

# 2022 ANNUAL REPORT



ADDICTION  
POLICY FORUM

“Education is the most powerful weapon which you can use to change the world.”

- Nelson Mandela

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**7 Years of  
Service**



# Our vision is to eliminate addiction as a major health problem.

## Mission

We lead the fight against the deadly consequences of addiction and help patients, families, and communities affected by the disease.

The Addiction Policy Forum was created by families impacted by this disease. Founded in 2015, we are working in states and communities across the country to end stigma, help patients and families in crisis and translate the science around addiction.

## Strategic Priorities

1

### Help Patients and Families in Crisis

Provide new, effective resources and support for patients and families in crisis.

2

### End Addiction Stigma

Address stereotypes, prejudice and discrimination associated with substance use disorders through education and advocacy.

3

### Advance Prevention

Help communities and families take steps to prevent addiction or find it at its earliest, most treatable stage.

4

### Evidence-Based Practice

Address barriers to adoption of scientifically proven evidence and interventions around the prevention and treatment of substance use disorders.

5

### Advance Research

Facilitate patient-led research and accelerate the translation and dissemination of research findings to the SUD community.

# About Us

Founded in 2015, the vision of the Addiction Policy Forum is to eliminate addiction as a major health problem. We work in states and communities across the country to help patients and families in crisis; end addiction stigma; advance prevention; increase the uptake of evidence-based solutions, and support the translation and dissemination of research to the community. A 501 (c) 3 not-for-profit, APF is headquartered in Bethesda, Maryland and provides services in 50 U.S. states.

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**Valerie Earnshaw, Ph.D.,** Associate Professor of Human Development and Family Sciences, University of Delaware

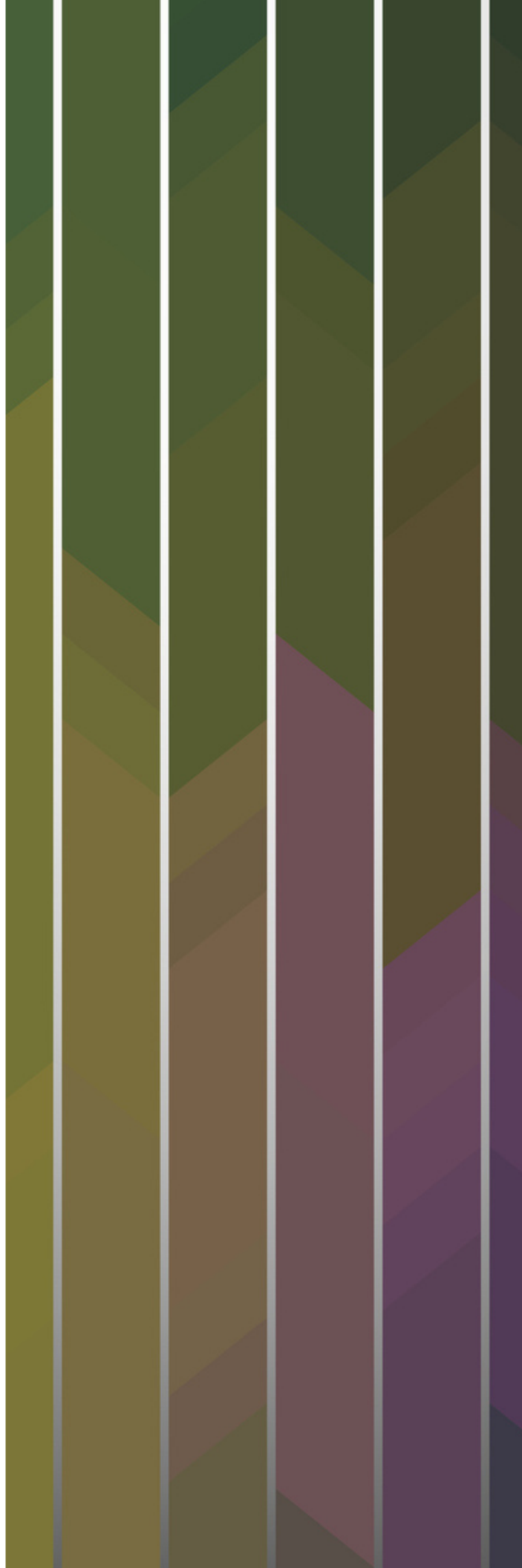
**Brian Fuehrlein, MD, Ph.D.,** Associate Professor of Psychiatry; Director, Psychiatric Emergency Room, VA Connecticut Healthcare System

**Marc Potenza, M.D. Ph.D.,** Director, Yale Center of Excellence in Gambling Research, Director, Women and Addictions Core of Women's Health Research at Yale Professor of Psychiatry, Child Study and Neurobiology, Yale University School of Medicine.

**Jack Stein, Ph.D.,** Clinical social worker, health professional trainer/educator, policy analyst, and federal manager.

# 5.4 million

patients, families, and practitioners  
impacted -- and counting



# Impact Overview



## Crisis Services

157,000

APF has provided **support and guidance** to 157,116 families, patients, key stakeholders and healthcare providers from 2015 to 2022.



## Stigma Initiative

4.73 million

APF is dedicated to **ending addiction stigma**, which prevents patients and families from engaging in needed services. To date, we have reached 4,738,610 individuals through our stigma initiative.



## Prevention Projects

477,000

APF creates **audience-specific prevention materials, resources and awareness campaigns** to prevent substance use disorder. To date, we have reached over 477,122 individuals.

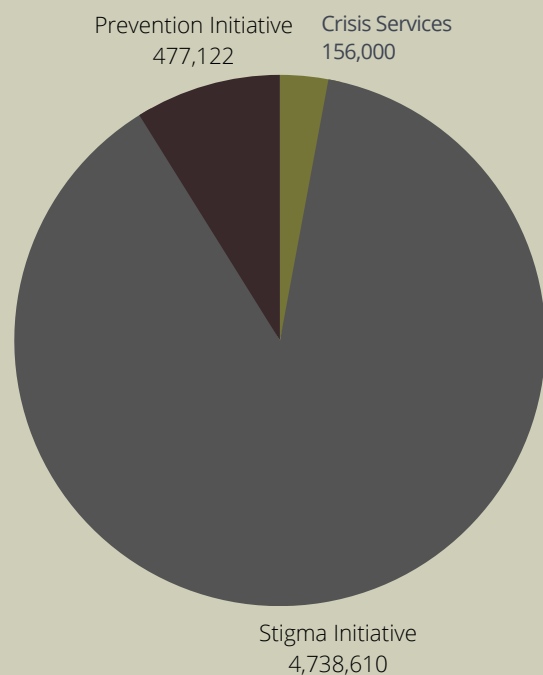


## Evidence-Based Practice

58,093

APF has trained over 58,000 practitioners about proven policies and programs to increase the uptake of evidence-based practices and programs to address addiction.

## Reach and Engagement



200 Countries



All 50  
US States

## Top 5 Countries Receiving Services

US



Canada



UK



Phillipines



India



## Countries Served through APF Programs and Services

Andorra	Cuba	Iraq	Mauritius	Sierra Leone
United Arab Emirates	Curaçao	Iran	Maldives	Senegal
Afghanistan	Cyprus	Iceland	Malawi	Somalia
Antigua & Barbuda	Czechia	Italy	Mexico	Suriname
Anguilla	Germany	Jersey	Malaysia	South Sudan
Albania	Denmark	Jamaica	Mozambique	El Salvador
Armenia	Dominica	Jordan	Namibia	Sint Maarten
Angola	Dominican Republic	Japan	Niger	Eswatini
Argentina	Algeria	Kenya	Nigeria	Turks & Caicos Islands
American Samoa	Ecuador	Kyrgyzstan	Nicaragua	Togo
Austria	Estonia	Cambodia	Netherlands	Thailand
Australia	Egypt	St. Kitts & Nevis	Norway	Tajikistan
Aruba	Western Sahara	South Korea	Nepal	Turkmenistan
Azerbaijan	Spain	Kuwait	New Zealand	Tunisia
Bosnia & Herzegovina	Ethiopia	Cayman Islands	Oman	Turkey
Barbados	Finland	Kazakhstan	Panama	Trinidad & Tobago
Bangladesh	Fiji	Laos	Peru	Taiwan
Belgium	Faroe Islands	Lebanon	French Polynesia	Tanzania
Burkina Faso	France	St. Lucia	Papua New Guinea	Ukraine
Bulgaria	Gabon	Sri Lanka	Philippines	Uganda
Bahrain	United Kingdom	Liberia	Pakistan	United States
Burundi	Grenada	Lesotho	Poland	Uruguay
Benin	Georgia	Lithuania	Puerto Rico	Uzbekistan
Bermuda	French Guiana	Luxembourg	Palestine	St. Vincent & Grenadines
Brunei	Guernsey	Latvia	Portugal	Venezuela
Bolivia	Ghana	Libya	Palau	British Virgin Islands
Brazil	Gibraltar	Morocco	Paraguay	U.S. Virgin Islands
Bahamas	Gambia	Monaco	Qatar	Vietnam
Bhutan	Guinea	Moldova	Réunion	Kosovo
Botswana	Greece	Montenegro	Romania	Yemen
Belarus	Guatemala	St. Martin	Serbia	South Africa
Belize	Guam	Madagascar	Russia	Zambia
Canada	Guyana	Marshall Islands	Rwanda	Zimbabwe
Congo - Kinshasa	Hong Kong	North Macedonia	Saudi Arabia	
Switzerland	Honduras	Mali	Solomon Islands	
Côte d'Ivoire	Croatia	Myanmar (Burma)	Seychelles	
Chile	Haiti	Mongolia	Sudan	
Cameroon	Hungary	Macao	Sweden	
China	Indonesia	Northern Mariana Islands	Singapore	
Colombia	Ireland	Martinique	Slovenia	
Costa Rica	Israel	Mauritania	Slovakia	
Cuba	India	Malta	Sierra Leone	

# Crisis Services

**157,000+**

patients and families  
received crisis services



# Crisis Services

APF has provided support and guidance to 157,116 families and patients since our launch in 2015.



## Helpline

**Calls and texts to APF's helpline** come in from professionals, loved ones of someone with a substance use disorder, people in recovery, and people struggling with their substance use and are answered by social workers and peer support specialists.



## Digital Therapeutics

**Individuals in recovery rely on APF's smartphone app** for digital recovery services and an online therapeutic community. In 2020, telehealth services were expanded to justice-involved individuals with a substance use disorder.



## enCompass

enCompass: A Comprehensive Training on Navigating Addiction is a resource for family members who are trying to navigate the complex world of addiction and help loved ones achieve recovery.



## Navigating Addiction Guide

APF developed Navigating Addiction for family members and other concerned significant others. This free resource guide and toolkit is grounded in science and explains substance use disorders, treatment options, self-care and important tools to improve confidence and knowledge in how to respond to addiction.

# Stigma Initiative

Anti-stigma projects delivered to

**4.7 million**

individuals worldwide



# Stigma Initiative

Projects in APF's anti-stigma initiative include science translation, awareness campaigns, a stigma research portfolio, distribution of educational materials and toolkits, community trainings and deployment of a free, online addiction school. To date, we have taken anti-stigma projects to 4,738,610 individuals worldwide.



## Science Translation

APF creates content that **simplifies the science of addiction**. Our leading translation series include ADDICTION: Dispelling the Myths, Language Matters, What is Addiction, and the ABCs of Addiction.



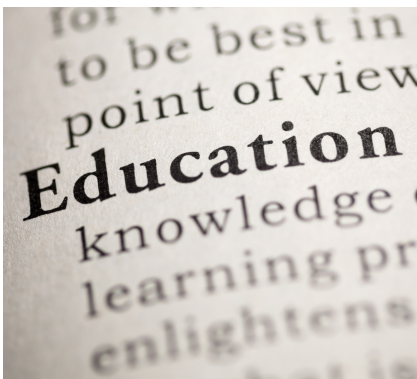
## Awareness Campaigns

APF creates **campaigns to address stigma and myths around addiction**, as well as advance prevention and treatment. Our campaigns include #StopOverdose, Stop the Stigma, Naloxone Awareness and A Message from Gramma.



## Stigma Research

APF's stigma research initiatives **measure manifestations of stigma** in the community, including stereotypes, prejudice and discrimination, to raise awareness and establish metrics and goals for stigma reduction efforts.



## Education Toolkits

Our toolkits help educate communities on key topics from overdose reversal, the science of addiction, to prescription drug disposal.



## Community Trainings

Community trainings are available in-person and virtually and bring the science of addiction and other key topics to your doorstep or computer screen.



## Addiction School

Our free, online school features courses on critical topics for patients, families, and practitioners.



# enCompass:

## A Comprehensive Training on Navigating Addiction

enCompass: A Comprehensive Training on Navigating Addiction is a resource for family members who are trying to navigate the complex world of addiction and help loved ones achieve recovery. The training includes in-depth information about substance use disorders, treatment options, communication strategies, and self-care tips. This training was created by the Addiction Policy Forum.

Like CPR training, the 8-hour course is designed to build the skills to support and respond to someone who needs help and teaches participants how to navigate and access the resources that are available in their community. In addition, by building addiction knowledge, the training can also help to reduce stigma around substance use disorders.

### Ohio Pilot

From 2021-2022, the Addiction Policy Forum and Governor Mike DeWine's RecoveryOhio Initiative partnered to deploy the enCompass training program to more than 1,600 Ohioans.

Locations were selected to prioritize the top 23 counties in Ohio that experience 80% of the overdoses in the state and coordinated with Ohio's county-operated, state supervised behavioral health system made up of area behavioral health authorities. Participants were invited to complete surveys before and after they participated in the enCompass training.

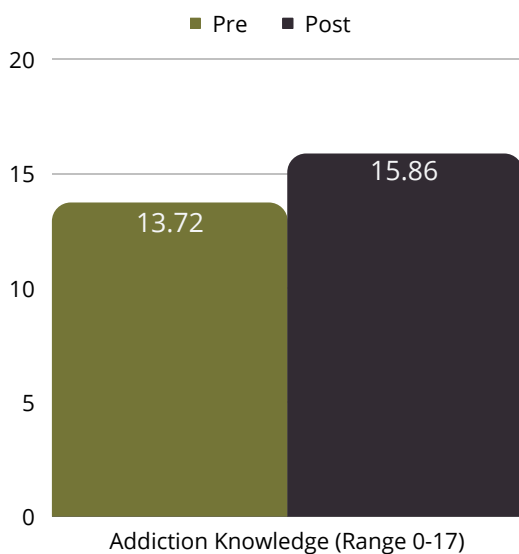
## OUTCOMES

The Y2 evaluation of the Ohio enCompass initiative was conducted by the University of Delaware. Preliminary results from the second cohort of training sites included 420 pre- and post-matched participants. The evaluation measured addiction knowledge, confidence in how to respond to a substance use disorder (SUD), and levels of stigma, including stereotypes, prejudice and discrimination.

- Knowledge about addiction increased across the board for all participants, with the greatest improvement among people that entered the training knowing the least about addiction.
- Stigma decreased across the board for all participants, with the greatest decrease among participants with lower knowledge scores on addiction.

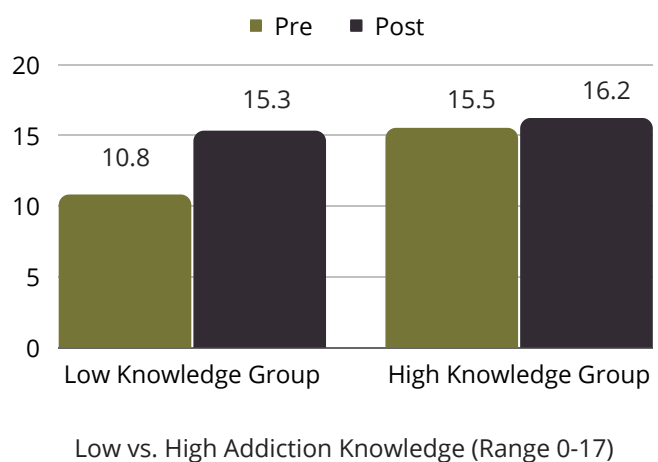
### Increased Addiction Knowledge

Data shows that knowledge improved from pre- to post-test – meaning, participants answered 13.7 out of 17 of the items on the pre-test correct, and an average of 15.9 on the post-test correct. This measure of addiction knowledge is based on a 17-point scale developed by researchers at the University of Delaware. Higher scores indicate more knowledge.



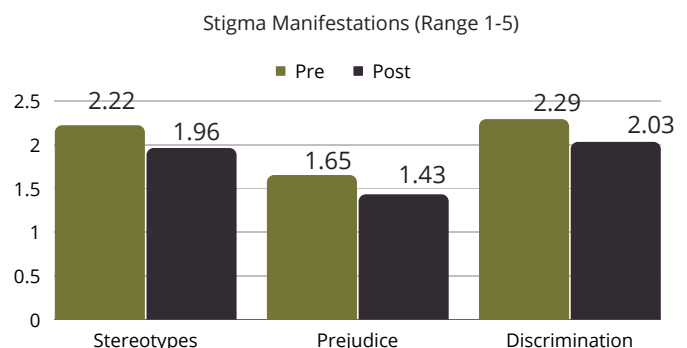
### Significant Improvements for Participants with Lower Knowledge Scores

Thirty-seven percent of the sample consisted of individuals who scored a 13 or below on the pre-test. For this lower knowledge group, average scores increased from 10.8 items, or 64% correct on the pre-test, to 15.3 items, or 90% correct on the post-test. This significant improvement would equate to going from a failing grade to an A-. The medium and high knowledge groups showed smaller average gains after the intervention – starting from an A- and moving up to a solid A.



### Reductions in Stigma

Manifestations of stigma -- including stereotypes, prejudice and discrimination -- reduced from pre- to post-test. Previously validated scales were utilized for the stigma constructs and participants generally indicated how much they agreed or disagreed with stigma items on 1 to 5 point scales. Higher scores indicate more stigma.



# Prevention Initiative

**477,000**

reached through prevention and  
education projects



# Prevention Projects



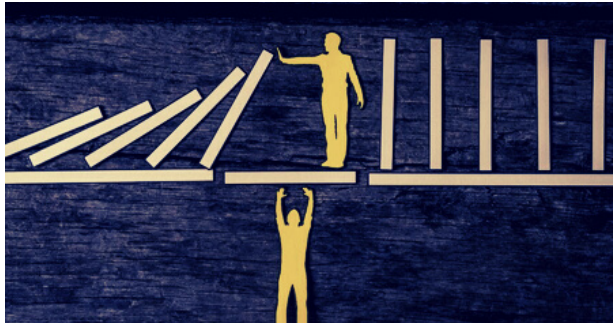
## Helping Children Impacted by Parental Substance Use Disorder

The toolkit is designed for adults who come into contact with children impacted by a parent's addiction and provides information about how to help.



## La Campaña de Prevención de Opioides

The Spanish language campaign helps prevent adolescent substance use for LatinX communities.



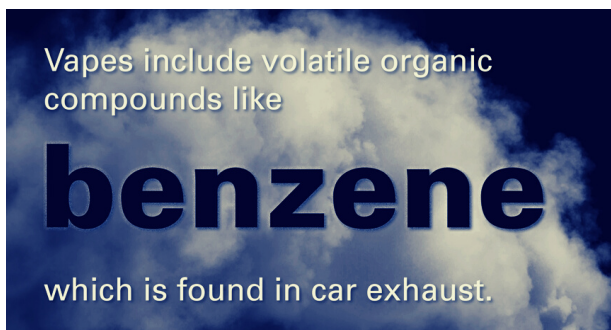
## Opioid Prevention Campaign

The Opioid Prevention Campaign is a public health media campaign to help prevent adolescent substance use.



## 10 Things Parents Can Do

The campaign for parent's and caregivers includes a toolkit and explainer video on prevention.



## Vaping: Know the Facts

A free, open-source toolkit that explains the harms associated with adolescent vaping and empowers audiences with the tools to take action.



## What is Prevention?

The campaign explains the nuts and bolts of evidence-based prevention and seeks to empower everyone to play a role—at home, at school, and throughout our communities.

# Evidence-Based Practice

**58,093**

practitioners have received resources  
on evidence-based practices

# Increasing the Uptake of Evidence-Based Practice

The barriers to translating research into practice has hampered the adoption of new treatments, tests, and clinical standards for everything from flu vaccines to diabetic eye exams to cholesterol screenings. The gap has devastating consequences when it comes to substance use disorders by creating barriers that affect patient access to evidence-based treatment, harm reduction, primary prevention, and early intervention. To change the trajectory of the substance use disorder public health crisis, the APF works to improve the gap between science and its application in the field. To date, we have provided training to over 58,000 practitioners nationwide.



## Knowledge Translation

APF translates and disseminates research findings into easy-to-consume and persuasive formats tailored for distinct audiences, including policymakers, practitioners, caregivers, and the general public. The APF team excels at translating scientific information into consumable, accessible, and actionable products that are tailored for various, non-scientific audiences. Our translation process turns complex research into easy-to-comprehend formats for diverse audiences.



## Professional Education

There are dozens of professionals and fields that play a critical role in the prevention, treatment and recovery of substance use disorders, from physicians and nurses, to teachers and school administrators, to corrections, law enforcement and court professionals. Addiction Policy Forum develops and disseminates resources, materials, eCourses, and guidance for professional audiences.



## Reports on SUD Evidence-Based Practice

There are significant challenges in the adoption, implementation, and sustainability of evidence-based practice into widespread uptake, particularly in the substance use disorder field. In fact, it is estimated that it takes an average of 17 years for scientific discovery to be adopted in daily practice, and even when adopted, only 20% of evidence-based knowledge is fully implemented into clinical practice. APF summarizes and translates science-backed interventions, policies and programs for widespread understanding and uptake to diverse fields addressing addiction nationwide.



As part of our work to improve the uptake of evidence-based practice in the field, APF is part of several “large-scale, federal-funded centers that support the field



## Justice Community Opioid Innovation Network

The Justice Community Opioid Innovation Network (JCOIN) initiative is led by the National Institute on Drug Abuse (NIDA) and funded through the NIH HEAL (Helping to End Addiction Long-term) Initiative. JCOIN is designed to advance scientific knowledge on effective policies, practices, and interventions to improve care for individuals who are justice-involved with opioid use disorder (OUD) and expand the use of these approaches into daily practice within health and justice settings. The Addiction Policy Forum is part of JCOIN's Coordination and Translation Center and is responsible for engagement with practitioners and other key stakeholders in the justice and behavioral health fields, the dissemination of products and key research findings, and translating promising interventions and approaches to improve the capacity of the justice system.



## The National Center for Health and Justice Integration for Suicide Prevention (NCHATS)

The National Center for Health and Justice Integration for Suicide Prevention (NCHATS) is a national research center funded by the National Institute of Mental Health (NIMH) meant to build information bridges between healthcare organizations and justice systems to identify individuals at risk for suicide and connect them to care. The center is led by Michigan State University, Henry Ford Health, and Brown University, with Addiction Policy Forum and 11 other institutions joining the initiative. NCHATS will evaluate the clinical and cost-effectiveness of suicide prevention activities that bridge justice contacts and community care. Specifically, the Center uses contact with the justice system as a novel indicator of suicide risk in the general population, and connects individuals at risk for suicide to community care. Addiction Policy Forum is responsible for overseeing practitioner and stakeholder engagement to inform researchers on the needs of the field and feasibility, practical application, and impact of NCHATS research, and the development and dissemination of research translation.



## NIH HEAL Connections

The NIH HEAL Connections is a new center funded by the NIH HEAL Initiative to translate HEAL research into action. The Center develops lay-friendly, culturally-appropriate information on the latest scientific findings to communities most affected by the pain, opioid and overdose crises. The center's goals are twofold: to create pathways to further build and sustain community partnerships, and to support HEAL researchers in meaningfully sharing results with communities and stakeholders that will benefit most from research findings. Addiction Policy Forum works closely with HEAL-funded scientists and community stakeholders to identify and prioritize research topics for rapid translation that have the greatest potential for research-driven practice and policy changes and address the needs and priorities of communities.



# Evidence-Based Interventions to Address the Opioid Epidemic



Addiction Policy Forum published an interactive report and assessment tool to support state and local jurisdictions in addressing the opioid epidemic. The report, *Evidence-Based Interventions to Address the Opioid Epidemic*, features 24 evidence-based strategies and programs that state, county, and local policymakers can implement to combat the effects of the substance use disorder crisis and protect communities from the harms of accidental overdose.

The report highlights strategies and interventions across children and family services, patient services, systems improvements, and policy changes. Each strategy is supported by the latest research and includes examples of well-studied or emerging programs that have demonstrated to be effective. The report also includes actionable resources, research, model programs, and other information to help policymakers, practitioners, and stakeholders improve practices and policies, institute solutions to the crisis, and bridge the gap between research and practice.



**"By advancing the uptake of effective solutions, jurisdictions can drastically improve their responses and increase patient access to evidence-based treatment, harm reduction, primary prevention, and early intervention, and ultimately change the trajectory of the substance use disorder and overdose crises."**

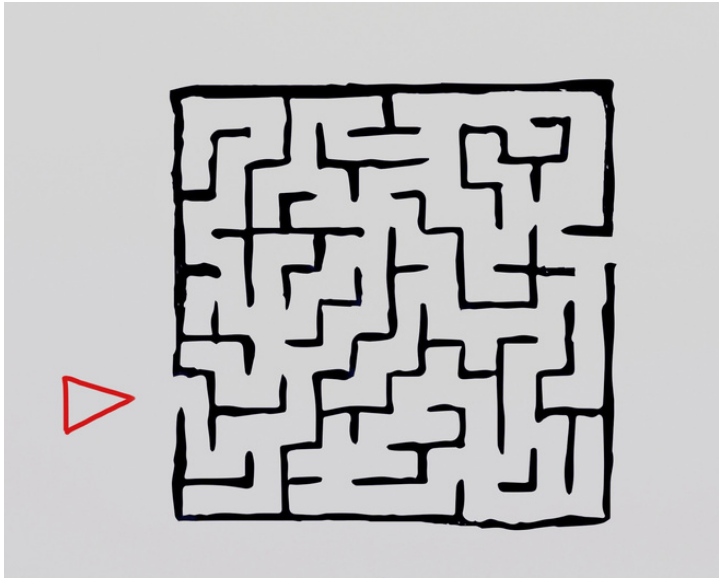
**Braeden Kelly**

Managing Director of Initiatives, Addiction Policy Forum

# Research Initiatives

# Research Initiatives

APF conducts original research on emerging issues, often bringing together experts from multiple disciplines to collaborate on complex challenges that affect our community.



## Emerging Challenges

APF has conducted research on the effects of COVID-19 on individuals with SUDs, and other topics related to the pandemic.

Research publications to date include:

- COVID-19 Pandemic Impact on Patients, Families & Individuals in Recovery from a SUD
- Trust in Healthcare and COVID-19 Readiness
- Patient Journey Map: Substance Use Disorder Treatment and Recovery Experiences

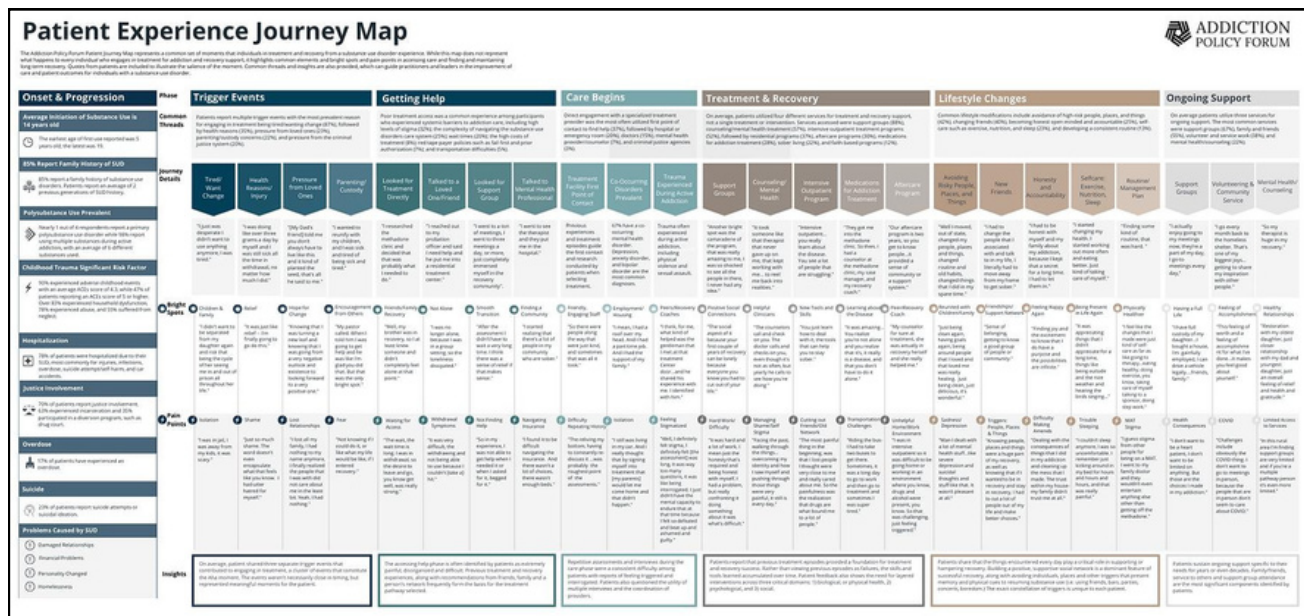


## Stigma Research

Measuring levels of stigma in communities and the effects of new interventions are key priorities for APF. Stigma-focused research publications to date include:

- Stigma Survey Report: Findings on Attitudes, Levels of Stigma and Support of Key Policies Around Addiction

# Patient Journey Map: Substance Use Disorder Treatment and Recovery Experiences



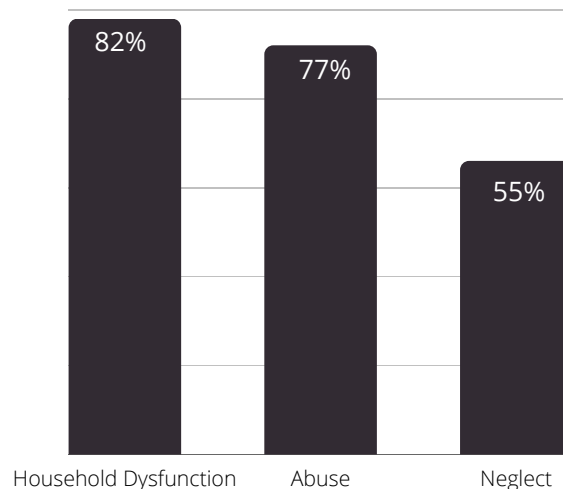
The Patient Journey Map was developed by APF through the input of patients in treatment and recovery from substance use disorders. The qualitative study included 60 Life Course History interviews of individuals in recovery from a substance use disorder (SUD) from 22 states and Canada. The APF was named one of the winners of the National Institute on Drug Abuse “Mapping Patient Journeys in Drug Addiction Treatment Challenge.”

Key takeaways include:

- Average age of first use is 14 years old, with the earliest initiation at 5 years old and the oldest at 19 years old.
- One out of four patients struggle with polysubstance use disorder and 98% report using multiple substances during active addiction.
- 85% patients report a family history of SUD, with an average of two previous generations with SUD history.
- 90% of patients experienced Adverse Childhood Events and the average ACEs score was 4.3; 47% of patients reporting an ACEs score of 5 or higher.
- Significant barriers encountered as patients try to find help, including high levels of stigma; the complexity of navigating the substance use disorders care system; wait times; the high costs of treatment; red tape payer policies such as fail first and prior authorization; and transportation difficulties.

## Frequent childhood trauma

Of the study panel, 62% had at least one adverse childhood event. Of those with childhood traumatic events, the average ACEs score was 4.5, with 32% of patients reporting an ACEs score of 5 or higher. Over 80% experienced household dysfunction, 77% experienced abuse, and 55% suffered from neglect.





## Significant barriers encountered as patients try to find help

Patients identified the accessing help phase as extremely painful, disorganized, and difficult. Poor treatment access was a common experience among participants who experienced systemic barriers to addiction care, including high levels of stigma (32%); the complexity of navigating the substance use disorders care system (25%); wait times (20%); the high costs of treatment (8%); red tape payer policies such as fail first and prior authorization (7%); and transportation difficulties (5%).

“The stigma associated with substance use. I have track marks I can't change. I can't change the scars that I have on my body, but I still get judged.”



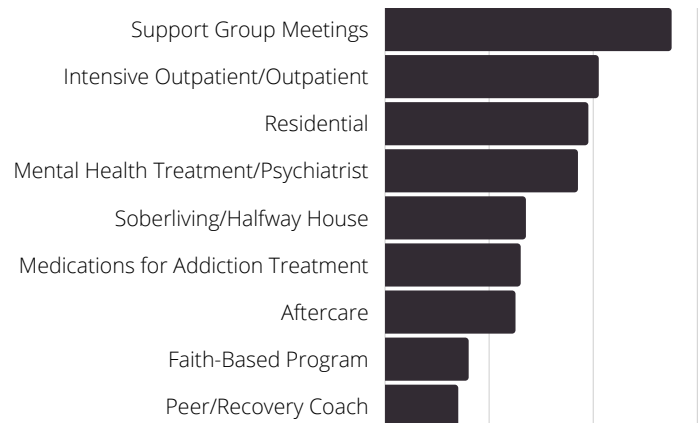
**“We worked with individuals in recovery from all different types of substance use disorder to better understand the critical elements to finding stable recovery from addiction. The Patient Journey Map highlights the challenges and pain points experienced, along with the bright spots, which provide insight for healthcare providers, policymakers, criminal justice systems and communities to improve treatment, recovery services, and prevention strategies.”**

**Jessica Hulsey**

Founder and Executive Director Addiction Policy Forum

## Multiple services utilized, not a single intervention

On average, patients utilized four different services for treatment and recovery support, not a single treatment or intervention. Services accessed were support groups (92%), intensive outpatient treatment programs (68%), followed by residential programs (66%), counseling/mental health treatment (62%), sober living (45%), medications for addiction treatment (MAT; 43%), and aftercare programs (30%).



“ I love being able to have a life that I couldn't have dreamed of over seven and a half years ago. I love the freedom. I love the serenity the peace that I have. I love that I have skills today that I can use when I'm having a really good day or a really bad day. I have a sense of purpose and meaning that largely accounts from my own spiritual beliefs and practices that I never had before. The obsession to want to use has left me. ”

-Patient Journey Map Participant

# Support Our Work

Your tax-deductible donation to the Addiction Policy Forum helps patients and families in crisis, end the stigma around addiction and improve our response to the addiction crisis nationwide.

## Single Gift

Make a single gift today to support APF's mission of ending addiction as a major health problem.

## Make an Online Donation

Visit [addictionpolicy.org](https://addictionpolicy.org) or scan the QR code below to make a donation today!

## Recurring Gift

By giving online monthly, you help APF better save time and resources by providing stable and ongoing support to change the lives of the families and communities we serve.

## Corporate Matching

Does your company provide corporate matching? Find out, and you could double the impact of your investment with a company match given to APF.

## Planned Giving

Create an enduring impact by including Addiction Policy Forum in your estate plans. Making a planned gift is a meaningful way to contribute to APF's future while providing financial and tax benefits for you and your family.



**WANT TO TALK WITH A MEMBER OF OUR TEAM ABOUT INVESTING IN APF?** Contact [info@addictionpolicy.org](mailto:info@addictionpolicy.org) with your request.



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