

July 2026

RURAL JUSTICE EXCHANGE

Connecting rural communities to the ideas, tools, and promising practices that advance rural justice.

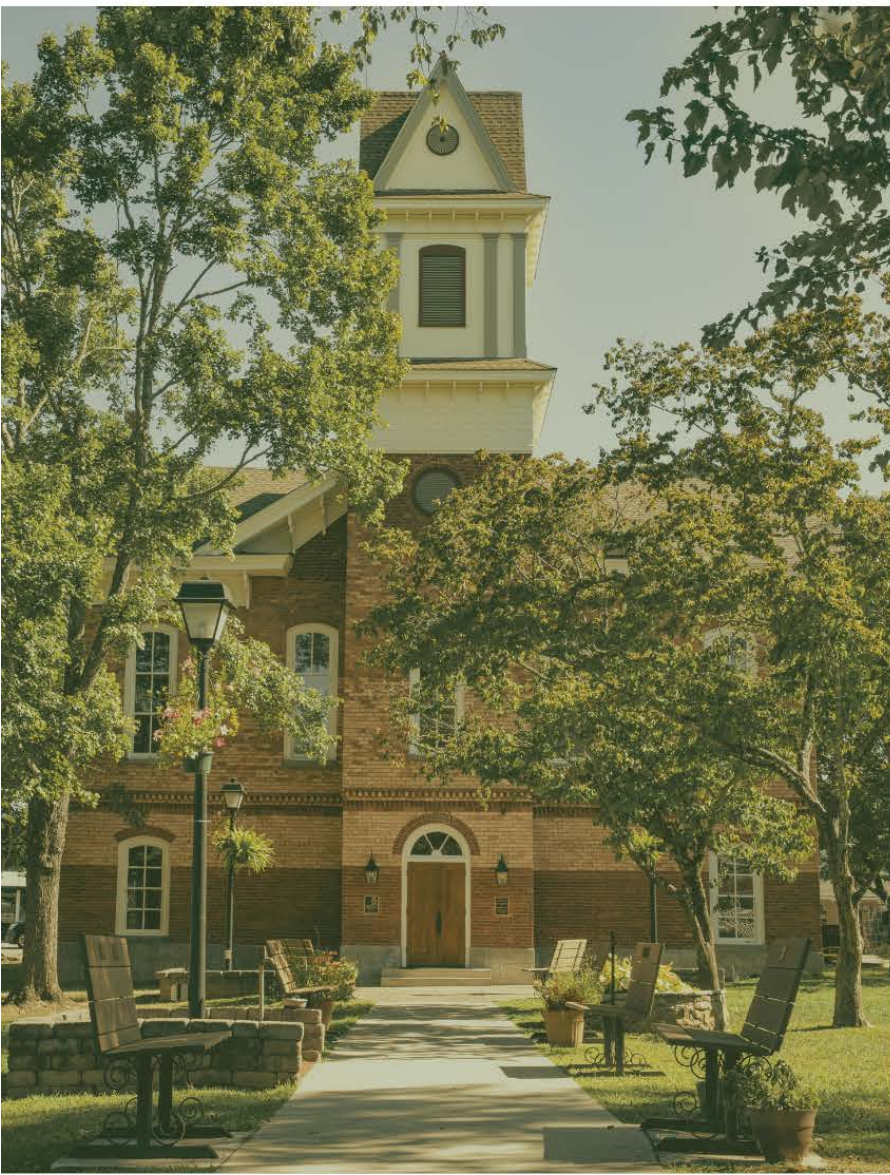


TABLE OF CONTENTS

Opportunity

Opportunity for Rural Jails	03
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Articles

A New Network of Rural Providers in Arkansas Looks to Take on the 'Needs and Pain Points' of Behavioral Healthcare	04
"Deaths of Despair" Decline Nationwide, but Still More Prevalent in Appalachia	04
Youth Drug Use is Down, but Overdoses Have Risen. One Town's Schools Have a Possible Solution	04
NC Expands Diversion Programs for Some Low-Level Offenses as an Alternative to Jail	05
First Responder Fridays: Co-Responder Program Focused on Mental Health	05
Ohio University Researchers Expand Opioid Use Disorder Treatment with Nearly \$4 Million NIH Grant to Improve Rural Primary Care Access	05
Collaboration with Justice System Reshaping Mental Health Response	05

Programs

New Mexico Rural Justice Initiative	06
Mercy Program Changes How Opioid Addiction is Handled in Rural Ozarks	06
Rural Recovery Transportation Aiming to Close the Gap in Recovery Care	06
Recovery Workforce Creates Pathways to Sobriety and Stability	07
Reentry Program for Those Incarcerated Offers a Model for Us to Follow	07

Research

Medications for Opioid Use Disorder in Correctional Facilities: A 2022 Cross-Sectional Survey of Health Care Staff	08
Combined Pharmacotherapy and Psychotherapy Impact on Opioid Use Disorder Treatment	08

Reports

Governors' Policy Actions in Rural Health Workforce	09
Rural Health Transformation Program: State Focus on Behavioral Health	09
The Rural Behavioral Health Crisis Continuum: Considerations and Emerging State Strategies	09

Resources

Reaching Rural Resource Center: Justice and Behavioral Health (R3C)	10
Transportation to VA Health Appointments in Highly Rural Areas	10
Building Support for a Pretrial Services Program: Six Practical Steps	11



OPPORTUNITY

Opportunity for Rural Jails

Rural jails are on the front lines of the nation's overdose crisis. Jail-ECHO Operations, Planning, and Strategy (J-ECHO OPS) offers tailored assistance to rural jails starting or expanding medication for opioid use disorder (MOUD). J-ECHO-OPS provides practical, operationally focused coaching and peer learning for rural jails. Offering MOUD to individuals while incarcerated reduces withdrawal, improves safety, and lowers overdose risk.

Participating jails receive virtual coaching with national correctional health experts; a peer cohort of rural sheriffs and jail leaders; guidance on clinical protocols and safety planning, security operations and medication management, building community treatment partnerships, funding options and legal and policy considerations; dedicated time for your jail's specific operational questions; CME/CEU for participating staff.

J-ECHO OPS is funded by the National Institute on Drug Abuse (NIDA) through the Justice Community Overdose Innovation Network (JCOIN) and is led by UMass Chan Medical School.



Facilities will be enrolled on a first-come basis.



To learn more, contact our research team at: jcoinECHO@umassmed.edu



ARTICLES

A New Network of Rural Providers in Arkansas Looks to Take on the 'Needs and Pain Points' of Behavioral Healthcare

The Arkansas Rural Behavioral Health Access (ARBHA) Network, formed through a federal Office of Rural Health Policy planning grant, works to improve behavioral healthcare in southern Arkansas, where primary care is often the first or only point of contact. It connects small rural practices to identify shared needs and test solutions, such as placing social work interns in clinics to reduce stigma and increase patients' willingness to accept counseling. Leaders hope to expand statewide and bring rural providers into policy, billing, and training discussions.

[Read more...](#)



Photo courtesy of Kim Shuler

"Deaths of Despair" Decline Nationwide, but Still More Prevalent in Appalachia

'Deaths of despair,' meaning deaths from drug overdose, alcohol, and suicide, are declining nationally but remain 33 percent higher in Appalachia than in the rest of the country. Drawing on new research for the Appalachian Regional Commission, this article traces the regional and generational patterns behind that gap, with people born between 1981 and 1999 among those most affected.

[Read more...](#)

Youth Drug Use Is Down, but Overdoses Have Risen. One Town's Schools Have a Possible Solution

A new recovery high school opening this August in Fort Kent, Maine, aims to help teens overcome substance use disorders without falling behind academically. The state's first recovery high school, and the only rural boarding recovery school of its kind in the country, will provide education, mental health support and a structured sober environment for students in recovery. Funded initially through opioid settlement dollars, the program seeks to address a lack of youth addiction services in rural Maine while keeping students connected to their communities and improving their chances of long-term recovery.

[Read more...](#)

North Carolina Expands Diversion Programs for Some Low-Level Offenses as an Alternative to Jail

This article describes the \$1.5 million expansion of Law Enforcement Assisted Diversion (LEAD) programs across North Carolina, which let officers connect people to housing and treatment instead of arresting them for low-level offenses. A Duke University evaluation of four LEAD programs finds that arrests and citations fell by about a third after referral, and that crisis-service costs dropped by half among those who enrolled. The expansion adds seven agencies, including sheriff's offices in the rural counties of Robeson and Harnett, with state officials urging counties to use opioid settlement funds.

[Read more...](#)

First Responder Fridays: Co-Responder Program Focused on Mental Health

This local news report describes a co-responder program in which the Denison, Texas Police Department pairs officers with clinicians from the Texoma Community Center on mental health crisis calls. Since launching in July 2025, the partnership has handled hundreds of calls, and of roughly 600 calls in the past year, about 70 percent of people were diverted from emergency rooms and more than 99 percent from jail, then connected to longer-term support. Officials say the model also shortens call times and frees officers to return to other duties.

[Read more...](#)

Ohio University Researchers Expand Opioid Use Disorder Treatment with Nearly \$4 Million NIH Grant to Improve Rural Primary Care Access

Researchers at Ohio University have received a four-year NIH grant of nearly \$4 million to scale a model that helps rural primary care providers prescribe medications for opioid use disorder rather than refer patients elsewhere. The project will expand the approach to about 40 clinics in Ohio and West Virginia, pairing streamlined training with ongoing mentorship from experienced prescribers, an approach shaped by interviews with rural clinicians who said existing training felt too urban-focused. The work targets the gap between evidence and practice, since these medications are well established but still underused in rural primary care, where providers often have no other prescriber in their network.

[Read more...](#)

Collaboration with Justice System Reshaping Mental Health Response

This article profiles LifeWays, a community mental health provider in Jackson and Hillsdale counties, Michigan, that has built a forensic mental health continuum connecting law enforcement, courts, and jails with treatment. The model spans crisis intervention training for officers, a clinician embedded with the Jackson Police Department to co-respond to behavioral health calls, jail-based groups that prepare people for reentry, and a new Jackson County mental health treatment court that offers treatment instead of incarceration when mental illness contributed to an offense. A voluntary program called SAFE also lets families share details about a loved one's diagnosis and triggers with dispatch before a crisis occurs.

[Read more...](#)



PROGRAMS

New Mexico Rural Justice Initiative

Run by the New Mexico Judicial Branch, the Rural Justice Initiative works to expand access to legal help in rural parts of the state, where attorney shortages leave some communities without local representation. The program offers several pathways into rural practice, including judicial externships and clerkships that place law students and graduates in rural district courts, a rural practice externship, and a rural practice incubator that supports new attorneys setting up in underserved areas. The site includes program details, resources, and applications for students, courts, and attorneys interested in taking part.

[Read more...](#)

Mercy Program Changes How Opioid Addiction is Handled in Rural Ozarks

This article describes a pilot at Mercy Hospital Lebanon, funded by the Health Resources and Services Administration, that supports rural Ozarks patients with substance use disorder during the high-risk 72 hours after opioid withdrawal. The program has since expanded to additional communities in the region.

[Read more...](#)



Photo: Jenn Speer, executive director of operations at Mercy Hospital Lebanon.

Rural Recovery Transportation Aiming to Close the Gap in Recovery Care

Peer 360 Recovery Alliance's Rural Recovery Transportation program, funded by the Mid-State Health Network, provides rides for people in recovery across three rural Michigan counties. Transportation covers recovery meetings, medication-assisted treatment, and other recovery needs, addressing one of the most persistent barriers to sustained recovery in rural areas.

[Read more...](#)

Recovery Workforce Creates Pathways to Sobriety and Stability

This article profiles the Tulalip Recovery Workforce program in Washington, which places tribal members entering sobriety or returning home from jail in entry-level tribal jobs, even without a driver's license, diploma, or GED. Work is capped at 29 hours a week so participants can meet court and treatment obligations, and nine have moved into full-time tribal positions since 2024.

[Read more...](#)

Reentry Program for Those Incarcerated Offers a Model for Us to Follow

This article describes [First Day Forward](#), a Northeast Kentucky Substance Use Response Coalition reentry program that helps people with substance use disorder return from jail to their home communities across rural northeastern Kentucky. Peer support specialists begin before release and stay in regular contact afterward, and the program reports far lower reincarceration among those who complete it. Organizers present it as a model other rural communities can adapt.

[Read more...](#)



RESEARCH

Medications for Opioid Use Disorder in Correctional Facilities: A 2022 Cross-Sectional Survey of Health Care Staff

Just over half of U.S. correctional facilities offer at least one FDA-approved medication for opioid use disorder (MOUD), but access is deeply uneven, according to a 2022 survey of staff at 212 jails, prisons, and detention centers. The study examines how facility characteristics including facility type, urban versus rural location, and geographic region, are associated with MOUD availability. Jails provide these medications more than twice as often as prisons, and facilities in the South, the Midwest, and rural areas report the largest gaps. Researchers also analyze respondents' qualitative feedback on the infrastructure and supports needed to improve continuity of care and reentry outcomes for individuals with OUD, as well as perceived barriers to providing MOUD in correctional settings.

[Read more...](#)

Combined Pharmacotherapy and Psychotherapy Impact on Opioid Use Disorder Treatment

This study in *The American Journal of Managed Care* examines whether pairing medications for opioid use disorder (MOUD) with psychotherapy lowers acute care use and costs, and whether the benefit holds in rural areas. Drawing on claims for 18,316 commercially insured adults from 2019 to 2022, it finds that in months when patients receive both treatments, emergency department visits are 33.5 percent lower, inpatient admissions 47.6 percent lower, and total cost of care 38.3 percent lower than with either treatment alone. The effects are similar for rural and urban residents, which the authors flag as important because rural patients face lower provider density, higher psychiatric comorbidity, and greater stigma. They conclude that combined, complementary OUD care is justified on both health and cost grounds, particularly where rural access is limited.

[Read more...](#)





REPORTS

Governors' Policy Actions in Rural Health Workforce

The Rural Health Transformation Program (RHTP) lets states invest in their rural health workforces. In their applications, governors describe the strategies their states plan to pursue to strengthen the rural health workforce (note that some of these proposals are under CMS review and are subject to change). This brief, part of NGA's RHTP memo action series, outlines key policy actions across several areas: career pathways, education and training, recruitment and retention, and licensure and scope of practice.

[Read more...](#)

Rural Health Transformation Program: State Focus on Behavioral Health

This analysis from the National Academy for State Health Policy examines how states are prioritizing behavioral health in their applications to the \$50 billion federal Rural Health Transformation Program. It identifies four shared approaches: integrating behavioral health into primary care, strengthening the rural crisis continuum, building the workforce, and embedding services in payment and technology investments. It also points to opportunities to braid program funds with opioid settlement dollars to reach justice-involved populations.

[Read more...](#)



The Rural Behavioral Health Crisis Continuum: Considerations and Emerging State Strategies

This brief from the National Academy for State Health Policy sets out state strategies for strengthening each level of the rural behavioral health crisis continuum, as defined by SAMHSA. It addresses challenges specific to rural areas, such as isolation, stigma, and resources that are hard to scale, and points to examples like Alaska's Behavioral Health Aide program and Wyoming's Mental Health First Aid expansion.

[Read more...](#)



RESOURCES

Reaching Rural Resource Center: Justice and Behavioral Health (R3C)

Created by the Institute for Intergovernmental Research with the State Justice Institute, the Reaching Rural Resource Center is a hub for rural communities working at the intersection of justice, behavioral health, and substance use disorder. It offers publications, webinars, program spotlights, funding sources, and evidence-based practices, including toolkits on overdose fatality review and peer support, and lets rural practitioners request no-cost tailored assistance and connect with peers nationwide.

[Read more...](#)



Transportation to VA Health Appointments in Highly Rural Areas

This Department of Veterans Affairs page helps veterans living in highly rural areas find free rides to and from VA-authorized health appointments through the Highly Rural Transportation Grants (HRTG) program. Veterans can select their state and county to get the phone number of a local provider that schedules rides, with participating counties across Alaska, Montana, Nebraska, New Mexico, the Dakotas, and other states. The page also explains how Veterans Service Organizations and state veterans agencies can apply for an HRTG grant to offer rides in their own communities.

[Read more...](#)

Building Support for a Pretrial Services Program: Six Practical Steps

Launching or growing a pretrial services program in a small or rural jurisdiction comes with its own set of hurdles, limited staff, tight budgets, and the need to bring skeptical stakeholders on board with fewer resources to make the case. This new resource from [Advancing Pretrial Policy & Research \(APPR\)](#) breaks the process into six practical steps for building the local support a pretrial program needs to succeed, with guidance that's especially relevant for jurisdictions without the staffing or infrastructure of larger counties.



This resource presents six practical steps to help jurisdictions establish a foundation for a successful pretrial services program. The guide details processes for assessing local needs, engaging key stakeholders, and defining essential program functions. It also offers recommendations for selecting an appropriate program structure and developing a clear implementation strategy. The resource includes practical tools, examples, and considerations that can be adapted for communities of all sizes.

[Read more...](#)