



CONNECTIONS

Partnering to Accelerate Research into Action

HEAL Connections is a center that is jointly run by Duke Clinical Research Institute and George Mason University and funded by the National Institutes of Health (NIH) through the Helping to End Addiction Long-term® Initiative, or NIH HEAL Initiative®. HEAL Connections is aimed at supporting widespread dissemination and implementation of HEAL-funded research. HEAL Connections is funded by the NIH HEAL Initiative under OTA numbers: 10T20D034479 and 10T20D034481.

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#NIHhealInitiative

HEAL CONNECTIONS SHARING SESSION

August 28 | 1PM EDT

Community Partner Insights to Strengthen Research Dissemination— Focus on Pain



Helen "Skip" Skipper (she/her) Executive Director, NYC Justice Peer Initiative, Person with Lived Experience of Pain



Aryn Lee (she/her) Pre-Med Student, Boston University, Person with Lived Experience of Pain



Christin Veasley
(she/her)
Co-Founder and Director,
Chronic Pain Research Alliance



Kavitha Neerukonda, JD, MHA (she/her) Associate Executive Director, Quality and Research Initiatives, AAPMR

TODAY'S AGENDA



Community Partner
Insights to Strengthen
Research Dissemination—
Focus on Pain

1:00 | Introduction

1:05 to 1:35 | Flash talk introductions from panelists

1:35 to 2:05 p.m. | Facilitated panel discussion

2:05 to 2:25 p.m. | Q&A, peer-to-peer engagement



Learning Objectives

Hear from people with lived and living experience of pain, as well as the association partners who support them, about the best formats and channels to engage their communities in research and results sharing.

Learn successful approaches to identifying and engaging stakeholders to reach communities and populations experiencing pain.



Meet the Panelists

Pain Community Partner Insights to Strengthen Research Dissemination

Kavitha Neerukonda, JD, MHA American Academy of Physical Medicine & Rehabilitation



AAPM&R

- National medical specialty society of physiatrists (~10K)
- Physiatrists are MDs or Dos who specialize in disability and function



The **essential medical experts** in value-based evaluation, diagnosis and management of neuromusculoskeletal and disabling conditions.

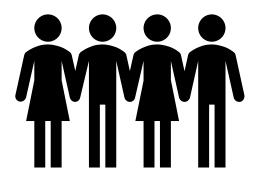
Indispensable leaders in directing rehabilitation and recovery, vital to optimizing outcomes and function early and throughout the continuum of patient care.

Traditional Ways of Conducting & Disseminating Research is Shifting



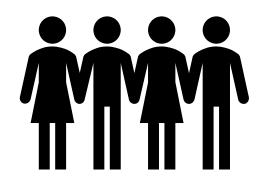








Traditional Ways of Conducting & Disseminating Research is Shifting











AAPM&R Long COVID Journey

National Call to Action

- 35+ patient orgs signed on
- 35+ provider orgs signed on
- 10+ hospital systems and corporations signed on

Multi-Disciplinary Collaborative

- 40+ Post COVID Clinics
- Shared Learnings
- Commitment to develop consensus guidance

Consensus Guidance + Additional Publications

- 10 publications to date
- methodology, fatigue, cognitive symptoms, breathing discomfort, cardiovascular complications, children and adolescents, autonomic dysfunction, neurologic sequalae, mental health sequelae
- Methodology and clinic infrastructure survey results

Compendium Statement (In Progress)

 Multi-disciplinary collaborative guidance on the assessment and treatment of patients with Long COVID: A Compendium Statement President Biden and Congress: America needs a comprehensive national plan to meet and defeat the Long COVID crisis.



Millions of Americans have survived COVID-19. Months later, many still struggle to get out of bed.

These to 10 million are continuing to saffer from a surge of destillating conditions which has peaked for morths—even after they're recovered from the Initial virus infection. "Lang COVID" symptoms—including neurological challenges, continuity problem such as brain fog, shortness of breath, firstgue, pain, and mobility such as brain fog, shortness of breath, firstgue, pain, and mobility bases—can prevent come patient from walking under their own power, let alone climbing a flight of stains. These patients are buridly, Arts os is our economy. Getting

Long COVID has no easy solutions.
The best medial senior at NNL WhO and the LOC are work
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of the country for the long of the long of the long of the long COVID cases have begun persping in select areas of the
country force progress have begun persping in select areas of the
country force progress have been made, but millions of Long
COVID patients need a coordinated weylo access care. Then
We have an opportunity right now to avent the next orios of
the pandemic.

Urgently needed: a national crisis management plan that surrounds and coordinates all aspects our Long COVID response. America can solve and defeat the Long COVID threat. But this effort can't succeed without marshalling all resources in a coordinated national plan. Such a program needs to provide a case infrastructure on many levels, all working in lock step.

comprehensive national plan should include: esources to build necessary infrastructure. Rehabilitation care infrastructure and funding to meet this crisis. Resources for local health vustems for the necessary facilities

Equitable access to care for patients.

• Timely and local access to multidaciplinary care.

• Address inequities in the U.S. healthcare system that result in diminished access to sustained quality care because of racial,

Research to advance medical understanding of Long COVID.

Congress has has funded research of Post-Acute Sequelae of SARS-CoV-2 relection (PASC), and the NIN, WHO and CDC as working to advance our inderstanding of Long COVID-valuad issues. This is applicable, and the effort most cortinue. As research is conducted, results are needed in real-time to

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systems for the necessary facilities atients and provide expert care. nt for care.

aapm&r

American Assaferes of Physical Reductors and Robal Ration

www.aapmr.org





Strong Partnerships Start At the Ideation Stage



And Translate into Broader Dissemination



THANK YOU!

Kavitha Neerukonda, JD, MHA
Associate Executive Director, Quality and Research Initiatives
kneerukonda@aapmr.org



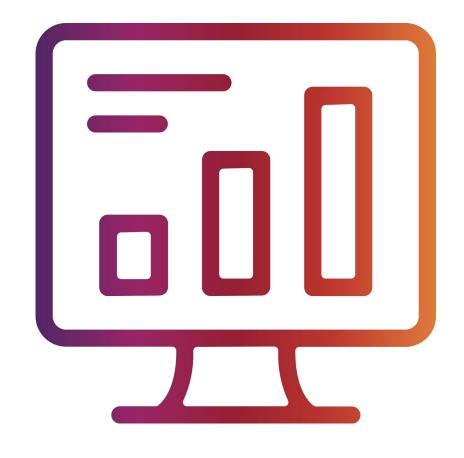
Panel

Q&A

Meeting Evaluation

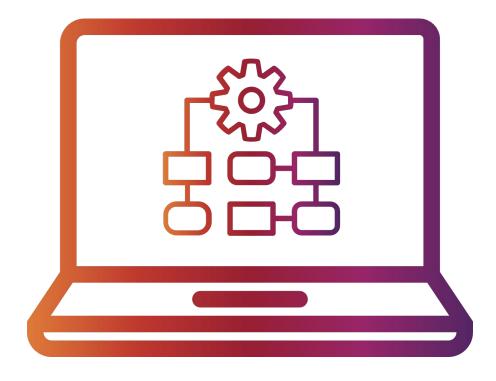
To help design, contribute to, and improve our programming, please complete the evaluation survey at





Stay tuned for post-event follow-up emails with:

- Within one day: Evaluation survey
- Within two weeks: Recording, slides, list of resources



HEAL CONNECTIONS SHARING SESSION

OUD Community Partner Insights to Strengthen Research Dissemination

October 10 | 1PM ET





Register at

bit.ly/communityrissa Kluk

partner-insights (she/they)

Doctoral Student at

East Tennessee State University



Arielle Estes
(she/her)
Certified Peer Recovery Specialist,
Social Work Student at
Rutgers University



Anthony Salandy, PhD, MSc (he/him) Senior Director of Development and Business Strategy, National Harm Reduction Coalition

