Bridging Health and Justice

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Technical Expert Lead II

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As the technical assistance provider for the Rural Communities Opioid Response Program (RCORP), RCORP-TA provides access to a wide range of resources on relevant topics. Inclusion in this document does not imply endorsement of, or agreement with, the contents by JBS International or the Health Resources and Services Administration.

The following activity may contain content that could be distressing to some participants. Feel free to step away if you need to. For a list of resources and other outlets for support, please visit the RCORP-TA portal here. Also, feel free to reach out to your own supports as needed.

RCORP-TA

RURAL COMMUNITIES OPIOID RESPONSE PROGRAM - TECHNICAL ASSISTANCE

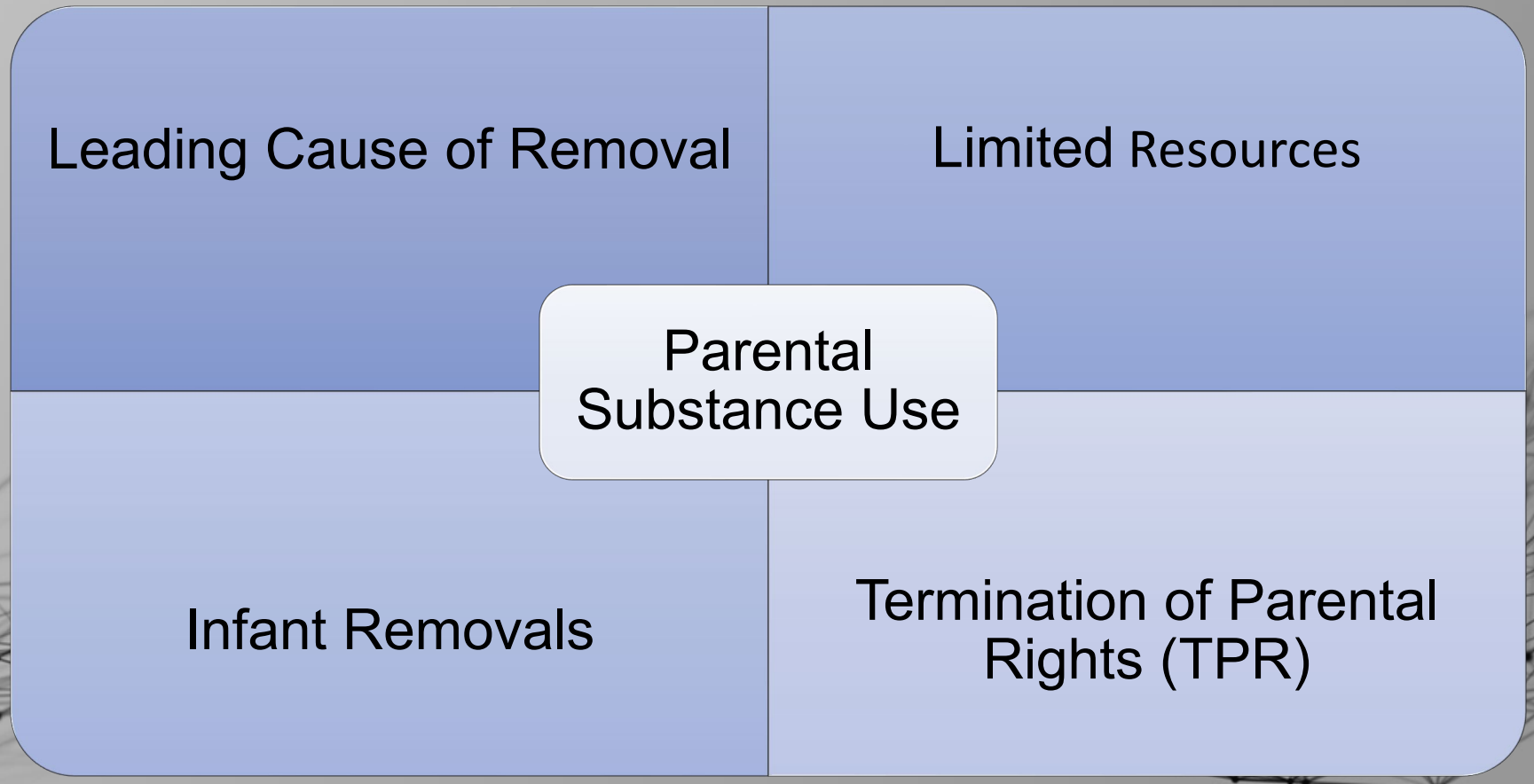
Objectives:

- Identify ways that coordinated communication and shared goals across health and justice systems can improve care outcomes.
- Recognize the role of cross-system collaboration in strengthening care coordination among law enforcement, courts, corrections, and community health partners.
- Discuss evidence-based approaches that strengthen care coordination and improve outcomes for pregnant women with opioid use disorder (OUD).

Intersecting Systems- The Impact of Arrests

- Continue Rise of Arrests
- Drug Offenses
- Incarceration Rates
- Supervision

Intersecting Systems- The Impact of Child Welfare



Intersecting Systems- Why These Intersections Matter

- In 2023, 87,800 women were incarcerated in state or federal prisons*
- Drug offenses are a common pathway
- Parental substance use is associated with roughly one-third of foster care entries, and over half of infant removals
- Untreated opioid use disorders during pregnancy increase the risk of relapse, overdose, preterm birth, and fetal distress
- 46,308 children available for adoption‡
- Providing medication for opioid use disorder can reduce post-release overdose deaths by about 50%

Bureau of Justice Statistics. (2025, September). *Prisoners in 2023 – statistical tables* (NCJ 310197). U.S. Department of Justice, Office of Justice Programs. https://bjs.ojp.gov/library/publications/prisoners-2023-statistical-tables

Children's Bureau. (2026, February 27). *AFCARS dashboard* [Data visualization]. Administration for Children and Families, U.S. Department of Health and Human Services. https://acf.gov/sites/default/files/documents/cb/2025-afcars-dashboard-printable.pdf

National Institutes of Health. (2025, September 10). *Treating opioid addiction in jails improves treatment engagement, reduces overdose deaths, and reincarceration.* *https://www.nih.gov/news-events/news-releases/treating-opioid-addiction-jails-improves-treatment-engagement-reduces-overdose-deaths-reincarceration*

Intersecting Systems- Pre-Arrest and Diversion

- Pretrial Diversion (PTD) programs redirect individuals from traditional criminal justice into alternative systems of supervision and services.
- PTD offers alternatives for:
  - Accountability
  - Public safety
  - Expansion to treatment and rehabilitation

U.S. Department of Justice. (2023, February). Justice manual: *Title 9 – Criminal, § 9-22.000 pretrial diversion program*. https://www.justice.gov/jm/jm-9-22000-pretrial-diversion-program

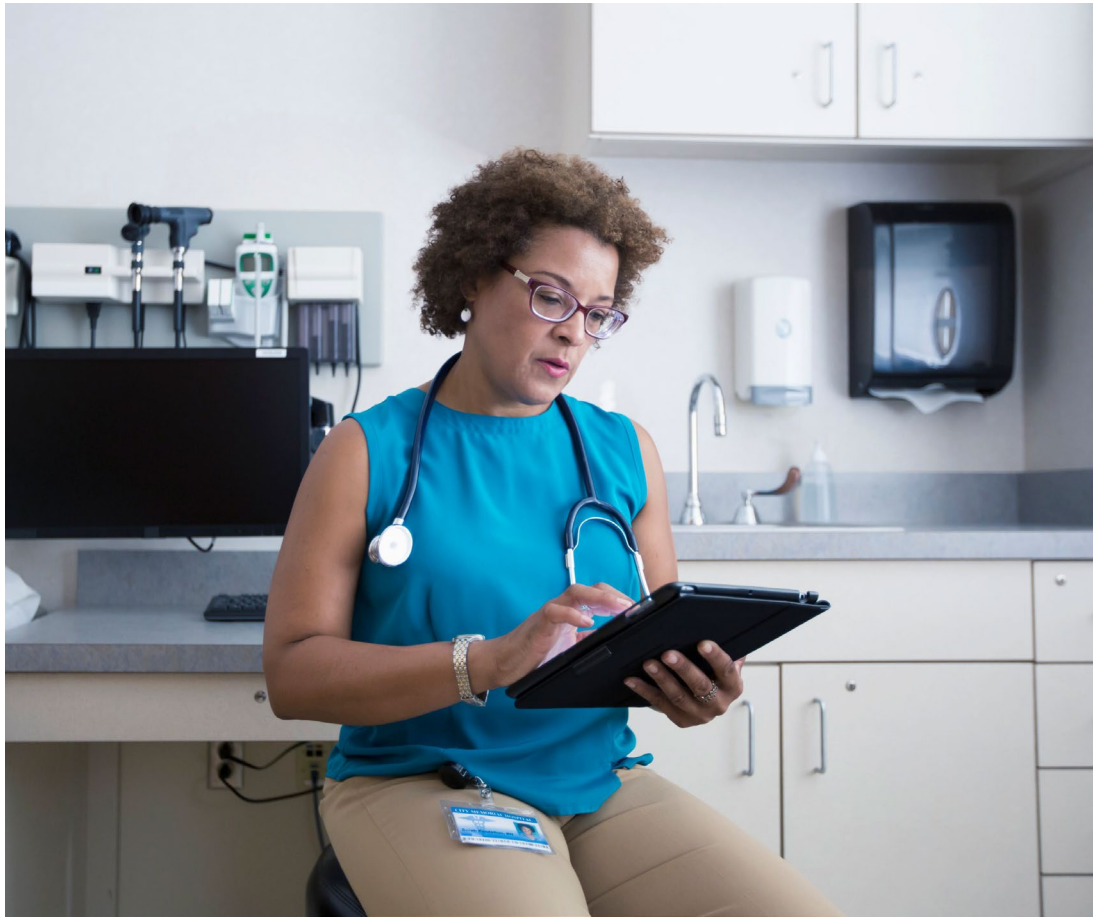
Intersecting Systems- Specialty Courts

- Drug Court
- Mental Health Court
- Veterans Treatment Court
- Infant/ Early Childhood Courts
- Family Treatment Courts
- Juvenile Courts
- Other

Intersecting Systems- Evidence-Based Treatments

- Medication for opioid use disorder
- Integrated substance use and mental health treatment
- Treatment for trauma
- Family Centered Treatment®
- Care coordination and case management
- High Fidelity Wraparound
- Peer recovery support services

Substance Use Treatment



- Brain disease model
- Comprehensive and patient-centered model
- 3-stage cycle of substance use disorder
- Medication
- Neurobiological
- SUD and multiple system illness
- Ongoing engagement

Medication for Opioid Use Disorder

- Opioid Agonists
  - ✓Methadone
  - ✓Buprenorphine (partial agonist)
- Opioid Antagonist
  - ✓Naltrexone

Medication for Opioid Use Disorder

- Decrease risk of overdose (OD) after release from incarceration and hospitalization
- Decrease cost associated with re-emergence of SUD symptoms
- Increase engagement
- Reduce utilization of crisis systems
- Higher reunification rates
- Promotes attachment and family preservation

What Would You Do?

A 28-year-old woman who is 20 weeks pregnant is arrested for a low-level, nonviolent offense. She discloses opioid use and fear of losing custody of her baby. She has limited prenatal care, prior child welfare involvement, and a history of trauma. Multiple systems are involved: law enforcement, court, health care, and child welfare.

What Would You Do?

Discussion Questions:

1. What fears or risks might she be experiencing?
2. How does a system silo impact involvement or willingness to seek help?
3. Where might current practices unintentionally create barriers?
4. What evidence-based services/supports should be prioritized during pregnancy?
5. What does effective coordination look like from arrest through postpartum?
6. What information sharing or warm handoffs are critical?

Resources

- Bureau of Justice Assistance. (n.d.). *Diversion programs.* U.S. Department of Justice, Office of Justice Programs. https://bja.ojp.gov/taxonomy/term/diversion-programs
- Bureau of Justice Statistics. (2025, September). *Prisoners in 2023 – statistical tables* (NCJ 310197). U.S. Department of Justice, Office of Justice Programs. https://bjs.ojp.gov/library/publications/prisoners-2023-statistical-tables
- Centers for Disease Control and Prevention. (2025, May 7). *Treatment of opioid use disorder before, during, and after pregnancy. https://www.cdc.gov/opioid-use-during-pregnancy/treatment/index.html*
- Children's Bureau. (2026, February 27). *AFCARS dashboard* [Data visualization]. Administration for Children and Families, U.S. Department of Health and Human Services. https://acf.gov/sites/default/files/documents/cb/2025-afcars-dashboard-printable.pdf
- National Institute on Drug Abuse. (2024, November). *Opioids.* National Institutes of Health. https://nida.nih.gov/research-topics/opioids

Resources

- National Institute on Drug Abuse. (2025, March). *Medication for opioid use disorders (MOUD).* National Institutes of Health. https://nida.nih.gov/research-topics/medications-opioid-use-disorder
- National Institutes of Health. (2025, September 10). *Treating opioid addiction in jails improves treatment engagement, reduces overdose deaths, and reincarceration. https://www.nih.gov/news-events/news-releases/treating-opioid-addiction-jails-improves-treatment-engagement-reduces-overdose-deaths-reincarceration*
- Police, Treatment, and Community Collaborative (PTACC). (2023). *The six pathways of deflection and pre-arrest diversion. https://ptaccollaborative.org/wp-content/uploads/2023/01/PTACC-6-Pathways-of-Deflection-Onepager.pdf*
- Substance Abuse and Mental Health Services Administration. 2023.*Treatment options for substance use disorder.* https://www.samhsa.gov/substance-use/treatment/options
- U.S. Department of Justice. (2023, February). *Justice manual: Title 9 – Criminal, § 9-22.000 pretrial diversion program. https://www.justice.gov/jm/jm-9-22000-pretrial-diversion-program*

Thank you

The purpose of RCORP is to support treatment for and prevention of substance use disorder, including opioid use disorder, in rural counties at the highest risk for substance use disorder.

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RURAL COMMUNITIES OPIOID RESPONSE PROGRAM - TECHNICAL ASSISTANCE

Continuing Education Information

Accreditation Statement:

In support of improving patient care, the University of Pittsburgh is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

Physician (CME)

The University of Pittsburgh School designates this live activity for a maximum of 6.75 AMA PRA Category 1 Credits . Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Nursing (CNE)

The maximum number of hours awarded for this Continuing Nursing Education activity is 6.75 contact hours.

Social Work (ASWB)

As a Jointly Accredited Organization, University of Pittsburgh is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. University of Pittsburgh maintains responsibility for this course. Social workers completing this course receive 6.75 continuing education credits.

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The University of Pittsburgh has been authorized by the American Academy of PAs (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with AAPA CME Criteria. This activity is designated for 6.75 AAPA Category 1 CME credits. PAs should only claim credit commensurate with the extent of their participation.

Psychologist (APA)

Continuing Education (CE) credits for psychologists are provided through the co-sponsorship of the American Psychological Association (APA) Office of Continuing Education in Psychology (CEP). The APA CEP Office maintains responsibility for the content of the programs.

Other health care professionals: Other health care professionals will receive a certificate of attendance confirming the number of contact hours commensurate with the extent of participation in this activity.

Conflict of Interest Disclosure:

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