

# BOLD THINKERS SERIES



#OpioidResponse

## Opioid Response: What Will It Take To Solve the Crisis?

**OCTOBER 30, 2018 • 9 A.M. – 12 P.M.**

Newseum, Knight Conference Center  
Washington, DC



Abt Associates presents this Bold Thinkers Series event, **Opioid Response: What Will It Take To Solve the Crisis?**, to advance the conversation on the nation's opioid epidemic and spark informed debate with the goal of better treatment options and overall improved health outcomes.

We are joined by leading experts on opioid deterrence, prescribing and pain management from agencies, primary care practices and communities—all working to reverse the alarming trends in opioid misuse and addiction. Abt has been on the front lines of the crisis for more than two decades, providing expert research, monitoring, evaluation and communications services to illuminate the scope of the crisis, as well as identify areas for effective intervention.

## Responding to the Opioid Epidemic

[impact.abtassociates.com/opioid](https://impact.abtassociates.com/opioid)



# AGENDA

OCTOBER 30, 2018 • THE NEWSEUM • WASHINGTON, DC

## Welcome

### **Christopher Spera, PhD**

*Division Vice President, Health & Environment*  
Abt Associates

## Panel 1: Perspectives from Public Health and Justice

### **MODERATOR: Sarah Jalbert, MA, MSPP**

*Principal Associate/Scientist*  
Abt Associates

### **Commander John Burke**

*President*  
International Health Facility Diversion Association,  
*Past President*  
National Association of Drug Diversion Investigators

### **Dr. Rahul Gupta, MPH, MBA, FACP**

*Commissioner and State Health Officer*  
Bureau for Public Health, West Virginia Department  
of Health and Human Resources

## Panel 2: On the Front Lines in Primary Care

### **MODERATOR: Sarah J. Shoemaker-Hunt, PhD, PharmD**

*Principal Associate/Scientist*  
Abt Associates

### **Dr. Daren Anderson**

*Director*  
Weitzman Institute

### **Dr. Joanna Starrels**

*Associate Professor*  
Albert Einstein College of Medicine and Montefiore  
Medical Center

## Panel 3: Tackling the Epidemic in the Community

### **MODERATOR: Dana Hunt, PhD**

*Principal Associate/Scientist*  
Abt Associates

### **Dr. David R. Gastfriend, DFASAM**

*Clinician, Chief Medical Officer*  
DynamiCare Health™

### **Jittu George, PharmD**

*Director of Pharmacy Services*  
Shop and Carry Pharmacy

### **Admiral James A. “Sandy” Winnefeld, Jr. (USN Ret.)**

*Co-founder*  
S.A.F.E. Project

## Closing

### **Kathleen L. Flanagan**

*President and CEO*  
Abt Associates

# SPEAKERS

## Welcome

### Christopher Spera, PhD

*Division Vice President, Health & Environment*  
Abt Associates



Christopher Spera—an experienced applied social science researcher, policy analyst and program evaluator—oversees Abt’s Behavioral Health, Health Policy and Public Health and Epidemiology practices.

Spera manages a staff of 140 people and a portfolio of more than 90 active projects in the areas of applied research, evaluation, survey research, health communications and technical assistance. He serves as professor of public policy and management at Carnegie Mellon University’s Heinz School of Public Policy. Prior to joining Abt, Spera led studies of signature programs as director of research and evaluation for the Corporation for National and Community Service, a \$1 billion federal agency. He was a primary liaison to the White House Office of Social Innovation and Civic Participation and the Office of Management and Budget. While in that role, he was recognized as an innovative leader in public policy.

From 1999 to 2012, Spera served as a vice president at ICF International, where he managed a program evaluation and survey research practice. Spera has published more than 20 peer-reviewed articles and technical reports.

# PANEL 1:

## Perspectives from Public Health and Justice

### Sarah Jalbert, MA, MSPP

MODERATOR

*Principal Associate/Scientist*  
Abt Associates



Sarah Jalbert has held leadership roles for several studies of human trafficking survivors and offenders and an experimental test of the effectiveness of prescription drug monitoring systems' proactive notifications to deter doctor shopping. Her work has focused on outcomes for at-risk populations and has included work designing protocols and research approaches for data collection and evaluation in community and justice-system settings.

Jalbert has been project director, principal investigator, or senior researcher for a number of federally funded projects, including evaluations of probation and parole practices and outcomes in two multisite, mixed-method studies. She currently leads an initiative for the Bureau of Justice Statistics to establish and support a statistical support center for the Survey of Prison Inmates, the nation's only survey of prison inmates. From 2007-2013, Jalbert led instrumentation and analysis tasks for the Arrestee Drug Abuse Monitoring Program, developing new instrumentation to respond to emerging substance use issues in sentinel cities across the U.S.

# Panel 1: Perspectives from Public Health and Justice

## Commander John Burke

*President*

International Health Facility Diversion Association

*Past President*

National Association of Drug Diversion Investigators



Commander John Burke has been a law enforcement officer for almost 50 years. He spent 32 years with the Cincinnati Police Department and formed and managed the department's Pharmaceutical Diversion Squad.

For 16 years he commanded the Greater Warren County Drug Task Force in Lebanon, Ohio. He led the High Intensity Drug Trafficking Area initiative, which employs local, state and federal agencies to disrupt high-level drug trafficking, pharmaceutical diversion and money laundering enterprises. He became the commander of the Brown County Drug & Major Crimes Task Force in Georgetown, Ohio in 2016, and retired in May 2017.

Commander Burke is president and owner of Pharmaceutical Diversion Education, Inc. He writes a monthly column on prescription drug abuse in *Pharmacy Times* magazine and lectures nationally on the topic of pharmaceutical diversion. He recently became the co-founder and president of the International Health Facility Diversion Association, a non-profit, 501c3 organization dedicated to addressing the problems surrounding drug diversion within healthcare facilities.

## Dr. Rahul Gupta, MPH, MBA, FACP

*Commissioner and State Health Officer*

Bureau for Public Health, West Virginia Department of Health and Human Resources



Dr. Rahul Gupta is a practicing internist with 25 years of clinical experience, and has faculty appointments at the West Virginia University School of Public Health, the University of Charleston School of Pharmacy and as a visiting faculty member at the Harvard

University T.H. Chan School of Public Health.

In 2017, Dr. Gupta was named West Virginian of the Year by the Charleston Gazette-Mail for his work battling the opioid epidemic. He earned a Doctor of Medicine degree and did subspecialty training in pulmonary medicine from the University of Delhi. He completed his internship and residency training at St. Joseph Hospital at Northwestern University in Chicago, Illinois. He currently serves as the Region III Director of the Association of State and Territorial Health Officials Board of Directors.

Dr. Gupta has authored more than 125 peer-reviewed scientific publications in medicine and public health and served as a principal investigator for numerous well-known clinical trials.

## PANEL 2:

# On the Front Lines in Primary Care

### Sarah J. Shoemaker-Hunt, PhD, PharmD

MODERATOR

*Principal Associate/Scientist*  
Abt Associates



Sarah J. Shoemaker-Hunt is a pharmacist, health services researcher and implementation scientist who conducts research and provides technical assistance on opioid prescribing and management strategies, opioid misuse and abuse, medication

management and safety, primary care transformation and quality improvement.

Shoemaker-Hunt has led dozens of studies for the Agency for Healthcare Research and Quality (AHRQ), Centers for Disease Control and Prevention (CDC) and other agencies and organizations. She serves as co-principal investigator on a trio of CDC-funded projects to implement the *CDC Guideline for Prescribing Opioids for Chronic Pain* via quality improvement (QI), coordinated care and clinical decision support. She led development of 16 QI measures aligned to the CDC guideline. These tools for clinicians and health care systems were released by the CDC as the *Quality Improvement and Care Coordination: Implementing the CDC Guideline for Prescribing Opioids for Chronic Pain*. Shoemaker-Hunt leads a CDC Opioid QI Collaborative of large healthcare systems implementing the guideline and measuring their progress using the QI measures. For AHRQ, she is starting a study to implement and evaluate a team-based approach to opioid management in 15 primary care practices.

## Panel 2: On the Front Lines in Primary Care

### Dr. Daren Anderson

*Director*  
The Weitzman Institute



Dr. Daren Anderson is Director of the Weitzman Institute and the Executive Director of its subsidiary, the Community eConsult Network, in Middletown, Conn. The Weitzman Institute is a research and innovation center dedicated to improving primary care for underserved

populations. Community eConsult Network is a national telehealth provider focusing on improving access to specialty care through asynchronous communication with its national network of specialists.

As leader of the nation's only research and innovation center embedded within a federally qualified health center, Dr. Anderson oversees a diverse team of innovators, health services researchers, educators and quality improvement specialists. Together, they are designing new models to transform primary care for the underserved. Under his leadership, Weitzman has grown from a small, Connecticut-based institute to a national organization working closely with health centers, payers, funders, and agencies in 35 states.

Dr. Anderson began his career as a general internist providing primary care for medically underserved patients in New Britain, Conn. He subsequently served as Chief Medical Officer and then Chief Quality Officer for Community Health Center, Inc., a large, multisite health center providing primary care to more than 150,000 patients across Connecticut.

### Dr. Joanna Starrels

*Associate Professor*  
Albert Einstein College of Medicine and Montefiore Medical Center



Dr. Joanna Starrels' research aims to define best practices for managing chronic pain in primary care and HIV treatment settings. She studies the benefits and harms of using opioid management tools such as treatment agreements, urine drug testing and

prescription monitoring programs; the effectiveness of collaborative care models for integrating behavioral health care and pain management; treatment of opioid use disorders in primary care settings; and the impact of opioid analgesic use, misuse and disorders on HIV outcomes.

Her work has been funded by grants from the National Institute on Drug Abuse, the Society of General Internal Medicine, the New York Community Trust and the Einstein-Montefiore Center for AIDS Research. Dr. Starrels has served as an expert consultant to the New York City and New York State Departments of Health and to the Centers for Disease Control and Prevention on developing guidelines and initiatives to improve opioid prescribing. She is board-certified in both Internal Medicine and Addiction Medicine.

## PANEL 3:

# Tackling the Epidemic in the Community

### Dana Hunt, PhD

MODERATOR

*Principal Associates/Scientist*

Abt Associates



Dana Hunt is a highly regarded expert on crime, substance abuse, illegal drug use and drug treatment, whose research includes the use of both quantitative methods and ethnography.

In recent years, Hunt managed the Arrestee Drug Abuse Monitoring (ADAM II) Project – involving the collection of data on drug use, treatment needs and drug market activity. The project was the only federal drug survey that was able to validate self-reported drug use through testing and provide a real-time picture of drug use trends in the nation.

She has managed and served as the evaluator on a diverse array of projects, including the national evaluation of 150 minority-focused SAMHSA grantees who integrated HIV, drug treatment and primary care across the country. She currently leads SAMHSA's Program Evaluation for Prevention contract, focusing on prescription opioid misuse.

Since 2000, she has served on review panels for the National Institute of Justice. Earlier in her career, she advised the National Institute on Drug Abuse, the board of trustees of Mantua Human Services, Drug and Alcohol Treatment and the National Institute on Criminal Justice/Law Enforcement Assistance Administration, Drugs and Crime.

## Panel 3: Tackling the Epidemic in the Community

### Dr. David R. Gastfriend, DFASAM

Clinician, Chief Medical Officer  
DynamiCare Health™



Dr. David Gastfriend serves as an addiction psychiatrist and senior research scientist at the Public Health Management Corp. He directed addiction research at Massachusetts General Hospital at Harvard Medical School and was an investigator in

the National Institute on Drug Abuse (NIDA) Cocaine Collaborative Study, the National Institute of Alcohol Abuse and Alcoholism's COMBINE Study and NIDA's Clinical Trials Network. As vice president at Alkermes, Inc., he directed publications on Vivitrol in clinical, criminal justice and health economics research.

Dr. Gastfriend's research on the American Society of Addiction Medicine (ASAM) Criteria contributed to endorsements by most U.S. states, the Department of Veteran Affairs and the Department of Defense. His 150 scientific publications include the *ASAM Criteria* and *Addiction Treatment Matching*. His *CONTINUUM – The ASAM Criteria Decision Engine™* and *ASAM's CO-Triage™* assessment tools are being adopted nationwide.

Dr. Gastfriend co-founded DynamiCare Health™, a nationally scalable technology for contingency management and predictive analytics that won the grand prize in Harvard Business School's New Venture Competition. He has consulted to the governments of Belgium, China, Iceland, Israel, Norway, Russia and the U.S.

### Jittu George, PharmD

Director of Pharmacy Services  
Shop and Carry Pharmacy



Jittu George is a pharmacist and entrepreneur with 15 years of experience in various roles in the pharmaceutical industry and is a founding partner of Appraised LLC, based in Philadelphia. George helps underserved and underprivileged homeless and recovery

home patients, most of whom are facing substance abuse and/or psychiatric disorders. His pharmacies, Shop and Carry and White Oaks, provide state-of-the-art, point-of-care pharmacy services to some of the largest health and social service facilities in Philadelphia, including Pathways to Housing PA. Over the course of the last few years, these pharmacies have played a crucial role in reducing opioid abuse and related complications, especially through the use of compliance packaging, implementation of Narcan programs and facilitation of Suboxone and other medication-assisted treatment options.

To offer these services to a broader population, George founded the Pharmacy Wellness Group earlier this year. It is a first-of-its-kind non-profit (pending 501c3 approval) community pharmacy with a mission to provide state-of-the-art pharmacy and prescription services to patients of non-profit organizations, irrespective of their insurance status or ability to pay.

**Admiral James A. “Sandy” Winnefeld, Jr.  
(USN Ret.)**

*Co-founder*

S.A.F.E. Project



Admiral Winnefeld served 37 years in the U.S. Navy, most recently as the vice chairman of the Joint Chiefs of Staff and the United States’ number two ranking military officer.

Admiral Winnefeld is a published author and director or advisory board member for several companies. He currently serves as distinguished professor at Georgia Tech, where he is a member of the Engineering Hall of Fame. He is a senior fellow at the Belfer Center for Science and International Affairs, John F. Kennedy School of Government at Harvard University.

In late 2017, Admiral Winnefeld and his wife, Mary, lost their youngest son, Jonathan, to a drug overdose after a long struggle with addiction. Jonathan’s journey, marked by a recovery that enabled him to enroll into college a few days before his death, inspired the Winnefeld family to launch the national non-profit, S.A.F.E. Project (Stop the Addiction Fatality Epidemic). S.A.F.E. is committed to contributing in a tangible way to overcoming the overdose epidemic in the U.S. and has received both national attention and grassroots support for its important mission.

# Selected Opioid Projects

AT ABT ASSOCIATES

## Supporting CDC's Development of the Opioid Prescribing Guideline

To support safe prescribing and reduce the adverse consequence of opioid use, CDC developed a prescribing guideline. Abt synthesized research, assembled evidence tables and provided editorial support for draft clinical recommendations. We conducted rapid literature reviews on the harms associated with the use of opioids for chronic and acute pain; the harms of combining opioids with alcohol, other prescription drugs and illicit drugs; the effectiveness of non-opioid treatments for pain; patient and provider values and preferences specific to opioids; the cost-effectiveness of opioid therapy for chronic pain; and the impact of prescription drug monitoring programs on prescribing behavior and patient outcomes.

## Medicare Part D Opioid Policy Impact Evaluation

CMS implemented a policy to improve controls on opioid prescribing and dispensing and to reduce the number of beneficiaries at high risk of misuse and overdose. CMS developed a surveillance system that scans Part D prescription claims to identify Medicare beneficiaries who obtain excessive daily doses of opioids for 90 consecutive days or more, beneficiaries who use more than three prescribers and dispensers for opioids during a one-year period and beneficiaries who meet both of these criteria. Abt conducted quantitative analyses to evaluate the effects of this policy.

## Development and Evaluation of a Technical Package on Coordinated Care for Chronic Opioid Therapy

CDC hired Abt to develop a coordinated care plan (CCP) for safe opioid prescribing. This included upper limit dosing thresholds, attention to drug-drug and drug-disease interactions, urine testing for drugs and use of medication-assisted treatment. With MedStar Health, we evaluated the extent to which the demonstration sites were able to implement the plan's safer prescribing practices. The guide, along with other resources, is part of the resource *CDC Quality Improvement and Care Coordination: Implementing the CDC Guideline for Prescribing Opioids for Chronic Pain*.

## An Opioid Clinical Improvement Implementation Package for Large Healthcare Systems: Activities to Support Guideline Dissemination and Implementation

CDC funded Abt and our partners to support our implementation of the CDC Opioid Prescribing Guideline in primary care practices. The project consisted of developing 16 opioid quality improvement (QI) measures that reflect the guideline recommendations and an associated implementation package. Both the opioid QI measure specifications and implementation package are available in the resource *CDC Quality Improvement and Care Coordination: Implementing the CDC Guideline for Prescribing Opioids for Chronic Pain*. In addition, we are supporting a QI collaborative of five health care systems implementing the CDC Guideline and associated QI measures. The systems consist of more than 100 practices in eight states located in urban, rural, frontier, underserved and tribal communities. The QI collaborative consists of monthly clinical webinars, system leads calls to discuss implementation and IT staff calls regarding producing the measures, and support of systems and a central web resource.

## Implement and Evaluate CDC Opioid-Related Quality Improvement Measures in Clinical Settings

CDC funded Abt and our partners to implement the CDC Guideline and associated QI measures in six additional health care systems from across the country—adding to the current QI collaborative described above.

## Evaluating and Implementing the Six Building Blocks Team Approach to Improve Opioid Management in Primary Care

AHRQ funded Abt and partners to improve the Six Building Blocks [for opioid management], develop guidance for implementing them and evaluate their implementation in a diverse set of 15 primary care practices. The Six Building Blocks represent six key work areas that need to be redesigned in a primary care practice to improve a clinic's management of patients on chronic opioids.

## Surgeon General's Report on Alcohol, Drugs, and Health

Abt supported the development of the first Surgeon General's Report on Alcohol, Drugs, and Health, a seminal project that will have major implications for how the U.S. addresses not only the epidemic of opioid misuse, but also public health problems associated with alcohol and other substances. This report discusses the growing relationship between prescription drug misuse and heroin use and provides evidence-based strategies for addressing the opioid epidemic.

## Massachusetts Health Policy Commission Behavioral Health and Substance Use Disorder Recommendations

The Massachusetts Health Policy Commission contracted with Abt to examine aspects of the opioid addiction crisis in the state and to provide recommendations for substance use disorder treatments. The study involved laying out a plan for the legislature that defined a set of system specifications—considerations of financing and return on investment, provider capabilities, quality metrics and workforce development—followed by a gap analysis between these system characteristics and current capabilities.

## Opioid Treatment Program Service Continuity Project

Through a subcontract with FEI, Abt was contracted by SAMHSA to evaluate the feasibility of a technology to enable patients to control the sharing of their opioid treatment information with other providers, via a Health Information Exchange and a patient portal, in compliance with state and federal regulations. Our evaluation detailed the challenges and solutions associated with developing the technology, the extent to which SAMHSA's goals for this pilot were met, lessons learned and recommendations for future applications of these findings.

## Innovative Health IT Tools Relevant to Opioid Use Disorder

Under the Behavioral Health Information Technology Strategy contract, Abt helped SAMHSA identify technology challenges to spur developers to create

solutions that provide additional recovery support to patients receiving outpatient medication-assisted treatment for opioid use disorders. As an example, an app was developed that can be used as part of a comprehensive treatment plan that allows access to resources, educational materials and other supports for people in outpatient recovery from opioid use disorder.

## Text Message Library for Individuals with Behavioral Health and Opioid Use Disorders

Abt led the development for SAMHSA of a text messaging library. We conducted stakeholder interviews with SAMHSA grantees who expressed interest in using text messaging services, along with subject matter experts with direct experience developing and implementing text messaging libraries and technology-based services for the behavioral health community. We developed and tested 150 text messages targeted to individuals in various stages of recovery and supported implementation materials for the library.

## Building Evidence on Employment Strategies

The Office of Planning, Research and Evaluation within the Administration for Children and Families launched the Building Evidence on Employment Strategies for Low-Income Families (BEES) project to evaluate the effectiveness of innovative programs designed to boost employment and earnings among low-income Americans. Through BEES, Abt is prioritizing evaluations of programs that are state-initiated and programs that serve adults whose employment prospects have been affected by opioid dependency, abuse of other substances or mental health conditions.

## National Training Initiative on Trauma-Informed Care

The Office of Women's Health (OWH) collaborated with Abt to assess the impact of its National Training Initiative on Trauma-Informed Care (TIC) for community-based providers. Abt is visiting programs, agencies and organizations that participated in training sessions and will conduct structured interviews with, and administer a web-based survey to, TIC training participants to assess the training's impact. Abt will review the data and disseminate findings to OWH and interested parties.

## ODU, Housing Instability and Housing Options for Recovery

Stable housing is a critical component of recovery from opioid use disorder (OUD) and Abt is working with the Department of Housing and Urban Development to document various housing models for individuals who experience housing instability or homelessness and OUD. We are conducting an environmental scan and interviews with experts in homelessness, housing and OUD; family advocates; and providers. A report will include a housing typology with descriptions of housing models best suited to a variety of populations affected by both OUD and homelessness.

## Evaluating SAMHSA's Strategic Prevention Framework for Prescription Drugs

On behalf of SAMHSA, Abt will lead the Program Evaluation for Prevention Contract (PEP-C) to evaluate the Strategic Prevention Framework for Prescription Drugs (SPF-Rx). The SPF-Rx program empowers grantees to leverage the resources of stakeholders—including public health departments, school systems, the criminal justice system and the pharmaceutical industry—to prevent and reduce prescription drug and illicit opioid misuse and abuse among youth and adults. Our evaluation will help answer whether the SPF-Rx produces desired outcomes.

## Estimating the Prevalence of Opioid Diversion by “Doctor Shoppers” in the U.S.

Abt examined a nationwide sample of 146.1 million opioid prescriptions dispensed during 2008. The study revealed that patients who legitimately need opioids may be receiving uncoordinated care. States have established monitoring programs to collect information on drugs dispensed, but most physicians do not access this information. The study recommends that monitoring programs improve access and response time, scan data to flag suspicious purchasing patterns and alert physicians and pharmacists. Practitioners could prevent doctor shopping by screening new patients for risk of abuse and monitoring their adherence to prescribed treatments.

## Conrad N. Hilton Foundation Youth Substance Use Prevention and Early Intervention Initiative – Monitoring, Evaluation, and Learning Project

Abt leads a multiyear project as the monitoring, evaluation, and learning partner for the Hilton Foundation's Youth Substance Use Prevention and Early Intervention Strategic Initiative. We gather data to monitor progress; support evidence-based implementation of substance use screening; provide referrals to treatment services in primary care, schools, community organizations and juvenile justice programs; and facilitate a learning community for the Foundation's 75 grant funded projects.

## SAMHSA's Bringing Recovery Supports to Scale, Technical Assistance Center Strategy

The SAMHSA Bringing Recovery Supports to Scale Technical Assistance Center Strategy project convened an expert panel for recommendations on expanding and improving the quality of Medication-Assisted Recovery (MAR) care. Abt developed a background paper for panelists that detailed key aspects of MAR, including the available medications and service settings, the effectiveness of medications used in MAR, the need for MAR and the barriers to accessing MAR. This paper guided the panelists as they developed recommendations to expand services and the quality of care for people with substance use disorders. Abt also planned and facilitated a two-day expert panel meeting focused on understanding the resources and conditions that support long-term recovery from opioid use disorders.

# Bold Thinking Across Sectors

## AT ABT ASSOCIATES

Abt Associates has more than 30 years of experience in behavioral health research, including criminal justice, substance misuse and trauma-informed care. We offer an in-house team of more than 150 experts in technical and scientific disciplines and policy analysis across the full range of biological, physical, data and social sciences. As a premier provider of analytic and management support, we are known for our rigorous approach to solving complex interdisciplinary challenges. We work closely with an extensive network of experts in a broad range of fields, and we have a proven track record of harnessing this expertise to deliver client-focused, meaningful outcomes.



**Jason Brinkley, PhD**  
Senior Associate/Scientist

- Rural health data
- Biostatistics
- Machine learning
- Statistical software



**Nida Corry, PhD**  
Senior Associate/Scientist

- Behavioral medicine
- Integrated pain and palliative care
- Military health
- Psychiatric epidemiology



**Michael Costa, MPH**  
Principal Associate/Scientist

- Primary care and behavioral health integration
- Vulnerable populations and social determinants of health
- Epidemiology and health outcomes research



**Leigh Fisher, MPH**  
Senior Associate/Scientist

- Prevention and early intervention program planning and evaluation
- Primary care and behavioral health integration
- Behavioral health policy and financing



**Karen Gardiner, MPP**  
Principal Associate/Scientist

- Workforce development
- Welfare and low-income assistance/family-support
- Policy assessment and analysis
- Child support enforcement



**Meg Gwaltney, MBA**  
Principal Associate/Scientist

- Substance use prevention
- Public health communications
- Systems change



**Meghan Henry, MA**

**Associate/Scientist**

- Homelessness/youth homelessness
- Implementation and evaluation
- Housing models for homeless populations/interventions
- National data collection of sheltered/unsheltered homelessness



**Dana Hunt, PhD**

**Principal Associate/Scientist**

- Opioid misuse and use disorder prevention
- Substance use disorder treatment evaluation
- Opioid use and misuse in the criminal justice system



**Sarah Jalbert, MA, MSPP**

**Principal Associate/Scientist**

- Research and evaluation on justice systems
- Substance misuse and use disorders in the justice system
- Community supervision
- At-risk youth



**Helga Luest, MA**

**Senior Manager, Communications**

- Trauma-informed care
- Substance use disorders and trauma
- Co-occurring conditions
- Resilience and recovery



**Karin Martinson, MPP**

**Principal Associate/Scientist**

- Workforce development
- Workforce reentry and career pathways
- Substance use disorder recovery and employment services
- Randomized control-trial studies
- Large-scale implementation



**Leigh Mathias, MPH**

**Associate/Scientist**

- Opioid prescribing
- Long-term opioid therapy
- Clinical care quality improvement
- Evaluation



**Douglas McDonald, PhD**

**Principal Associate/Scientist**

- Opioid prescribing
- Substance use disorder treatment
- Prescription drug monitoring programs
- Improving use of opioid therapy for chronic pain



**Alan Moghul, PhD**

**Associate/Scientist**

- Substance misuse and use disorder prevention
- Behavioral health systems, parity and integration
- Health policy research and evaluation
- Workforce development



**Sue Pfefferle, PhD**

**Associate/Scientist**

- Opioid use disorder as related to homelessness and jail diversion
- Mixed methods evaluation
- Behavioral health services research



**Sharmini Radakrishnan, PhD**

**Associate/Scientist**

- Prevalence of opioid prescribing
- Treatment admissions and mortality
- Correlates of opioid-related outcomes
- Impact evaluation of PDMPs and state opioid regulations



**Selena Ramkeesoon, MBA, MLS**

Vice President/Scientist

- Communication campaigns, media and advertising
- Behavior change
- Digital/social media



**Alisa Santucci, MS, LCMFT**

Principal Associate/Scientist

- Systems involving families
- Child abuse prevention, foster care, at-risk youth
- Human trafficking



**Sarah J. Shoemaker-Hunt,**

PhD, PharmD

Principal Associate/Scientist

- Opioid management approaches for primary care
- Implementation research and strategies for safer opioid prescribing
- Measures of opioid quality improvement (QI)
- Collaboratives to support opioid guideline implementation



**Alicia Sparks, PhD**

Associate/Scientist

- Opioid misuse prevention
- Community responses to the opioid epidemic
- Substance use among vulnerable populations
- Harm reduction and medication-assisted treatment



**Brooke Spellman, MA**

Principal Associate/Scientist

- Housing and homelessness
- Mainstream systems coordination
- Systems planning



**Christopher Spera, PhD**

Division Vice President, Health & Environment

- Program evaluation and design
- Applied social science research
- Infusing evidence into public policy
- Substance and opioid misuse and treatment



**Sarah Steverman, PhD, MSW**

Associate/Scientist

- Substance use prevention and mental health promotion
- Behavioral health financing
- Delivery system reform
- State behavioral health policy



**Julie Strawn, MPA**

Principal Associate/Scientist

- Workforce and economic mobility
- Workforce development
- Adult learning
- Postsecondary preparation and completion



**Holly Swan, PhD**

Associate/Scientist

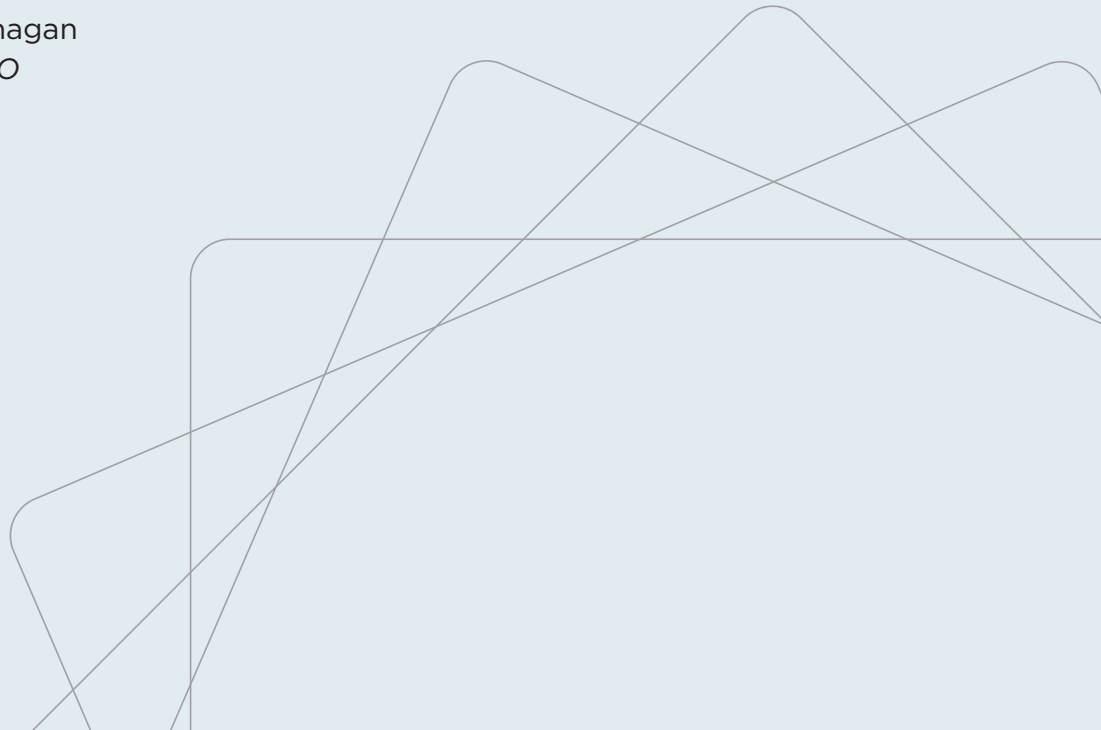
- Criminal justice/jail diversion
- Behavioral health
- Implementation science
- Opioid prevention, treatment and recovery



“

Complex challenges demand a multidisciplinary approach. Abt is working on the front lines every day collaborating with our clients, partners and communities to tackle the toughest challenges. It's what we do best.”

—Kathleen L. Flanagan  
*President and CEO*





## Responding to the Opioid Epidemic

[impact.abtassociates.com/opioid](http://impact.abtassociates.com/opioid)

### OUR MISSION

To improve the quality of life  
and economic well-being of  
people worldwide.

For more information contact:

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[abtassociates.com](http://abtassociates.com)



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