PROGRAMS & INITIATIVES

In this article, promising approaches that have made some headway in reducing drug overdoses and engaging people in treatment are explored. Many of the programs are homegrown, launched with grant funds and the involvement of people who have lost loved ones or struggled to find support themselves. Other programs are led by states, which can leverage Medicaid programs and data to direct resources where they are most needed.

Find more information here.

Developed by the University of Arizona Health Sciences Comprehensive Pain and Addiction Center, PeerWORKS trains people who have lived experiences with substance use disorder or mental health issues to be peer support specialists and help others on their recovery paths. Other programs are led by states, which can leverage Medicaid programs and data to direct resources where they are most needed.

Find more information here.

TRAINING PROGRAM TURNS LIVED EXPERIENCES INTO PEER SUPPORT

Developed by the University of Arizona Health Sciences Comprehensive Pain and Addiction Center, PeerWORKS trains people who have lived experiences with substance use disorder or mental health issues to be peer support specialists and help others on their recovery paths. The goal of PeerWORKS is to increase the number of peer support specialists qualified to provide services in integrated care settings in Arizona's rural and underserved communities.

Find more information here.
RURAL JUSTICE COLLABORATIVE

Rural communities face unique challenges that impact their ability to deliver fair and equitable justice. Despite these challenges, rural communities rely on their many strengths to address the needs of their residents.

The National Center for State Courts, in partnership with Rulo Strategies, launched the **Rural Justice Collaborative (RJC)** to showcase the strengths of rural communities and highlight the cross-sector collaboration that is a hallmark of rural justice systems.

The work under the RJC is supported by a cross-sector advisory council composed of rural judges along with additional stakeholders in the justice, child welfare, and behavioral health systems. The advisory council guides and identifies innovative programs and practices.

WEBINARS

**BJA’S LEARNING COMMUNITY FOR RURAL JURISDICTIONS**

This eight-part series, taking place on the first Tuesday of each month from February 2023 to September 2023, will feature COSSAP training and technical assistance (TTA) providers and rural community partners/COSSAP grantees to demonstrate how COSSAP TTA providers can support rural jurisdictions and the innovative work made possible by rural partnerships. The Learning Community for Rural Jurisdictions is free and open to any rural community partners interested in addressing substance use. Visit the [Learning Community for Rural Jurisdictions Registration page](#) to sign up and receive session calendar invites.

**AFFORDABLE HOUSING AND RECOVERY CROSS-SECTOR CONVERSATION**

About 6.7 million rural residents were diagnosed with substance use disorders (SUD) in 2021. Only 6% of all persons diagnosed with substance use disorders in the United States received treatment. Supporting successful recovery and addressing the substance use disorder epidemic requires a collaborative cross-sector approach. This webinar hosted by the Housing Assistance Council offers a cross-sector conversation with professionals from criminal justice, behavioral and mental health, and housing to discuss ways to support recovery in rural communities.

**RURAL ROUNDTABLE - UNDERSTANDING RVCRI GRANT MANAGEMENT WITH PEER NETWORKING**

The Rural Violent Crime Reduction Initiative (RVCRI) provides resources to rural and tribal jurisdictions seeking to address specific crime problems. RVCRI-funded sites utilize a multi-disciplinary team to identify and prioritize crime challenges and specific places and populations to direct grant resources. While unique to each location, crime reduction approaches include evidence-based and evidence-informed strategies. This inaugural peer learning event introduced the work and role of the assigned BJA Grants Manager for the RVCRI program. The second portion of the event included brief project descriptions and updates by several RVCRI grantees, providing the opportunity for peer engagement and discussion.
CRISIS RESPONSE FOR RURAL COMMUNITIES: USING TECHNOLOGY AND PEER SUPPORT TO MEET PEOPLE IN CRISIS WHERE THEY ARE

Presented by the U.S. Department of Justice, Bureau of Justice Assistance’s Academic Training to Inform Police Responses Initiative, this webinar featured two programs that have adapted crisis response for use in rural communities. Panelists presented the innovative approaches in crisis response implemented by their programs and discuss the challenges of ensuring the needs of individuals in crisis who live in rural communities are met. Additionally, the Academic Training project team highlighted key resources to support rural communities developing and implementing crisis response in their jurisdictions.

RESOURCES

COMMON PROBLEMS, COMMON SOLUTIONS; LOOKING ACROSS SECTORS AT STRATEGIES FOR SUPPORTING RURAL YOUTH AND FAMILIES TOOLKIT

This toolkit by the Center for Juvenile Justice Reform (CJJR) at Georgetown University’s McCourt School of Public Policy provides an overview of barriers that rural communities face in preventing youth involvement in the juvenile justice system. It also provides examples of innovative practices serving justice-involved youth and their families in rural communities that can be adapted by other juvenile justice practitioners. CJJR will host a virtual session to discuss the content of the toolkit on March 28, 1 to 2:30 p.m. ET. Register to attend.

A GUIDE TO SUPPORTING ENGAGEMENT AND RESILIENCY IN RURAL COMMUNITIES

Rural America is broader than a single definition, and perhaps best understood through the character and sense of community of the people who live there. While there is no one-size-fits-all approach to rural communities, this guide is a step towards designing outreach and engagement activities that are authentic and right sized for a particular community to make every community more resilient.
RESEARCH & REPORTS

MENTAL HEALTH IN RURAL NEW YORK: FINDINGS AND IMPLICATIONS OF A LISTENING TOUR WITH RESIDENTS AND PROFESSIONALS

Rural communities face many challenges around mental health, including limited access to care and risk factors associated with isolation. Researchers at New York’s University at Albany and the nonpartisan and objective research organization (NORC) at the University of Chicago released a new report detailing the results of an 18-month study on mental health in rural New York. The work, the first of its kind in the state, took the form of a “listening tour” comprising 32 group interview sessions that engaged 289 participants representing 16 rural counties. It includes key insights from participants, with recommendations for strategies to improve mental health in rural areas in New York and beyond.

TRANSITIONS FROM JAIL TO RURAL COMMUNITY FOR ADULTS WITH MENTAL ILLNESS

This study explores the inhibitors and facilitators of the jail-to-community transition for a sample of adults diagnosed with mental illness residing in a rural southwest community. Consistent with the literature, facilitators included family support, peer navigators, and the availability of community-based resources such as transportation, housing, and access to healthcare services. Inhibitors had limited autonomy to navigate post-jail treatment, work, and support services successfully. Findings from the study suggest a need for sustainable upstream solutions within rural justice systems.

LAW ENFORCEMENT ASSISTED DIVERSION (LEAD): A MULTI-SITE EVALUATION OF NORTH CAROLINA LEAD PROGRAMS

In consultation with the North Carolina Harm Reduction Coalition, Duke University School of Medicine conducted a four-site evaluation, two being largely rural and two sites being mostly urban LEAD programs in North Carolina, taking a mixed-methods approach to examine both program processes, including a program approach to engagement. Law Enforcement Assisted Diversion (LEAD) is a pre-arrest criminal justice diversion program for people living in the community who use drugs and are at risk of being charged with low-level criminal offenses. Instead of arrest, the program allows law enforcement officers to refer individuals to LEAD, connecting participants to various behavioral health treatment and support services.

RECENT INCREASE IN METHAMPHETAMINE USE IN A COHORT OF RURAL PEOPLE WHO USE DRUGS: FURTHER EVIDENCE FOR THE EMERGENCE OF TWIN EPIDEMICS

Appalachian Kentucky was at the epicenter of the prescription opioid epidemic in the early 2000s. As we enter the third decade of the epidemic, patterns have begun to emerge as people who use drugs (PWUD) transition from using opioids to other drugs. This analysis aimed to examine longitudinal changes in methamphetamine use in an ongoing cohort of rural people who use drugs (PWUD) in Appalachian Kentucky.
TRAJECTORIES OF HANDGUN CARRYING IN RURAL COMMUNITIES FROM EARLY ADOLESCENCE TO YOUNG ADULTHOOD

Approximately 84% of homicides and 55% of suicides in rural areas involve firearms. Most studies of handgun carrying among adolescents and young adults examine the behavior in urban settings, despite a high prevalence of gun carrying among rural adolescents. This study explores patterns of handgun carrying from adolescence to young adulthood in rural locations, provides recommendations and explores potential high-risk trajectories, such as carrying at high frequencies.

THE ASSOCIATION BETWEEN GRANDPARENTS AS CAREGIVERS AND OVERDOSE MORTALITY IN APPALACHIA AND NON-APPALACHIA COUNTIES

Research has shown that the rise in drug overdose deaths and drug-related hospitalizations is positively associated with the rise in foster care cases, even after accounting for county-specific socioeconomic and demographic characteristics. This study aimed to assess the association of drug overdose mortality, as a proxy for SUD, with grandparents serving as primary caregivers of children in Appalachian and non-Appalachian regions. Findings showed that counties with higher overdose mortality rates had more grandparents as caregivers, with Appalachian counties experiencing more grandparents as caregivers than non-Appalachian counties. Policy implications include the need for programs to support grandparents providing caregiving for children impacted by substance use disorders including reform to federal child welfare financing to help children, parents, and grandparent caregivers such as kinship navigation, substance use treatment and prevention services, mental health services, and in-home supports.