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## News Connection: Bridging Rural Communities December 2025 - Volume 54

### Welcome to the December 2025 RCORP-TA Newsletter!

In this issue, we highlight resources for support during the holidays, celebrate the great work of our Featured Grantee—Casa Trinity, and introduce the new Info Briefs as December's featured resources. **Happy Holidays!**



The holiday season can be filled with joy and celebration. However, this time of year can also trigger difficult emotions, thoughts, or feelings—such as stress, loneliness, and grief—that can impact mental health and substance use (including alcohol use).

Learn more about [support during the holidays](#) on the RCORP-TA Portal.



### CASA-Trinity, Inc.

CASA-Trinity presented at the November Ask-a-Grantee call. They shared a number of ideas, highlighting their campaign of tailored mailers promoting the 211 texting program connecting households with treatment and recovery resources. Learn more in Casa Trinity's [Featured Grantee writeup](#).



# Featured Resources

## New Info Briefs

Is there an unmet need for treatment? How do we measure recovery? Why do people with opioid use disorder need treatment with medication? Find the answers to these questions in the new Info Brief resources—[Methadone](#), [Recovery](#), and [MOUD](#)—on the RCORP-TA Portal.

And don't miss the [Data Storytelling Info Brief](#) we shared in last month's newsletter!

**The Facts about Methadone**

Is there an unmet need for treatment? A gap in treatment?

The American Society of Addiction Medicine notes that methadone has been used to treat opioid use disorder for over 50 years. It is the most effective treatment for opioid use disorder, with a success rate that is typically better than with abstinence. An important aspect of treatment of opioid use disorder is that it is a medication-assisted treatment (MAT) that is used in conjunction with other treatments for other health problems.

• Buffer from social peers  
• Reduce risk of overdose  
• Reduce risk of relapse  
• Reduce risk of transmission of HIV and other diseases

According to the Substance Abuse and Mental Health Services Administration (SAMHSA) methadone "at the current time—continues to be the most effective treatment available for the long-term treatment of opioid use disorder."

• Reduces risk of relapse  
• Reduces risk of overdose  
• Reduces risk of transmission of HIV and other diseases  
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Source: Substance Abuse and Mental Health Services Administration (SAMHSA) operates as a service shop for opioid use disorder treatment in America's Nation's public health system.

[View the full Info Brief](#)

**Recovery Identity and Opioid Use Disorder: Challenging Stigma Around Medication**

What is recovery?

"A process of change through which individuals improve their health and well-being in their relationships with others and in their environment." (SAMHSA)

How do we measure if there are people they are in recovery, what does that mean to them? Recovery is a process, not a destination. Recovery is a personal journey that is easily linked to a single definition. It encompasses a broad spectrum of experiences. For some, recovery is opioid use disorder (OUD) abstinence, even from prescribed medications. For others, recovery is maintaining a job, a home, and a family. For others, recovery is experiencing very little or no opioid recovery events, reflecting deep disease in substance use disorder. Recovery is a process of personal growth and development of recovery, around which varied stakeholders have rallied over the last 20 years.

• Recovery is a process, not a destination  
• Recovery is a personal journey  
• Recovery is a process of personal growth and development of recovery

Source: Substance Abuse and Mental Health Services Administration (SAMHSA) operates as a service shop for opioid use disorder treatment in America's Nation's public health system.

[View the full Info Brief](#)

**Medications for Opioid Use Disorder FAQs**

Why do people with opioid use disorder need treatment with medication?

Answers Medication for opioid use disorder (OUD) treatment  
• Medication is the best treatment for opioid use disorder because it works well and saves lives.  
• Medication is the best treatment for opioid use disorder because it works well and saves lives, because it does not treat the opioid use disorder, only the withdrawal symptoms.  
• Medication is the best treatment for opioid use disorder, focusing on the presence or absence of substances use rather than symptoms of the disorder.

Must people on medication go to counseling?

• Counseling can be helpful, but it is crucial not to be afraid for someone to receive the support they need.  
• Medic needs to join and complete their course before counseling.  
• Medication can be used in conjunction with other treatments, such as group and individual therapy, to help people with opioid use disorder manage their symptoms and improve their quality of life.  
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Why do we need a clarifying definition of recovery?

• Recovery is a process, not a destination. Recovery is a process of personal growth and development of recovery.

• For the last 20 years, recovery has been changing from an abstinence-based model to a model that emphasizes changing lives, substance-based model. The perceptions of recovery, diagnosis, framework has been changing from an abstinence-based model to a model that emphasizes changing lives, substance-based model. OUD is long allowed for non-abstinent recovery, focusing on the presence or absence of substances use rather than symptoms of the disorder.

Should people try abstinence management or residential treatment before starting a medication?

Answers 1/2

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Source: Substance Abuse and Mental Health Services Administration (SAMHSA) operates as a service shop for opioid use disorder treatment in America's Nation's public health system.

[View the full Info Brief](#)

**Data Storytelling**

**Framing the Story**

• Tell the Story Better Your Rural Data

• Purpose: To help you tell the story of your rural data, and to help you understand whether or not using your community, showing achievements, or building a case for connectivity, serving rural areas.

• Laying the Groundwork: Planning for Impactful Storytelling

• Key Questions in Ask

- Why do we tell the story, why do we want to share?
- What is our long-term impact, questions and/or questions data, full program or a specific program?
- What is our broad scope of time, program, and impact?
- Why are we telling the story, what is the message?

• Laying the Groundwork: This phase is an opportunity to identify your strengths, to analyze your weaknesses, and to plan for your growth.

• Using Both Quantitative and Qualitative Data

• Quantitative data gives us the pulse of the issue... how many people are affected, what trends are emerging, and what other data is available to support our story.

- Qualitative data gives the heart of the issue... it tells a story, it gives us the human element, it gives us the stories of the people affected by the issue.

• Together, these methods paint a fuller picture. They help us to drive our understanding, audience, and message, and to more effectively communicate using what is important and meaningful.

• Chart Example: Substance Abuse and Mental Health Services Administration (SAMHSA) operates as a service shop for opioid use disorder treatment in America's Nation's public health system.

• Data Trends & Few Examples

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Source: Substance Abuse and Mental Health Services Administration (SAMHSA) operates as a service shop for opioid use disorder treatment in America's Nation's public health system.

[View the full Info Brief](#)



## Rural Roads - The RCORPodcast

The Rural Roads Podcast is back, and new episodes are coming soon! Thank you for all of the support over our first two years. We hope the information has been helpful to you as an RCORP grantee. Check out our featured episode.

[Breaking Down the Myths and Facts about Medication for Opioid Use Disorder with Dr. C](#)



## Events

### Rural Peer Hour

- December 16, 2025, 4:00 p.m.

### Being and Becoming a Rural MOUD Provider: Live Sessions

- December 17, 2025, 1:00 p.m.

### Recovery Office Hour

- December 17, 2025, 4:00 p.m.

### Office Hours with Dr. C

- December 23, 2025, 3:00 p.m.

## Funding Opportunities

The list of funding opportunities updates continually. Check the portal regularly to view all [listings](#).

- [HRSA needs rural reviewers for grant applications](#)
- [HRSA National Health Service Corps medications for opioid use disorder training](#)
- [Rural graduate medical education planning and development](#)
- [U.S. Department of Agriculture \(USDA\) Rural Development: Community Facilities Programs](#)
- [U.S. Department of Transportation: Rural Opportunities to Use Transportation for Economic Success \(ROUTES\)](#)
- [Targeted Technical Assistance for Rural Hospitals Program](#)



### **HRSA Administrator Tours Health Centers, Speaks at National Conferences**

HRSA Administrator Tom Engels is committed to visiting grantees, meeting with community members and seeing the impact of HRSA programs first-hand. This

month, he toured HRSA-funded health centers across the country to learn about the vital work they're doing to deliver accessible, high-quality care. He also spoke at multiple national conferences, highlighting HRSA and Make America Healthy Again (MAHA) priorities and exploring opportunities to strengthen partnerships between HRSA and local, state, Tribal and community leaders.

### **New HHS Study Finds Home Visiting Services Improve Family Wellbeing**

HHS, through the Administration for Children and Families (ACF) and HRSA, released new findings from the **Mother and Infant Home Visiting Program Evaluation** (MIHOPE) study. The MIHOPE study highlights the long-term benefits to children and families participating in federally funded, evidence-based home visiting services through the **Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program**.

The results show that direct interactions between home visitors and families had statistically significant, long-term positive effects on maternal and family wellbeing outcomes by the time children reached kindergarten. The positive outcomes included:

- improvements in families' economic circumstances
- reduced family conflict and violence,
- better maternal mental and behavioral health, and
- strengthened parent-child interactions.

[\*\*Read the press release to learn more.\*\*](#)

### **Association of State and Territorial Health Officials: Rural Health Transformation Program (RHT)**

The **Rural Health Transformation Program** was established to provide an opportunity for states to invest in prevention, innovative care delivery and workforce initiatives to improve the health of rural residents. Created under the One Big Beautiful Bill Act, the program will provide \$50 billion over 5 years (2026–2030) through the Centers for Medicare and Medicaid Services to eligible states.

Read the Association of State and Territorial Health Officials blog post, [\*\*Understanding and Applying for the Rural Health Transformation Program\*\*](#), to learn about program requirements and the application process.





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