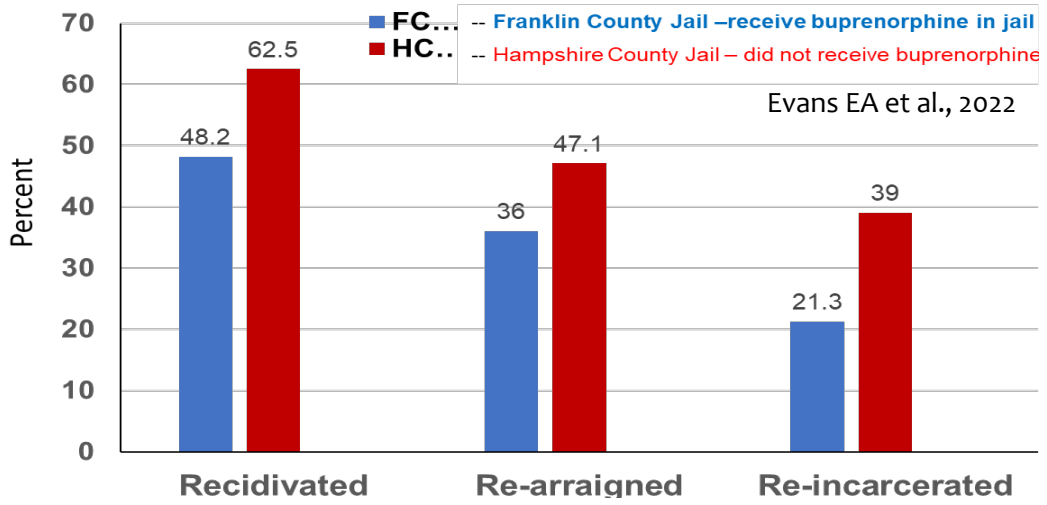
Accelerator supplements

MEDICATIONS AT RE-ENTRY

MOUDs Prior to Release from Jails **Reduce Overdoses** and **Recidivism** and **Shift Costs Away From Emergency Care**

Sources: Evans et al., 2022; Macmadu et al., 2021, Burns et al., 2020, Howell et al. 2021, Hochstatter, 2021 , Lim et al., 2022

Buprenorphine Prior to Release Results in 32% Reduction in Recidivism (Massachusetts)



EXTENDED-RELEASE BUPRENORPHINE MAY PROVE TO BE AN ESPECIALLY VALUABLE TOOL

Extended-release buprenorphine prior to release from jails **increased adherence** and **reduced recidivism,** without increasing diversion or adverse events

Sources: Lee et al. 2021; Evans et al., 2022; Martin et al., in press

JCOIN: What Have We Learned?

Creating Research Actionable Findings & Resources Collaboratively with Our Partners

ELSEVIER

Journal of Substance Use and Addiction Treatment

Volume 146, March 2023, 208943

JSAT

Budget impact tool for the incorporation of medications for opioid use disorder into jail/prison facilities

Danielle A. Ryan [a], Iván D. Montoya [b], Peter J. Koutoujian [c], Kashif Siddiqi [c], Edmond Hayes [d], Philip J. Jeng [a], Techna Cadet [a], Kathryn E. McCollister [b], Sean M. Murphy [a]

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[b] University of Miami Miller School of Medicine, Department of Public Health Sciences, 1120 N.W. 14th Street, Suite 1024, Miami, FL 33136, United States of America

[c] Middlesex House of Corrections and Jail, 269 Treble Cove Rd., North Billerica, MA 01862, United States of America

[d] Franklin County Jail, 160 Elm St., Greenfield, MA 01301, United States of America

MOUD Cost Estimation Tool for Jails

Types of Models	Hired Vendor for Buprenorphine & Methadone				Hired Vendor for Methadone	Become OTP	
Jail Facilities	**Site 1**	**Site 2**	**Site 3**	**Site 4**	**Site 5**	**Site 6**	**Site 7**
Dispensary	X		X			X	X
Renovation					X		
Accreditation License/Fees							
Included in Vendor Contract	?	?	?	?	X		
CARF Accreditation	X	X					
DEA License	X	X				X	X
NCCHC Certification						X	X
MA Bureau of Substance Abuse Services						X	X
MA Department of Public Health						X	X
SAMHSA						X	X
Training							
Data X Waivers					X	X	X
Annual BSAS Training	X	X	?	?	X	?	?
Science of Addiction & Medication for SUD						X	X
Software Installation	X	X	X	?	X		
E-Prescribing						X	X
Meetings	X	X	X	X	X	X	X
Daily Methadone Delivery		X	X	X	X		
Medical Equipment/Supplies	X	X	X	X	X	X	X

JCOIN: What Have We Learned So Far?

Mismatches in Resources/Needs Exist

Home > Resources > JCOIN Opioid/Justice Federal Funding Map

JCOIN Opioid/Justice Federal Funding Map

In fiscal year 2019, US Federal agencies issued an unprecedented number of grants and related funding awards to address the need for opioid-related services for individuals involved in the criminal-legal system. However, there was no consolidated listing of these awards that could provide a "big picture" view of this new funding landscape. With supplementary funding from the Bureau of Justice Assistance, a University of Chicago team led by Dr. Colleen Grogan compiled data on all FY19 and FY20 federal awards in the opioid/justice space. More than 500 awards were identified across 8 distinct Federal agencies or offices. The team verified the data with agency staff, and plotted these awards on a map of the US.

Additional analyses are underway to address such questions as the alignment between funds awarded and the epidemiology of the opioid epidemic.

View the interactive map.

JCOIN Opioid/Justice Federal Funding Map (Click to View)

ELSEVIER

Journal of Substance Use and Addiction Treatment

Volume 150, July 2023, 209064

JSAT

Allocation of federal funding to address the opioid overdose crisis in the criminal legal system

Samantha J. Harris [a], Amanda J. Abraham [b], Felipe Lozano-Rojas [c], Sophia Negaro [d], Christina M. Andrews [e], Colleen M. Grogan [f]

Show more

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https://doi.org/10.1016/j.josat.2023.209064 ↗

Get rights and content ↗

Highlights

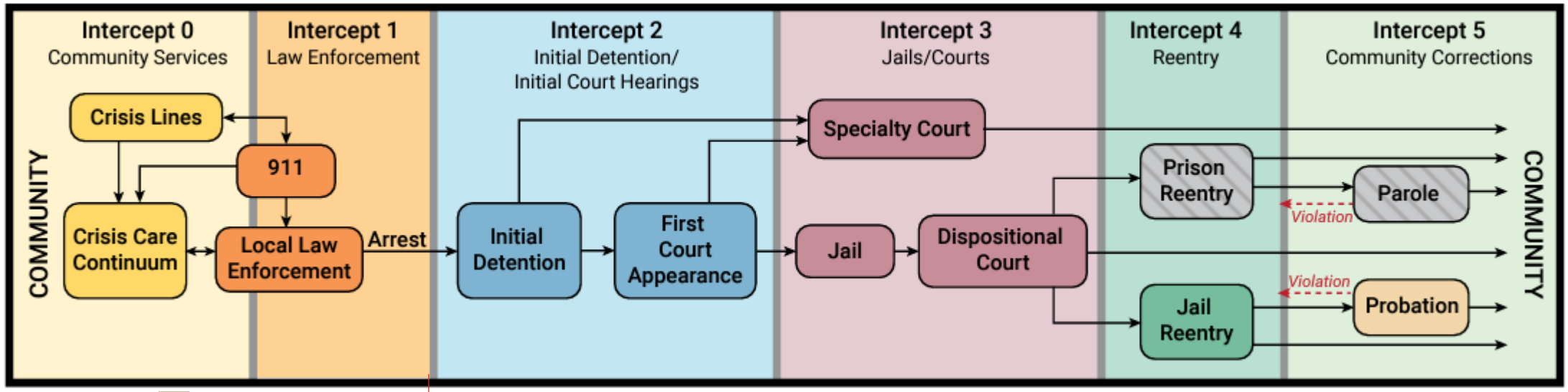
- The opioid overdose crisis continues to disproportionately harm criminal legal system-involved individuals
- Federal funding allocations should be targeted to states with the greatest need
- Over 590 million grant dollars were allocated in FY2019 targeting the

Project Supported Through MOU with Bureau of Justice Assistance

Many Points for Intervention on SUDs

SEQUENTIAL INTERCEPT MODEL

MOUD Policies in Drug Courts



Deflection & Diversion Programs

MOUD Access Post-Overdose

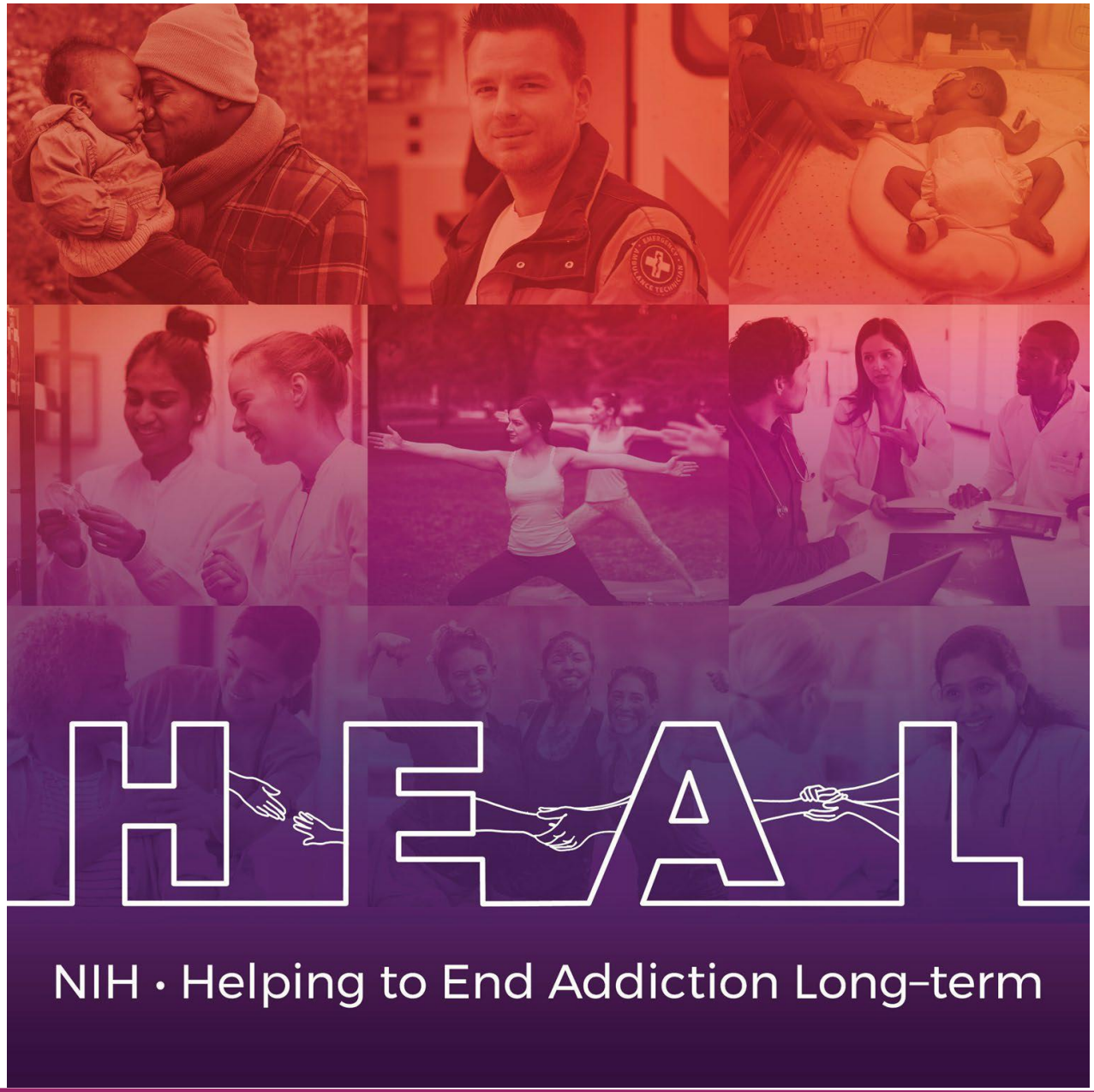
Screening & Continuity of Care At Arrest (e.g., detoxification)

Availability of MOUDs & Other Evidence-Based Treatments In Jails & Prisons

- Continuity of MOUDs at Re-Entry
- Availability of MOUDs in Community
- Naloxone At Re-Entry
- Insurance Availability
- Drug Testing Policies in Probation/Parole

You shouldn't have to go to jail to get treatment

But if you do, you should get evidence-based treatment



CTC
JCOIN Coordination and Translation Center

JCOIN Coordination and Translation Center

Faye S. Taxman

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TASC
Treatment Alternatives for Safe Communities

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Six Cores

- *Administration*
- *Dissemination & Stakeholder*
- *Small Grants (J-RIG)*
- *Implementation Studies*
- *Capacity Building*
- *Outreach & Technical Assistance*

Meaningful Stakeholder Engagement and Collaboration

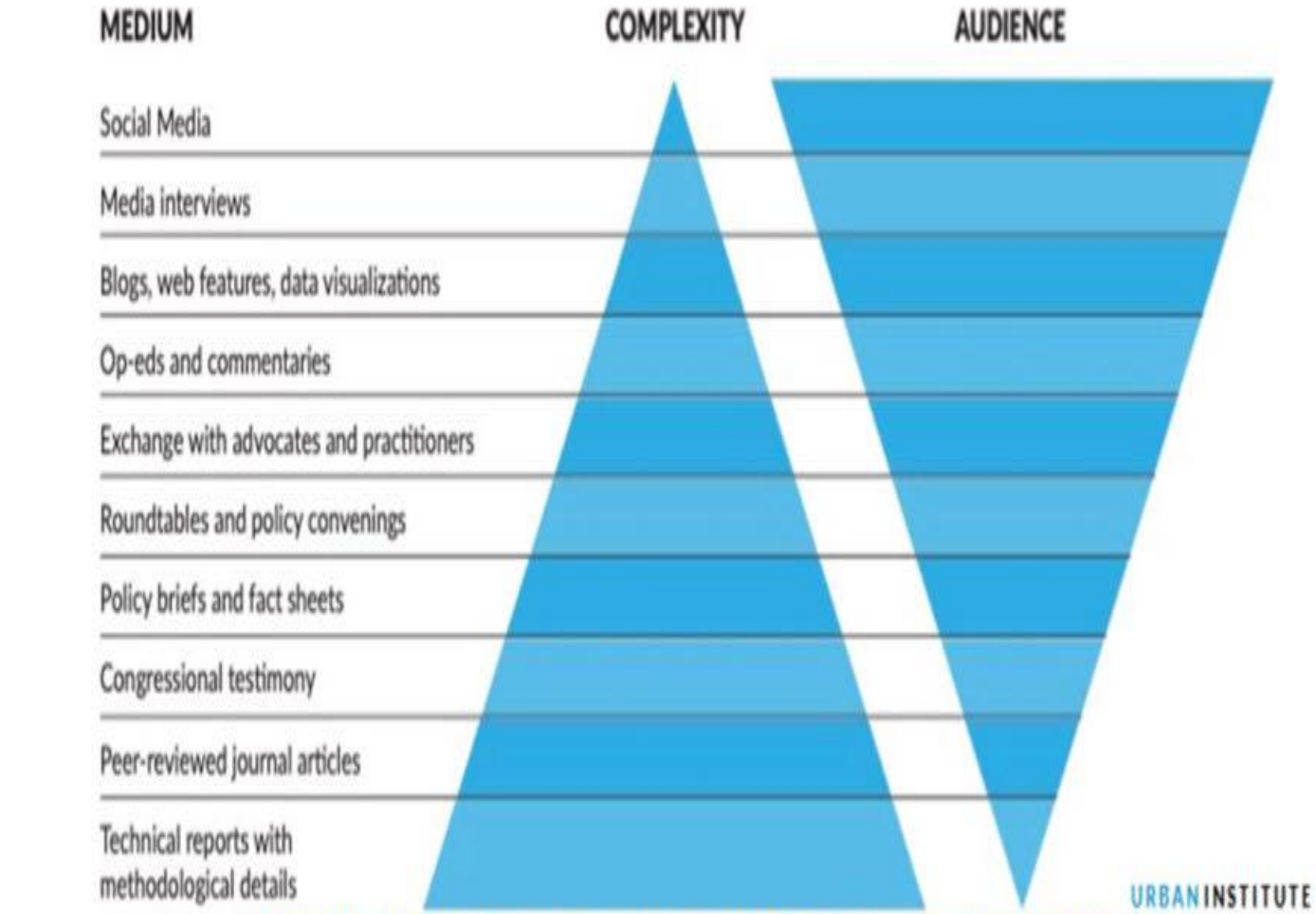
Implementation to Reduce the Translational Gap

Dissemination to Reduce the Translational Gap

Expand Outreach, Capacity Building, and Opportunities

CTC's Methodology

- Each core has a role in:
  - Reach
  - Messaging
  - Partnerships
- Expanded audiences, targeting all levels (front-line to managers)
- Workforce development (academic, practitioners and policy makers)



Schwabish, J. (2019). *Elevate the Debate: A Multilayered Approach to Communicating Your Research*. *Urban Institute*. https://www.urban.org/urban-wire/use-pyramid-philosophy-better-communicate-your-research

Core Functions

Practitioner Board

Key leaders from various fields

Stakeholder Board

Leadership from key associations

Online Courses

Customized to specific practitioners

Speaker Series / Webinars

Feature researcher and practitioner voices

Translate Science

Translation of new research and science in partnership with practitioners

Developing Workforce

Scholars—Practitioners

10 per 1 Year Program

Investigators—Early Career

20 for 2 Year Program

Advancing Knowledge

- Special Studies
- NIATX vs. Coaching
- PCE
- Miscommunication
- Coaching On-Line
- Recovery APP
- Veteran's Court

JCOIN Priority Goals & Components

Research
Generate New Evidence

Collaborative Network
Foundation

Stakeholder Engagement
Science 2 Solutions

Training & Outreach
Build Capacity

Dissemination
Go To Resource

jcoinctc.org

Data Commons

Products & Tools

Newsletter & Partner Portal

News

Study Identifies Key Barriers and Facilitators for Medications to Treat Opioid Use Disorders in U.S. Jails

Findings from JCOIN's Chestnut Health Systems Clinical Research Center

Transitioning to the community following incarceration is a particularly high risk for individuals with opioid use disorder (OUD), especially during the first two weeks of release. Substantial evidence shows that initiating medications for opioid use disorder (MOUD) during incarceration and continuation after release reduces the risk of overdose death, recidivism, and adverse health and social outcomes.1-3 Jails can play a pivotal role in addressing OUD by providing continuity of MOUD treatment and care in the community. However, many barriers prevent the widespread adoption of evidence-based OUD treatment practices in justice settings.

A recent study by Drs. Christy Scott, Christine Grella, Michael Dennis and their team at Chestnut Health Systems identified significant barriers and facilitators that impede access to MOUD in U.S. jails. Structured interviews were completed between December 2019 and February 2021 with representatives from 185 jails in counties that the opioid epidemic has most heavily impacted. Selected counties accounted for half of all opioid-related deaths nationally and had significantly higher rates of opioid-related overdose deaths per 100,000 people than the U.S. overall.

Download the Fact Sheet (PDF)

News

Budget Impact Tool to Help Estimate Costs of Providing Medications to Treat Opioid Use Disorder in Jails/Prisons

Join us on June 9, 2023, at 11:30 a.m. Eastern for a webinar that will discuss the budget impact tool, how it works, and how it can be utilized by practitioners who work in correctional settings. To register for the webinar, click here.

Despite the evidence that providing medications for opioid use disorder (MOUD; i.e., methadone, buprenorphine, and naltrexone) at the point of incarceration and during reentry reduce the risk of overdose death, decrease recidivism rates, and improve the well-being of the individual, financial and administrative limitations in jail/prison healthcare often serve as barriers to this recommended first-line treatment for OUD. In fact, evidence indicates that more than 80% of incarcerated individuals with a history of OUD do not receive life-saving medications during their stay.

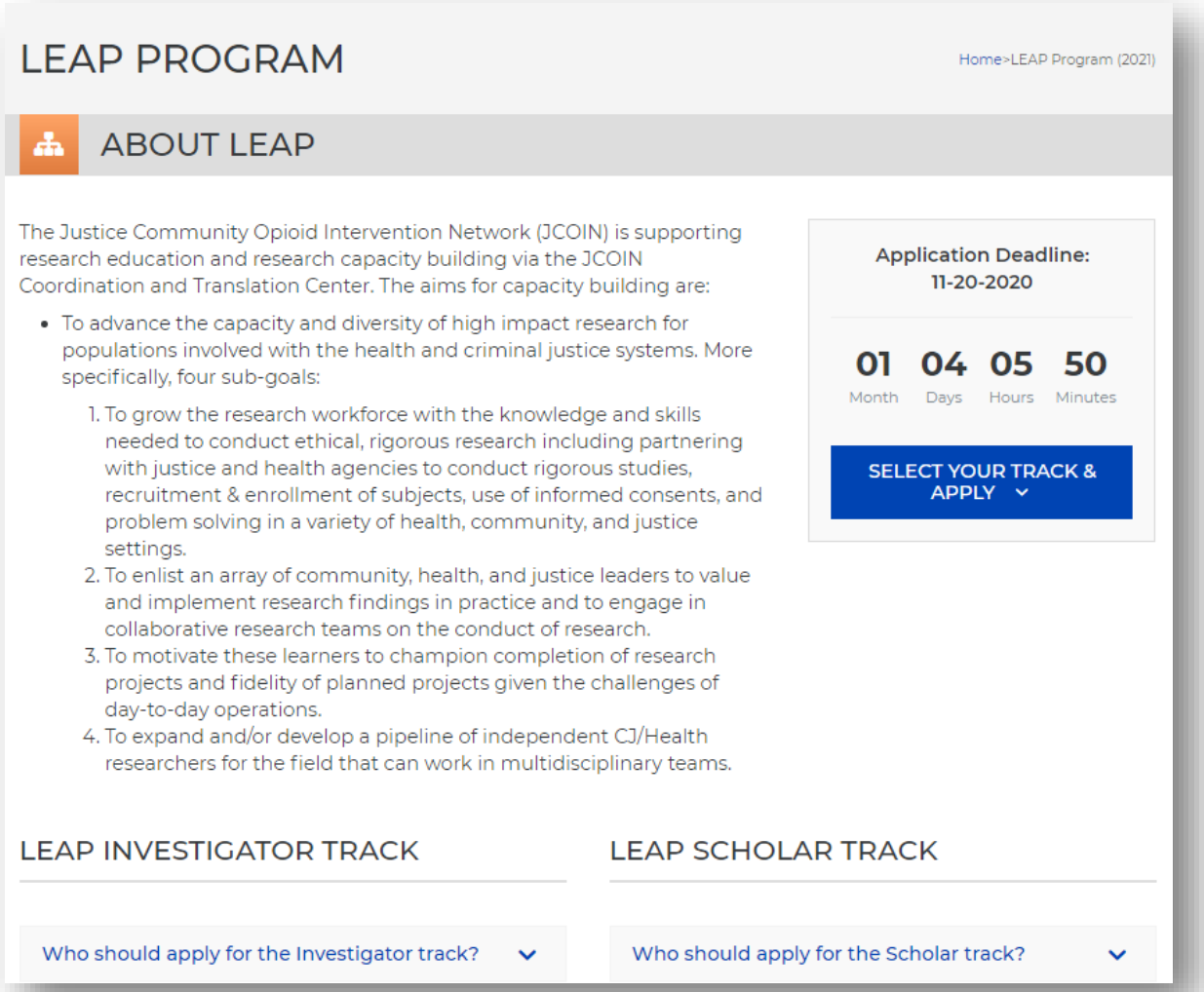
Fortunately, there has been a substantial increase in the number of jails and prisons offering MOUD in recent years. This trend can be attributed to both the initiative of individual facilities and state legislation mandating the provision of MOUD. However, the resources and associated costs required to implement MOUD programs in jails and prisons can vary widely depending on the availability of services and the chosen delivery model.

Register for the webinar

Build Capacity:
Learning Experiences to Advance Practice (LEAP)

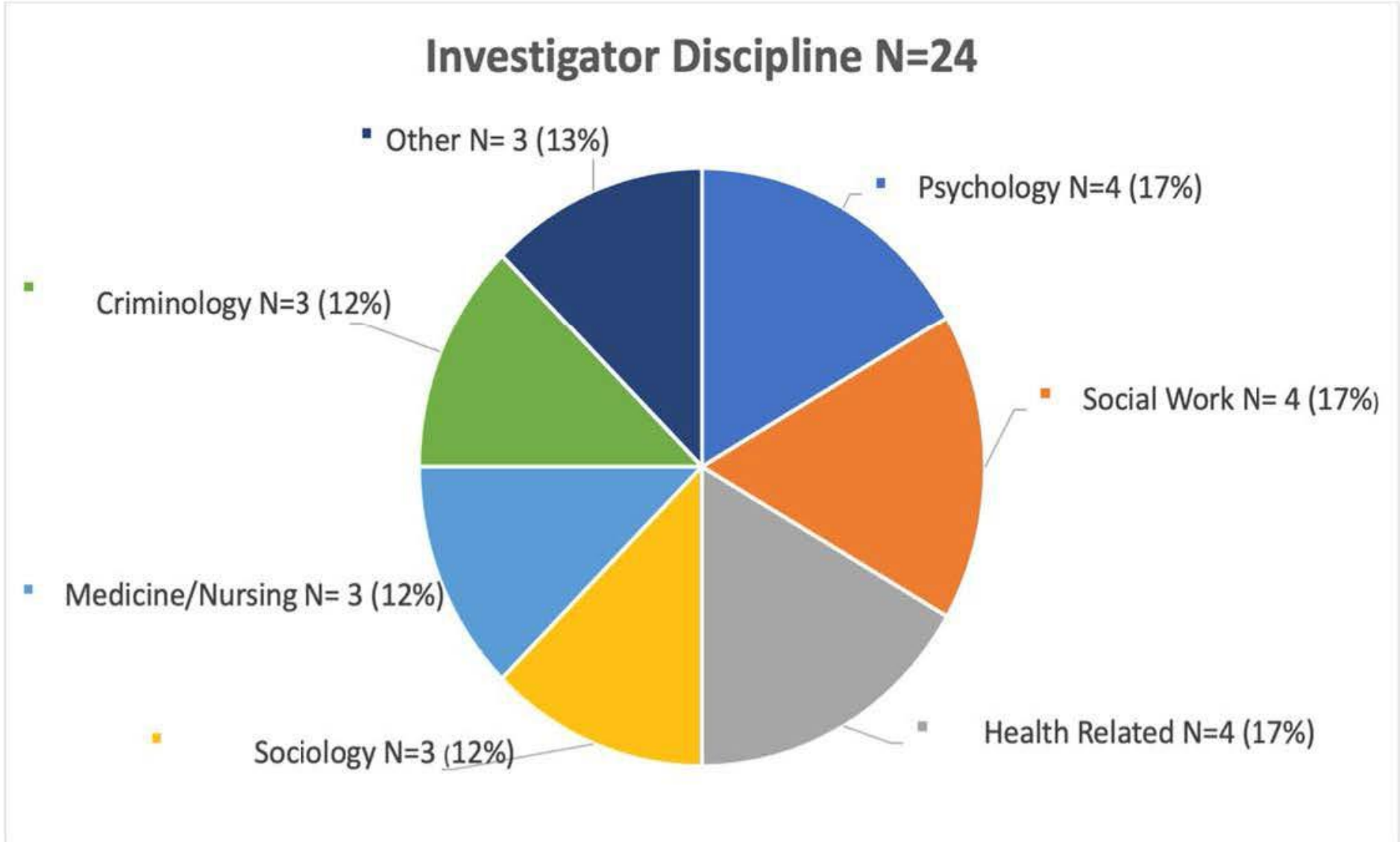
- Scholar Track (1 year)
- Investigator Track (2 years)
- Multidisciplinary Training Cohort
- Trained Scholars from Various Disciplines
- 36.4% Scholars are minorities
- 33.3% of Investigators are minorities

jcoinctc.org

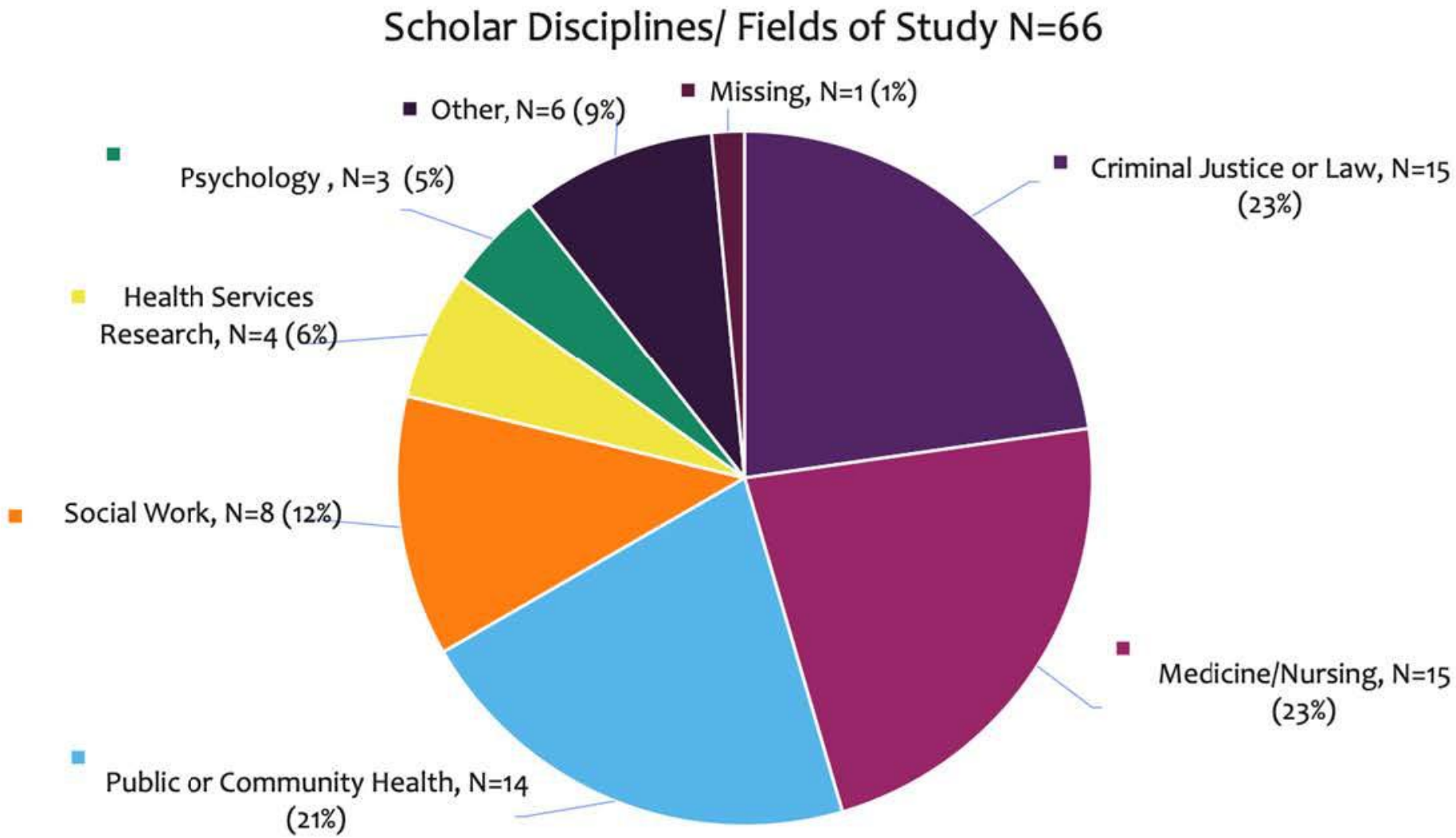


Direct Questions to Warren Ferguson (Warren.Ferguson@umassmemorial.org)

LEAP Investigator Disciplines



LEAP Scholar Demographics

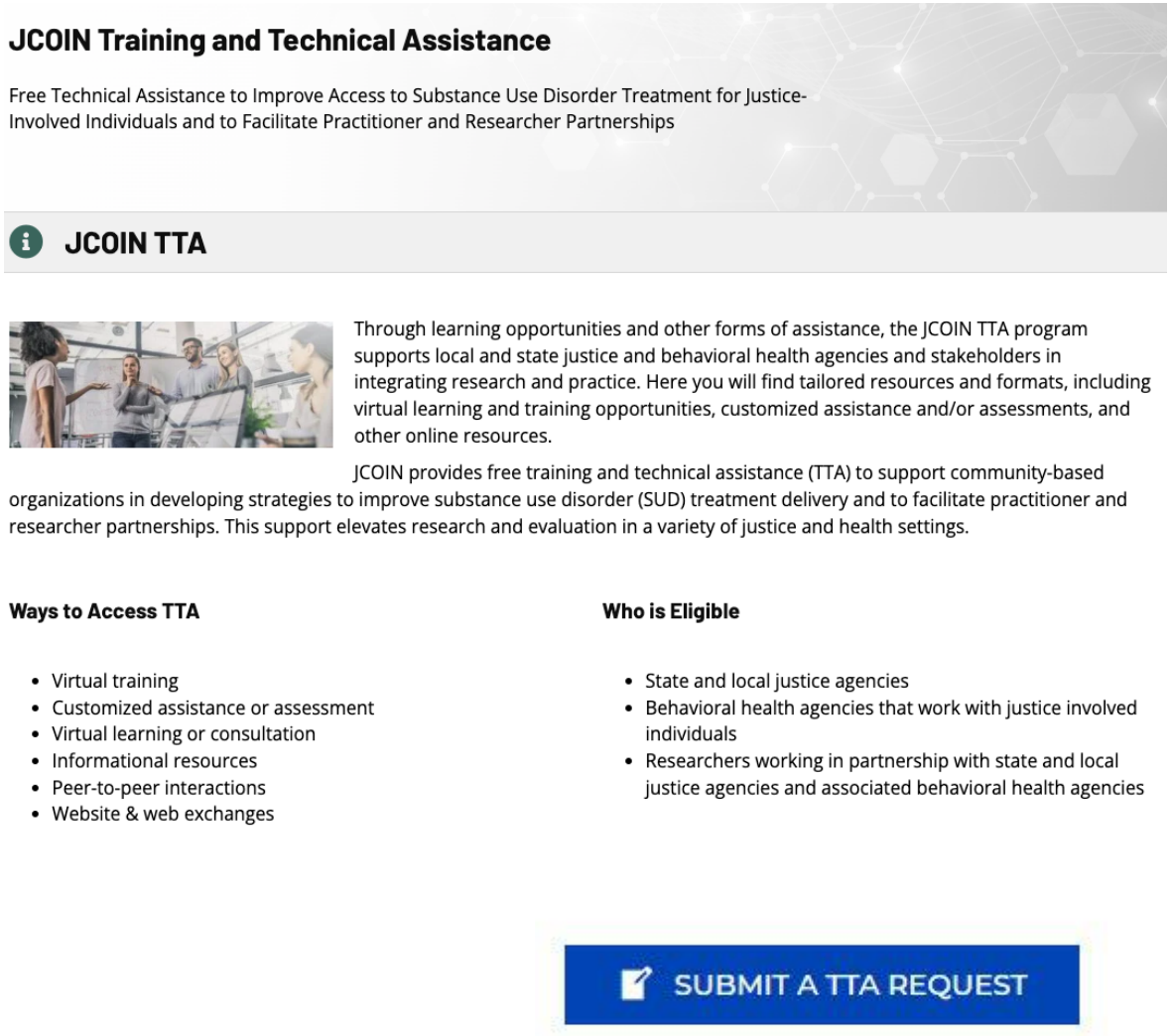


NIH HEAL INITIATIVE
JUSTICE COMMUNITY OPIOID INNOVATION NETWORK (JCOIN)

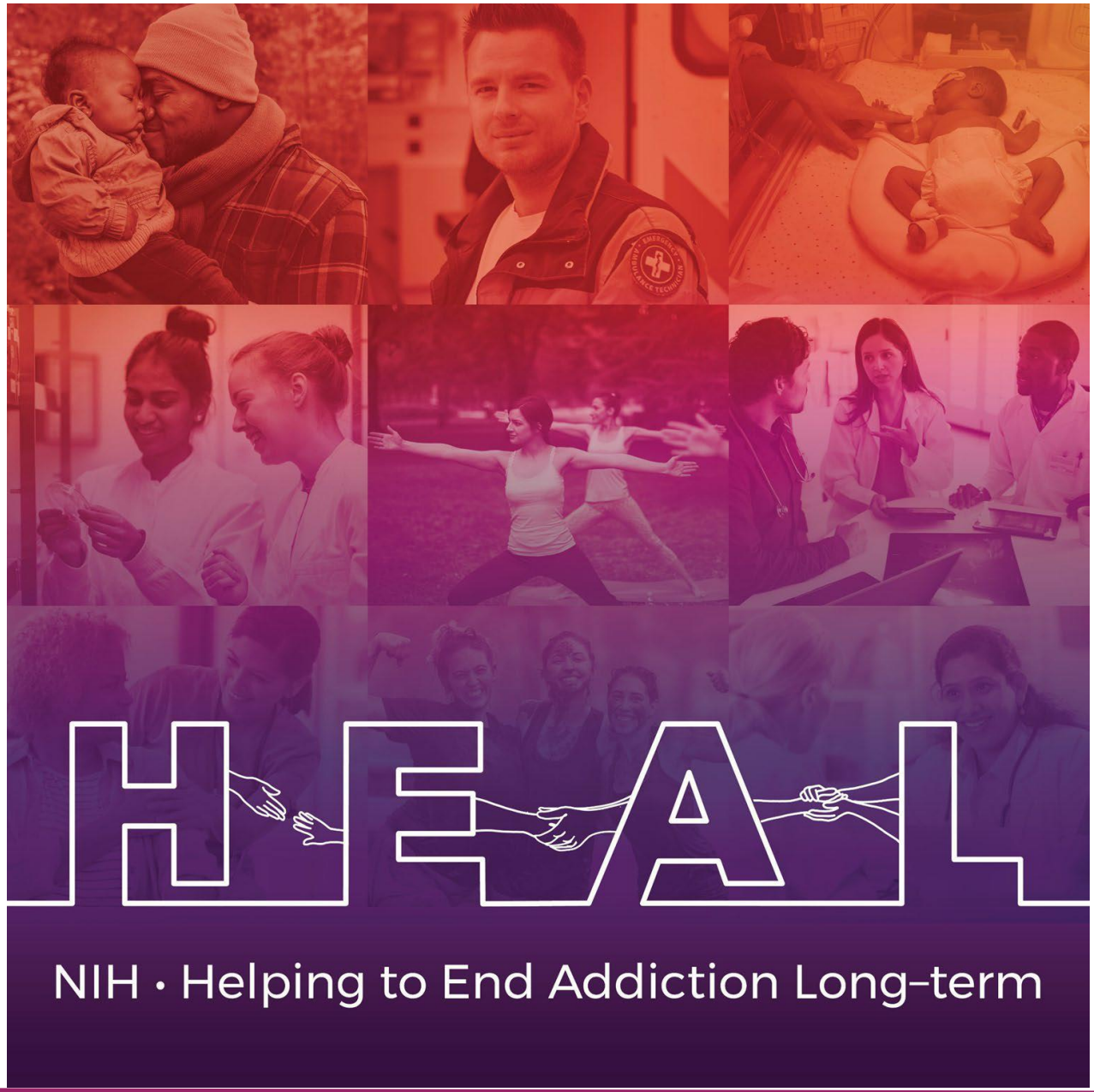
Build Capacity:
On-Demand Technical Assistance

- Tailored support and resources to assist **with research and evaluation efforts** at the state & local levels
- Support can be offered to:
  - State and local justice agencies
  - Behavioral health agencies
  - Researchers working in partnership with local agencies

Direct Questions to tta@jcoinctc.org.



Funding for this effort provided by the Bureau of Justice Assistance.



CTC

JCOIN Coordination and Translation Center

JCOIN Dissemination and Stakeholder Engagement

Jessica Hulsey

NIH HEAL Initiative and Helping to End Addiction Long-term are service marks of the U.S. Department of Health and Human Services.

JCOIN Dissemination and Stakeholder Engagement Core (DSEC): Goals

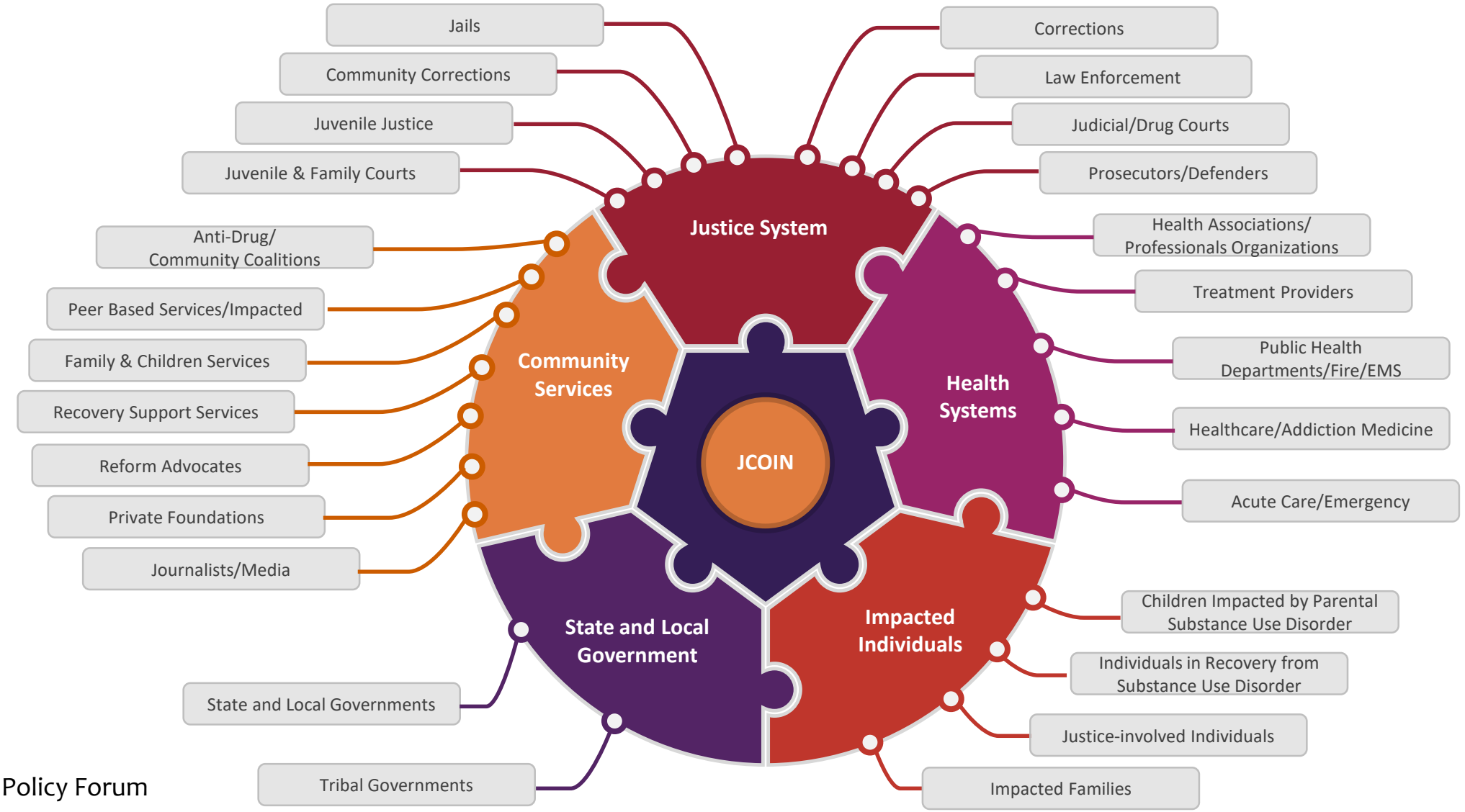
Framework for Stakeholder Engagement:
5 Key Components

1 Audience Identification	2 Build Stakeholder Framework	3 Bi-Directional Communication	4 Tailored Knowledge Translation	5 Track Engagement

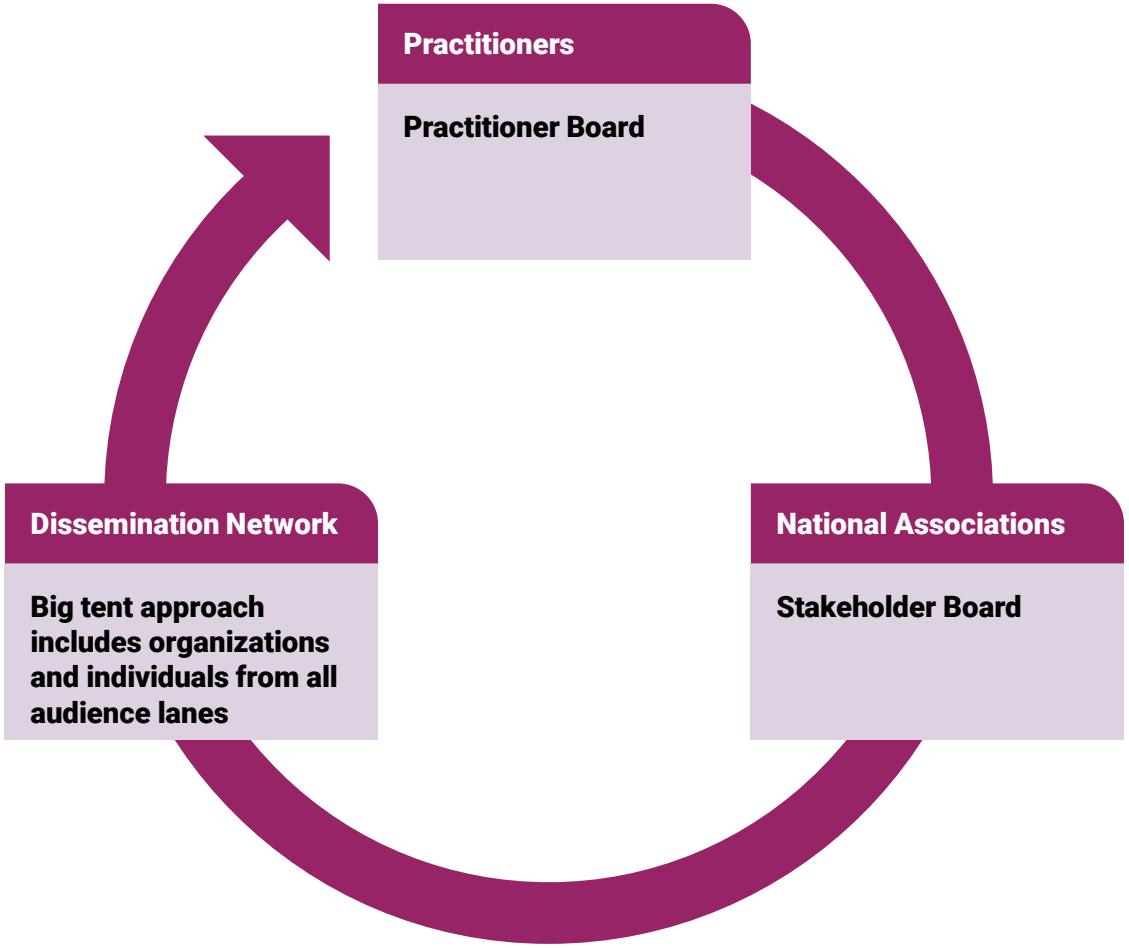
• Identify audience lanes
• Bring key champions, patients and/or national associations to the table
	• Mechanisms for engagement
	  ○ advisory board
	  ○ panels
	  ○ dissemination networks
	  ○ Interviews and listening sessions
		• Feedback loops
		• Meaningful input and response; 0% tokenism
			• Knowledge translation, tailored to each specific audience
			• Collect feedback from intended audience; incorporate
				• Measure engagement across all identified audiences

1. Audience Identification

Engagement and network building for **26 distinct audiences**



2. Framework Composition: JCOIN Platform



2. Framework Composition: Practitioner Board

Membership

Duane Slone, Circuit Court Judge Tennessee State Courts

Dennis Deer, Commissioner, 2nd District, Cook County Board of Commissioners

Glenn Tapia, Division Director, Probation Services, Colorado Office of the State Court Administrator

Sarah Vinson, Psychiatrist, Lorio Psych Group

Jonathan Blodgett, District Attorney, Essex District Attorney's Office

Debora Black, Prescott Chief of Police (ret.), Licensed Counselor

John Wetzel, Former Secretary of Corrections, Pennsylvania Department of Corrections

Doug Bond, Chief Executive Officer, Amity Foundation

Bruce Chase, Assistant Sheriff, Los Angeles County Sheriff's Department

Brian Fuehrlein, Director, Psychiatric Emergency Room, VA Connecticut Healthcare System

Carrie Hill, Executive Director, Massachusetts Sheriffs' Association

Danielle Schlosser, SVP, Clinical Innovation, Compass Pathways

Erika Preuitt, Deputy Director, Multnomah County Department of Community Justice

Brent Gibson, Chief Health Officer, National Commission on Correctional Health Care

Steven Leifman, Associate Administrative Judge, Miami-Dade County Court, 11th Judicial Circuit of Florida

Kenneth Stoller, Director, Johns Hopkins Broadway Center for Addiction, The Johns Hopkins University School of Medicine

2. Framework Composition: Stakeholder Board

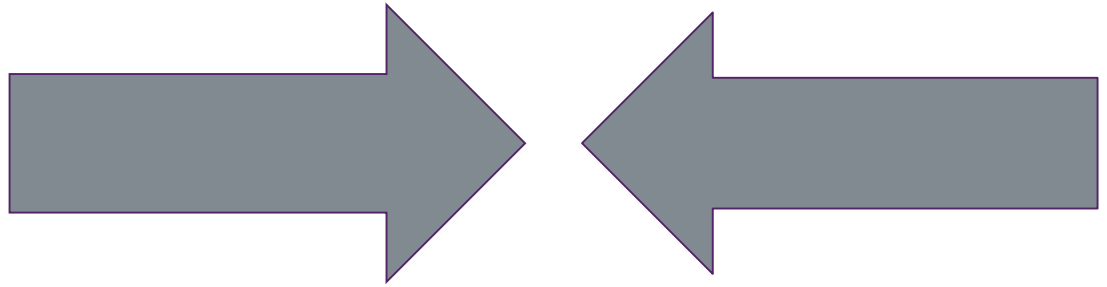
Comprised of over **70 associations** represented across the continuum.

- Justice Systems
  - Correctional Leaders Association (CLA)
  - PAARI – Police Assisted Addiction Recovery Initiative
- Health Systems
  - AATOD – American Association for the Treatment of Opioid Dependence, Inc.
  - AAAP – American Academy of Addiction Psychiatry – Translating Science. Transforming Lives.
- Community Services
  - TCA – Treatment Communities of America
  - Faces & Voices of Recovery
- Lived Experience
  - APAA – Association of Persons Affected by Addiction
  - JLUSA
- State/Local Governments
  - National Association of Counties (NACo)
  - CSG Justice Center

3. Bi-Directional Communication

Groundwork

- Communications preferences
- Product preferences and formats
- Frequency
- Language, terminology, accessibility
- Trusted messenger. Who is facilitating?



Two Way

- Information from stakeholders, not just to them
- Understand Barriers/Challenges/Needs of the field
- Rapid feedback and product testing before dissemination

Value Proposition

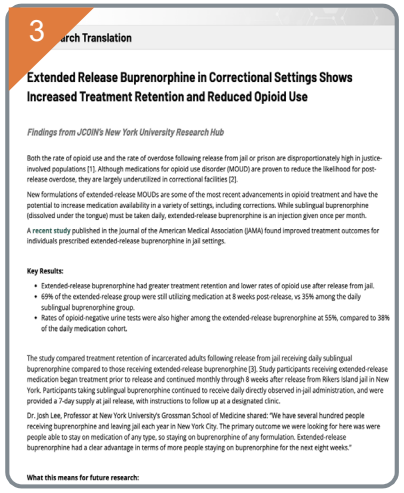
- What do they stakeholders get out of this?
- Is it meaningful? No tokenism.

Addiction Policy Forum

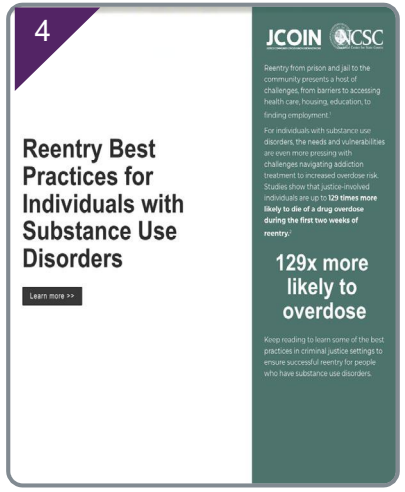
4. Tailored Knowledge Translation:
Types of Products

Tier 1
Share Journal Article/Newsletter

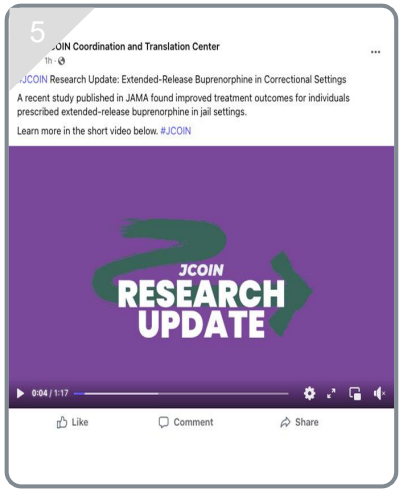
Tier 2
Translation for Social Media
Addiction Policy Forum



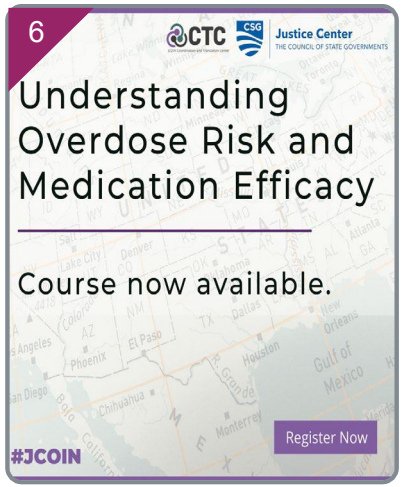
Tier 3
Layperson Summary



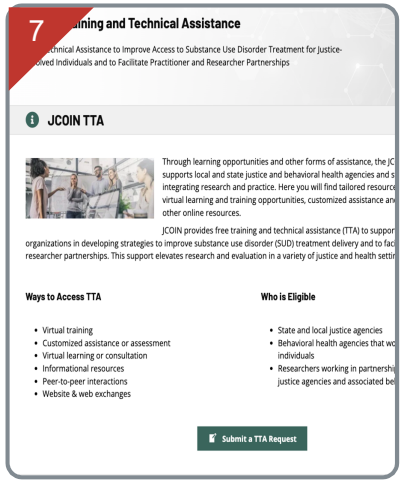
Tier 4
Layperson Summary for Partner Organizations



Tier 5
Video Explainer/ Animation / Expert Interview



Tier 6
Training (eCourse/In-Person)



Tier 7
Technical Assistance

4. Tailored Knowledge Translation:
Reentry Risks Video Explainer

Science

SPECIAL ARTICLE

Release from Prison — A High Risk of Death for Former Inmates

Ingrid A. Binswanger, M.D., Marc F. Stern, M.D., Richard A. Deyo, M.D., Patrick J. Heagerty, Ph.D., Allen Cheadle, Ph.D., Joann G. Elmore, M.D., and Thomas D. Koepsell, M.D.

Article | Figures/Media

26 References 990 Citing Articles Letters

January 11, 2007
N Engl J Med 2007; 356:157-165
DOI: 10.1056/NEJMsa064115

+

ADDICTION | SSA SOCIETY FOR THE STUDY OF ADDICTION

RESEARCH REPORT

The impact of opioid substitution therapy on mortality post-release from prison: retrospective data linkage study

Louisa Degenhardt, Sarah Larney, Jo Kimber, Natasa Gisev, Michael Farrell, Timothy Dobbins, Don J. Weatherburn, Amy Gibson, Richard Mattick, Tony Butler, Lucy Burns

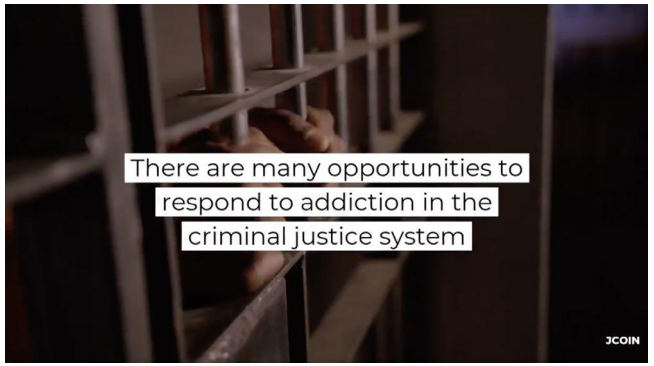
First published: 11 March 2014 | https://doi.org/10.1111/add.12536 | Citations: 136

Audiences

- Criminal Justice
- Health Systems
- Impacted Individuals
- Community Services
- Policy Makers

Product Development

Video Explainer: Reentry Risks for Justice-Involved Individuals with Opioid Use Disorder



Product Testing

Test Kitchen

Dissemination

Assoc. Partners

CLA Correctional Leaders Association

CSG Justice Center

JLUSA

American Jail Association

+

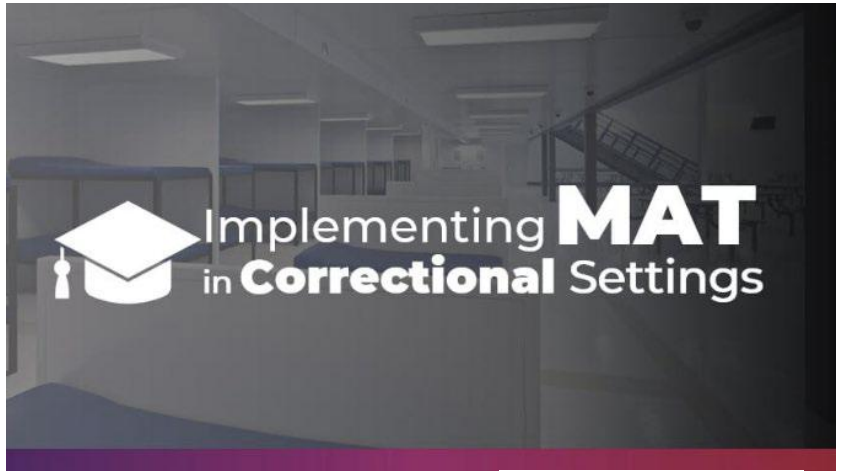
Multi-Channel Dissemination

Addiction Policy Forum

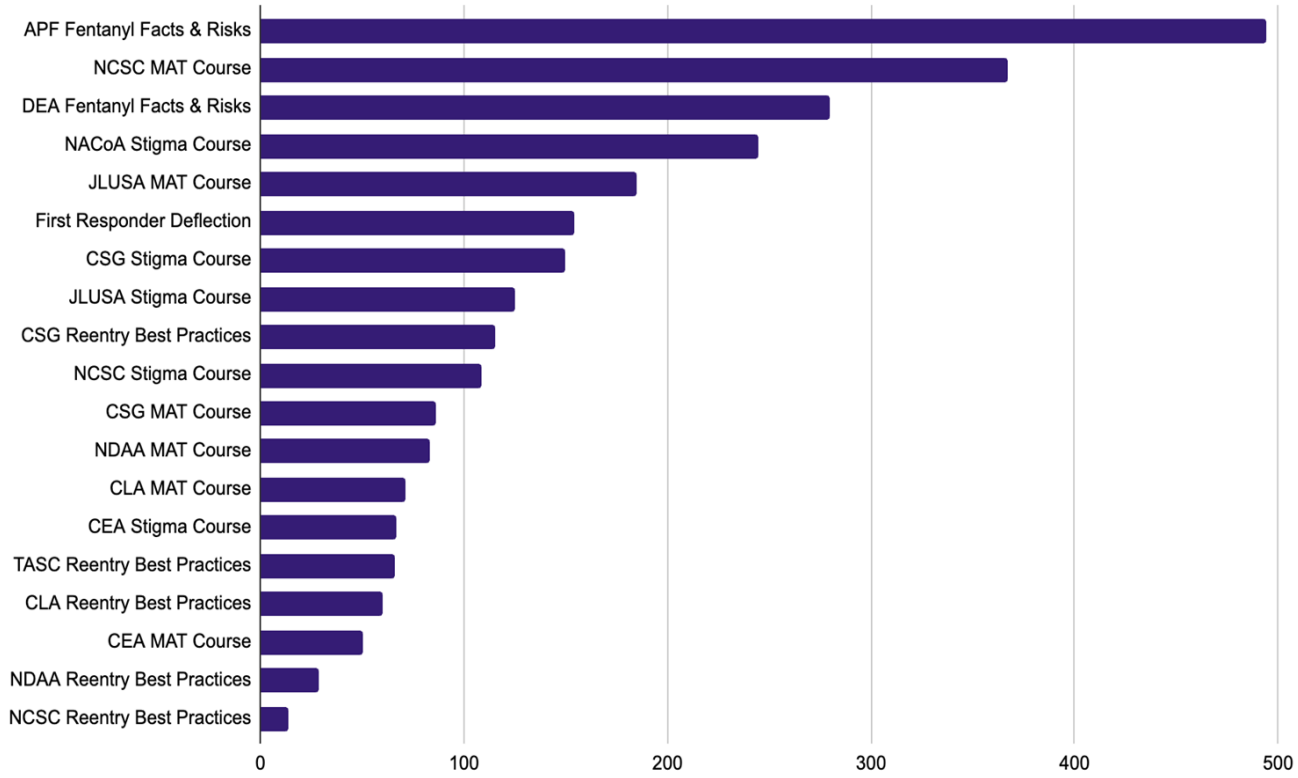
4. Tailored Knowledge Translation:
Practitioner eCourses

2,750
Course Completions by Stakeholders

MOUD



Stakeholder eCourses 2.7K

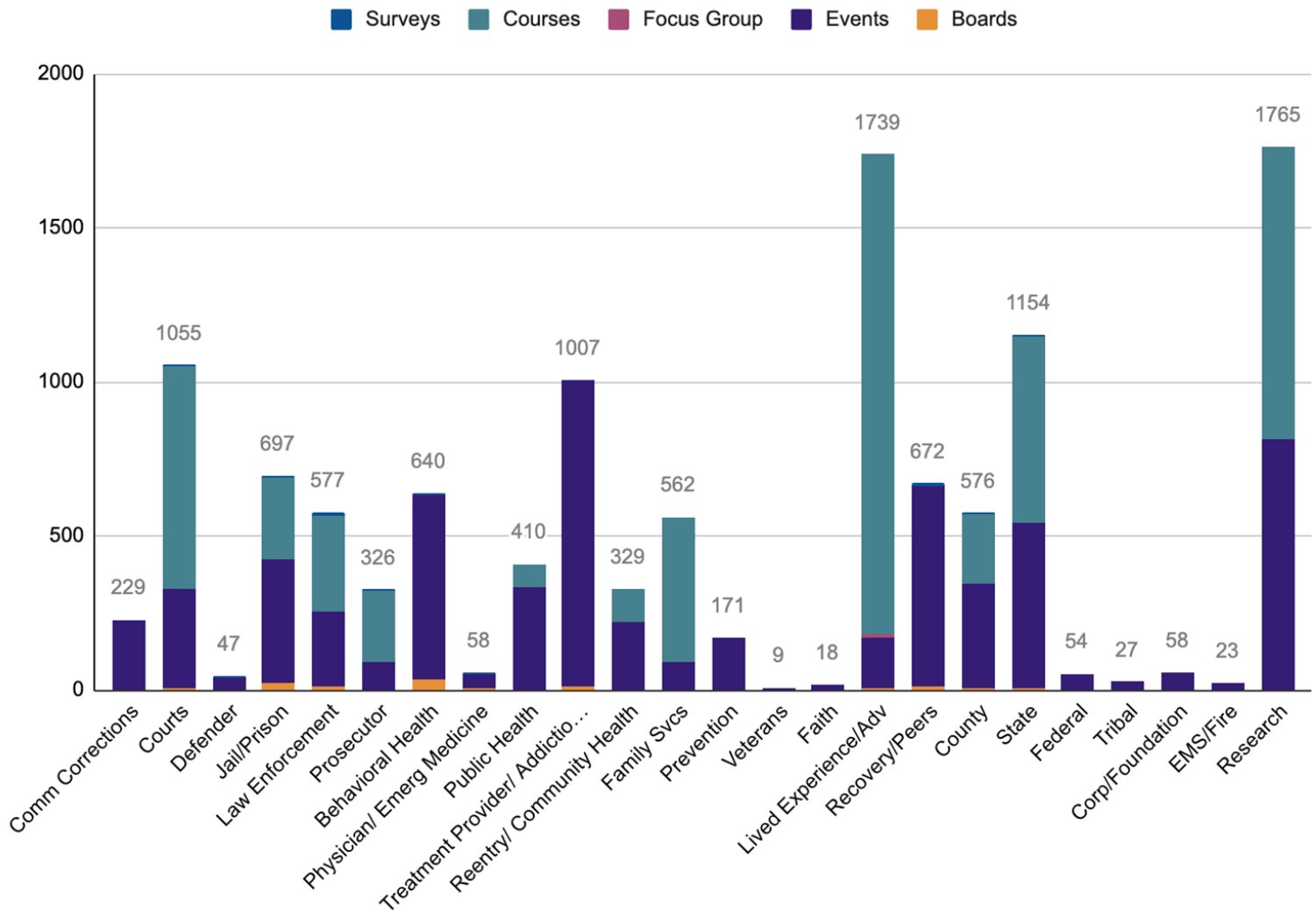


5. Track Engagement

Over 12,000 Stakeholders Engaged

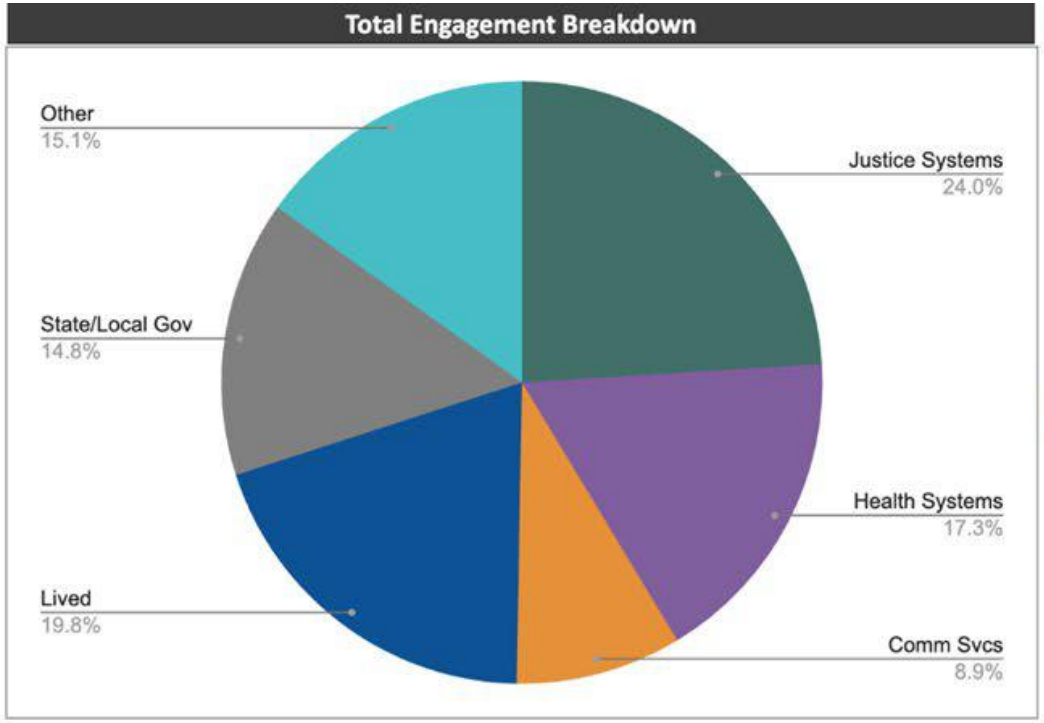
Top 5 stakeholder audiences engaged:

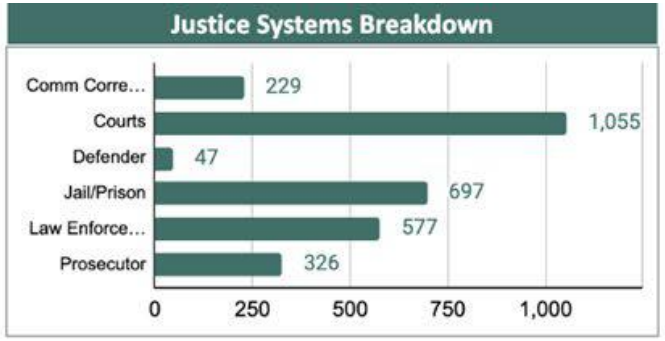
1. Lived Experience
2. State government
3. Courts
4. Treatment Proivders
5. Jails/Prisons

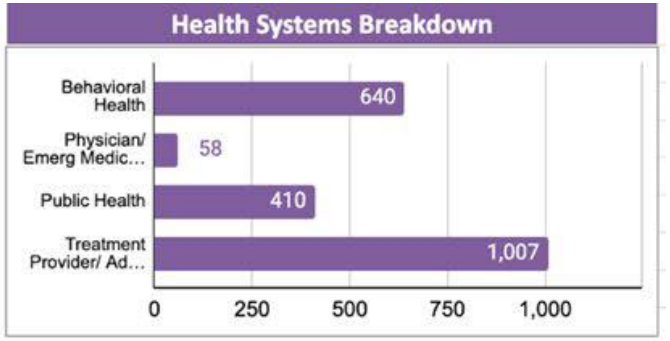


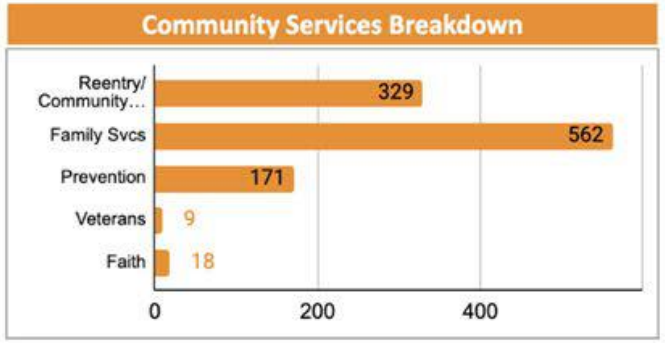
JCOIN Stakeholder Engagement by Audience

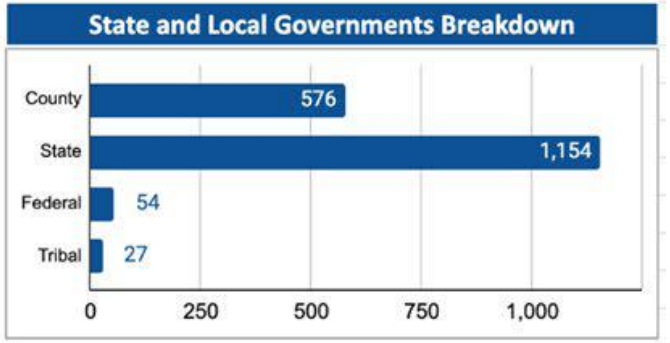
12,203







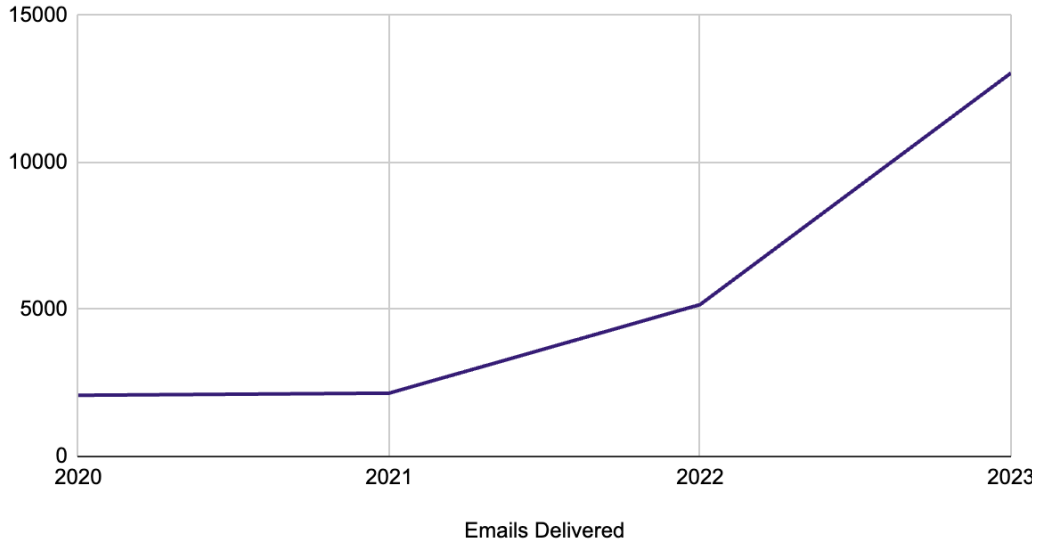




JCOIN Email, Events, Website and Social Media Metrics

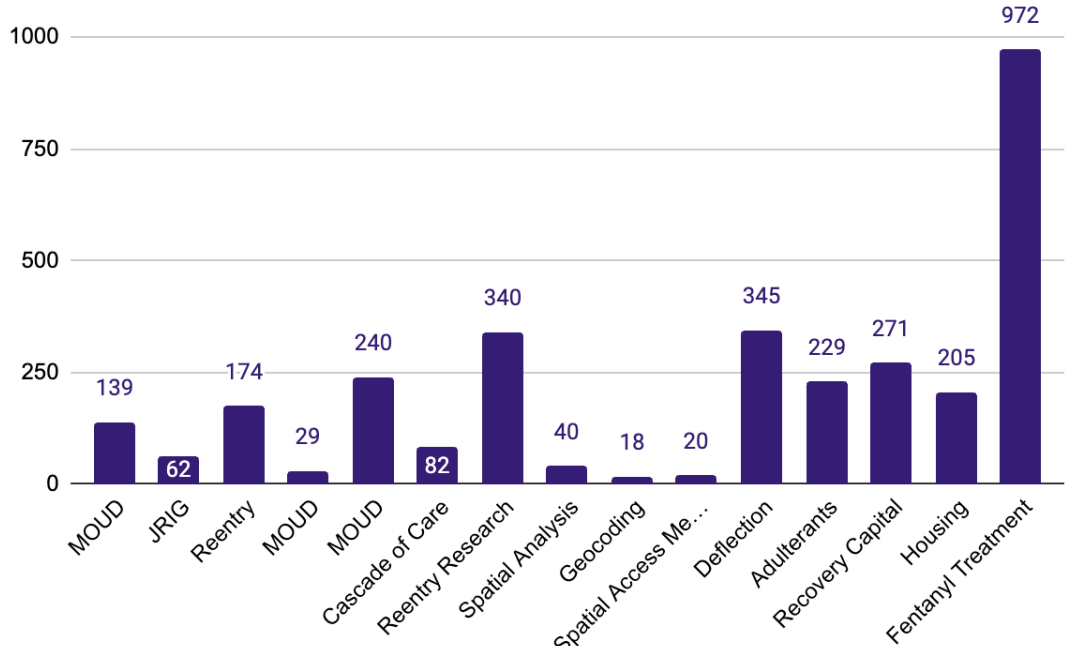
Emails Delivered

22K



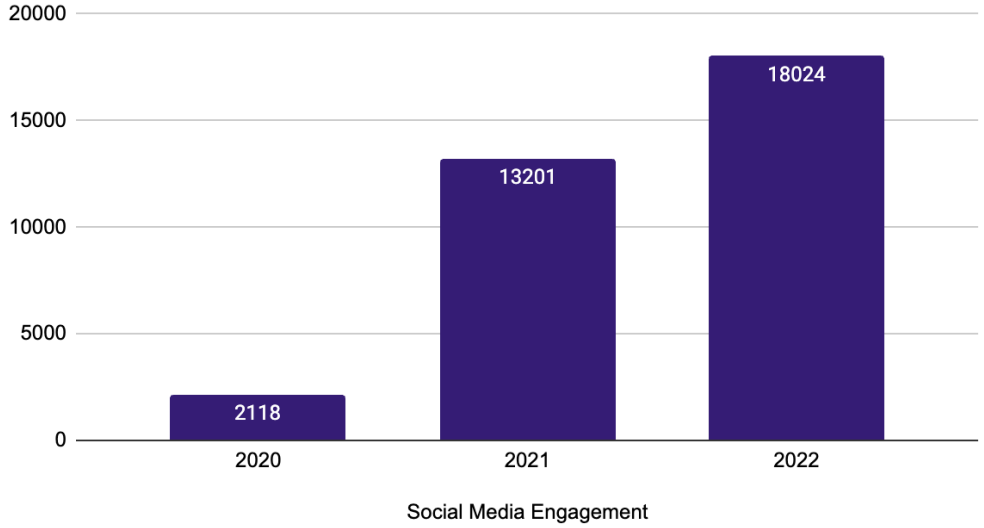
Events and Webinars

3K



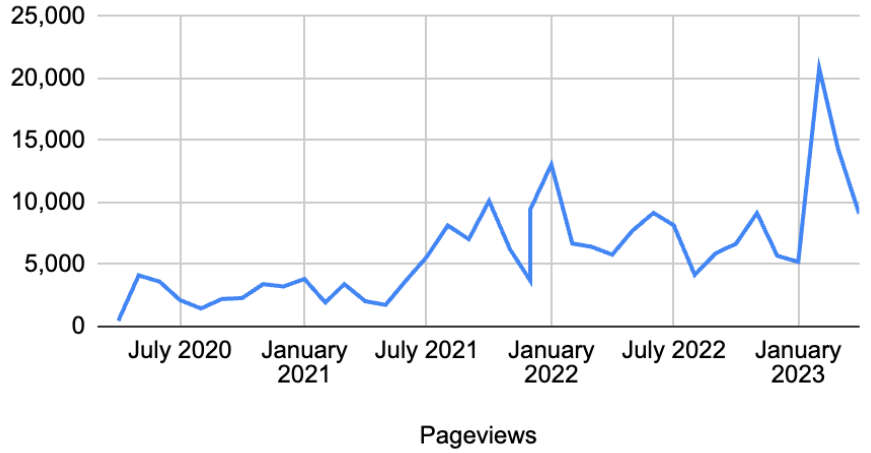
Social Media Engagement

33K



Pageviews Historical

227K

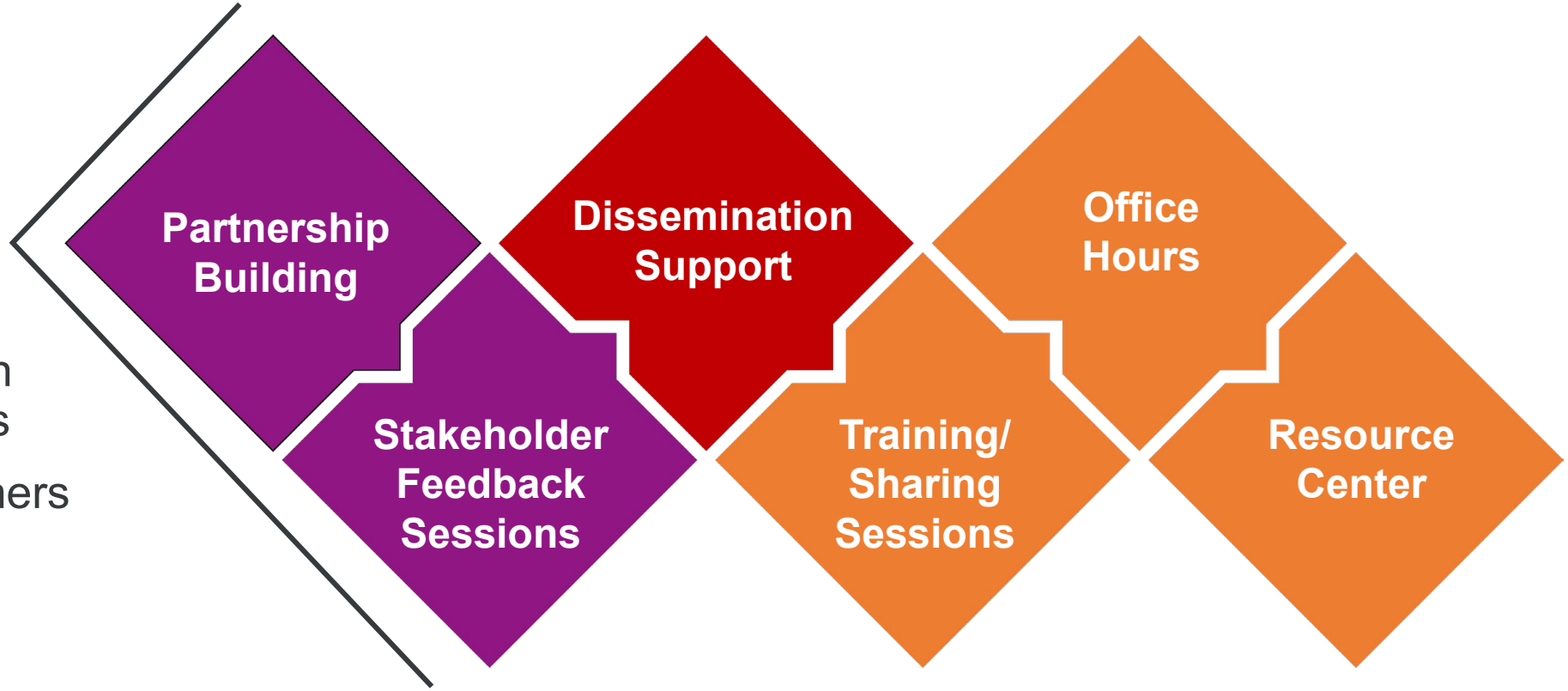


May 2023

HEAL Connections Services

Primary Objectives

- Create pathways to further build and sustain community partnerships
- Support HEAL researchers in meaningfully sharing results



Engagement of Communities Research Team Support Workforce Development

Questions?

If you have any questions for the presenters, please let us know via **Chat.**

We also have a couple of polling questions for you.

Polling Question

What stakeholder groups are you currently engaging with to inform your research and to prepare for results dissemination?

Polling Question

Does your research study or program have a dissemination plan?

The Next Step: Join Us for Office Hours

A Deeper Exploration of our Sharing Session topic with HEAL Connections

ABOUT OFFICE HOURS

- Share your experiences and consult with our in-house team and your peers on dissemination issues and opportunities facing your project
- Implement the approaches we shared today with input specific to your research project

Register Today!

bit.ly/Jun26OfficeHours

MONDAY, JUNE 26
11:30 A.M. ET to 12:30 P.M. ET

TOPIC

Research Dissemination Strategies

Not quite ready or want more focused HEAL Connections support? As your HEAL project team plans for and nears results dissemination, please consider reaching out to us at HEAL-Connections@duke.edu to set up a one-hour consultation.

NIH HEAL INITIATIVE | CONNECTIONS
Partnering to Accelerate Research into Action

Coming Soon:
Our Next Sharing Sessions

A Two-Part Series: Inclusive Language, Imagery, and Storytelling for Addiction and Pain Researcher Teams

- Real-world case examples for communicating with respect to stakeholders across the HEAL addiction and pain research spectrum.
- Actionable resources to reduce stigma and make research communications more engaging and impactful.
- Opportunities to partner with HEAL Connections to support inclusive language, imagery, and communications product development.

In consideration of the distinct challenges addiction and pain research teams face, we will host two focused sessions on this topic:

Focus on Addiction
JULY 27 | 1 P.M. ET

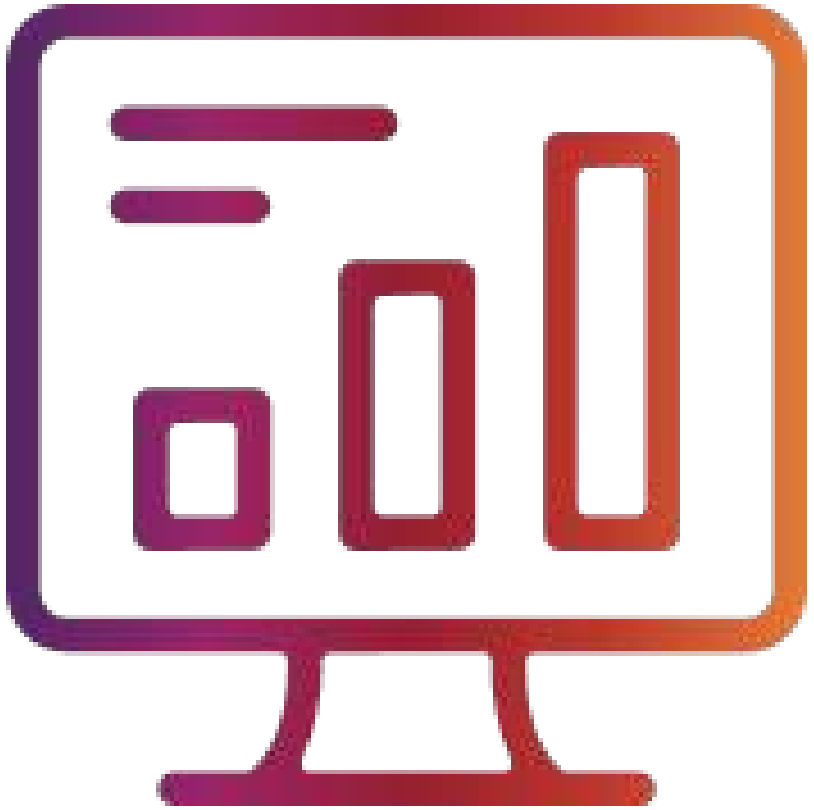
Focus on Pain
AUGUST 31 | 1 P.M. ET

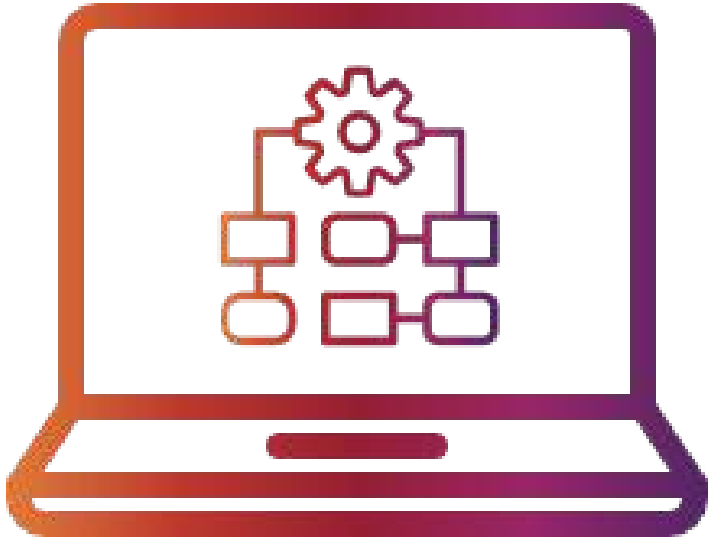
Registration links to come!

NIH HEAL INITIATIVE | CONNECTIONS
Partnering to Accelerate Research into Action

Meeting Evaluation

- To help design, contribute to, and improve our programming, please complete the evaluation survey at **bit.ly/EvalJCOINSS**



Stay tuned for post-event follow-up emails with:

- Registration for Office Hours
- HEAL Connections Sharing Session webpage featuring recommended resources
- Evaluation survey