



The College on Problems  
of Drug Dependence

INTERNATIONAL

# NEWS LINE

WINTER 2026

Highlighting how substance use science is strengthened when we embrace local context and foster collaborative partnerships across borders.

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International Committee*



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Dear Colleagues,

This special **International Issue** of the *CPDD Newslines* features seven research highlights that show how substance use science advances when we take local context seriously and build partnerships across borders. These contributions were collected by the CPDD International Committee as part of its ongoing work to advance its mission: to encourage substance use research and treatment at the international level by recognizing promising scientists and supporting CPDD members in other countries in promoting the scientific study of substance use disorders.

The projects span settings as different as Brazilian public outpatient programs, Canadian and U.S. health data systems, Caribbean communities, and prevention and clinical work informed by lived realities in Colombia, Pakistan, West Africa, and Europe. Collectively, they underscore that innovation often comes from meeting real constraints head-on, whether that means adapting evidence-based interventions to resource-constrained systems, navigating distinct ethical and regulatory environments, or developing methods that can travel across languages, cultures, and health infrastructures.

A consistent throughline is the practical wisdom these researchers share. Several highlights focus on what it takes to do rigorous work internationally: building durable relationships and researcher exchange pathways, harmonizing definitions and data structures across jurisdictions, and designing surveys and protocols that fit cultural meaning, literacy contexts, and real-world constraints like connectivity and fatigue. Others show how policy environments and service systems shape both risk and recovery, from evolving cannabis surveillance across countries to how legalization shifts the workload and incentives within drug courts. The “lessons learned” across profiles are not add-ons; they are transferable field-tested guidance for anyone trying to do science that is both rigorous and usable.

Finally, we hope this issue functions as a catalyst. Many featured researchers explicitly invite new collaborations, listing countries of interest, types of partners sought, and areas of expertise they can offer, ranging from clinical trials and digital health tools, to epidemiology and policy, to community-based prevention and narrative-based interventions. We encourage readers to reach out, ask questions, and explore shared problems from different vantage points. If these eight highlights do their job, they won't just broaden our perspective; they'll seed new cross-continental collaborations that strengthen the science and accelerate solutions for substance use and related harms worldwide.

Warmly,

Laura Brandt, Ph.D.

Former Chair, CPDD International Committee



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### **Description of Research**

This significant research from Pakistan explores the relationship between illness perception, coping strategies, and quality of life among male hashish users. Key findings reveal that higher illness perception correlates with lower quality of life, while effective coping strategies mediate this relationship, improving well-being. The study, involving 300 participants from rehabilitation centers, highlights the importance of addressing psychological and behavioral aspects in addiction treatment. Problem-focused coping showed positive associations with quality of life, whereas avoidance strategies were less effective. This research underscores the need for targeted interventions to enhance the use of problem-focused coping mechanisms and to reduce negative illness perceptions, offering valuable insights for improving outcomes in substance use disorders. Limitations include a male-only sample, suggesting future studies should expand to broader demographics.

### **Lessons Learned**

The lesson I learned from this research is that illness perception negatively impacts quality of life in hashish users, but effective coping strategies—particularly problem-focused approaches—can mitigate this effect. Key lessons include: (1) addressing illness perceptions in addiction treatment is crucial for improving well-being; (2) promoting adaptive coping mechanisms such as problem-solving over avoidance enhances recovery outcomes; and (3) psychological interventions should integrate coping skills training to counteract substance-related distress. The study underscores the need for holistic, perception-focused therapies in addiction care while calling for future research with diverse populations.

### **International Collaborations**

*Current international collaboration countries: Nill*

**Seeking new international collaborations!**

**Expertise offered:** Substance use disorder research; Clinical research and trials; Behavioral science and psychology; Neuroscience and pharmacology; Harm reduction and prevention strategies; Community-based research and engagement; Treatment and intervention development.

**Countries of interest:** USA, UK, Canada, Hong Kong, the Netherlands, Switzerland, Sweden, and Italy.  
**Types of collaborators sought:** Substance use disorder experts/researchers; Policymakers or regulatory agencies; Clinicians or treatment providers; Psychologists or behavioral scientists; Neuroscientists or pharmacologists; Funding agencies or grant collaborators.

**Andre Miguel, PhD**  
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*App-based Contingency Management intervention among individuals receiving alcohol use disorder treatment in public outpatient settings in Brazil*

Region(s): Brazil

Focus Area: Contingency Management

Key Takeaway: Evaluate the effectiveness of incorporating app-based CM into public ambulatory treatments in Brazil.

### **Description of Research**

This project includes two studies: The first study is a pilot trial using a within-subject A-B-A design to investigate the feasibility and acceptability of a mobile application that reinforces alcohol abstinence through a contingency management approach (n=12; data collection concluded). The second study is a randomized controlled trial (n=120; data collection to initiate in November 2025) designed to evaluate the effectiveness of this application in promoting alcohol abstinence and treatment retention when applied in an ambulatory public treatment setting in Brazil. It represents a collaboration focused on adapting evidence-based behavioral interventions to resource-constrained public health systems, promoting technology-enabled care in global addiction treatment.

#### *Editorial Note:*

Working with our Brazilian colleagues from the University of Sao Paulo, our group has developed the TRIS app (*Tratamento Remoto com Incentivos à Sobriedade* which translates to Remote Treatment with Incentives for Sobriety). TRIS is the first app-based Contingency Management intervention for alcohol use disorder developed in Brazil. It was designed to be readily absorbed by the Brazilian public health system. This study aims to evaluate its efficacy in promoting alcohol abstinence and treatment adherence when applied as an adjunctive intervention to the standard treatment provided by Brazilian public ambulatory treatment programs.



## Lessons Learned

- Researchers from the University of Sao Paulo were very accessible and easy to work with. In the last few years we developed great collaborations on this and other projects.
- The University of Sao Paulo direct line of communication with local and state governments, together with Brazil's Unified health system, allowed for an easy access to public treatment programs. Both treatment provider and administrative personal from the two treatment programs we are working with were very accessible and eager to assist us. Both factors contribute to make Brazil an ideal place to run effectiveness studies in "real" public health settings.
- The Brazilian IRB process is different from what is commonly seen in the US and may take a little longer. They also have different rules for ethical approval. For instance, no payment for study participation is allowed.
- Use of REDCap or other data capturing system are fairly novel and much of their research data are still collected on paper. Plan a head and allow your team some time to be trained in these types of software.
- Costs for conducting research in this setting are extremely low, offering new opportunities for scalable studies.

## International Collaborations

*Current international collaboration countries: Brazil*

**Seeking new international collaborations!**

**Countries of interest:** South American countries

**Types of collaborators sought:** Substance use disorder experts/researchers; Clinicians or treatment providers; Psychologists or behavioral scientists; Neuroscientists or pharmacologists; Funding agencies or grant collaborators; Multilateral organizations (WHO, UNODC, PAHO).

**Expertise offered:** Substance use disorder research; Clinical research and trials; Epidemiology and data analysis; Behavioral science and psychology; Neuroscience and pharmacology; Treatment and intervention development; Technology and digital health solutions.

Learn more and register at [cpdd.org](http://cpdd.org)

# 88TH ANNUAL MEETING

*Oregon Convention Center &  
Hyatt Regency Portland*

June 13-17, 2026

# PORTLAND OREGON

## INTERNATIONAL ACTIVITIES IN PORTLAND

### INTERNATIONAL FORUM

*From Connections to Collaboration: Building Global  
Partnerships in Substance Use Disorder Research.*

Saturday, 13 June 2026

**Anees Bahji, MD, PhD(c), FRCPC**  
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### *Improving Cannabis Use Disorder Case Definitions Across National Health Data Systems*

Region(s): Canada, United States

Focus Area: Epidemiology, Substance Use Surveillance, Machine Learning Methods

Key Takeaway: Accurate identification of cannabis use disorder in health data requires harmonized definitions and advanced analytic methods to capture evolving clinical patterns and guide public health policy.

### **Description of Research**

Dr. Bahji's research focuses on validating and refining case definitions for cannabis use disorder (CUD) using large-scale administrative and survey datasets. This work bridges epidemiology and data science to improve population-level surveillance and enhance comparability across healthcare systems. By integrating statistical modeling and machine-learning approaches, the project seeks to address gaps in diagnostic coding and create robust tools for international research and policy evaluation. Ongoing collaborations in Canada and the United States highlight the potential for harmonized approaches to monitoring cannabis-related harms and improving the evidence base for addiction psychiatry and public health.

### *Editorial Note:*

This project is part of a broader effort to modernize substance use disorder surveillance and strengthen the interface between clinical data, epidemiology, and policy development.

### **Lessons Learned**

Cross-national addiction research reveals both technical and conceptual challenges: aligning coding systems, ensuring data privacy, and navigating differences in health service delivery. Effective collaboration requires shared language around diagnostic criteria and a willingness to adapt analytic frameworks to local contexts. These projects also underscore that data harmonization is as much about relationships as it is about methodology – sustained communication, trust, and mutual understanding are essential for success. Through this work, Dr. Bahji and colleagues emphasize that rigorous methodology and transparent collaboration are key to advancing substance use epidemiology globally.



## ***International Collaborations***

*Current international collaboration countries: Canada, United States*

**Seeking new international collaborations!**

**Countries of interest:** Any

**Types of collaborators sought:** Community stakeholders; Substance use disorder experts/researchers; Public health professionals; Policymakers or regulatory agencies; Clinicians or treatment providers; Epidemiologists or data scientists; Psychologists or behavioral scientists; Neuroscientists or pharmacologists; Nonprofit organizations or advocacy groups; Industry partners (biotech, pharma, technology); Funding agencies or grant collaborators; Multilateral organizations (WHO, UNODC, PAHO).

**Expertise offered:** Substance use disorder research; Epidemiology and data analysis; Public health policy; Grant writing and research funding strategies.

“Connecting with addiction experts worldwide fills me with gratitude and is an honor. During a recent trip to Malaysia, a CPDD colleague generously arranged visits to addiction treatment centers.

Dr.Lalchhanhima Ralte MBBS, MPH  
International Committee Chair

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MEMBERSHIP  
TODAY.**

**CPDD.ORG**

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***Drug Court Professionals' Perspectives on Marijuana Legalization  
Implications for the Drug Court System***

Region(s): North America

Focus Area: Marijuana legalization, Recovery of people with drug use disorders

Key Takeaway: Drug courts' focus should be on recovery and not to be distracted by the legality or otherwise of a substance.

***Description of Research***

As of November 2025, more than 24 U.S. states have legalized marijuana for adult recreational use. With marijuana users forming a substantial portion of drug-court participants, the policy shift raises critical questions for the Drug Court System (DCS). This qualitative study explored marijuana legalization (ML) implications for the DCS from drug court professionals' perspective. Purposive sampling was used to identify 13 knowledgeable drug court professionals from six marijuana-legalized states. Data were collected through individual semi-structured interviews. Findings indicated that ML has positive and negative implications for the DCS. Negative ML implications include the introduction of complications and increased workload in the DCS. Positively, ML may be a source of income for the DCS through ML taxation. ML was also found to enhance harm reduction in the DCS. Findings may help drug court practitioners, administrators, and managers improve the operations of the DCS in the era of ML.

***Lessons Learned***

Collecting data in another country can be daunting due to costs and limited access to respondents. To succeed, three factors proved crucial: persistence, networking, and focus. Building relationships with the National Association of Drug Court Professionals was key; I attended two of their annual conferences before data collection. Although initial recruitment challenges arose, maintaining focus on my research objectives and persistent outreach eventually yielded more participants than anticipated, reinforcing the importance of preparation and perseverance.

***International Collaborations***

**Seeking new international collaborations!**

**Countries of interest:** Any

**Types of collaborators sought:** Substance use disorder experts/researchers; Policymakers or regulatory agencies; Nonprofit organizations or advocacy groups.

**Expertise offered:** Substance use disorder research; Behavioral science and psychology; Harm reduction and prevention strategies; Treatment and intervention development.

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***Mental Health and Hazardous Alcohol Use: A Rapid Appraisal in Sint Maarten, Netherland Antilles***

Region(s): Sint Maarten, Netherland Antilles

Focus Area: Alcohol Misuse, Mental Health

Key Takeaway: Intervention and prevention efforts in Sint Maarten, Netherland Antilles should focus on addressing the comorbidities between hazardous alcohol use and mental health problems, as well as modifying perceived norms of hazardous drinking.

***Description of Research***

The purpose of this study was to examine the prevalence of hazardous drinking and the unique association of correlates of substance use on hazardous drinking in Sint Maarten, Netherland Antilles in the Caribbean. Participants were recruited across four regions of Sint Maarten. Relevant measures included demographics, hazardous alcohol use, family history of alcohol abuse, motivations for drinking, perceived same-age, same-sex norms for hazardous alcohol use, history of adverse childhood events (ACEs), and perceptions of overall mental health. Among 81 adults, twenty-three percent met the criteria for hazardous alcohol use, 34% reported having a family history of alcohol abuse, 74% reported experiencing at least one ACE, and 67% endorsed experiencing at least one symptom of mental health problems. More symptoms of mental health problems were associated with hazardous drinking among those with greater perceived norms for hazardous drinking and those with more motives for drinking.

***Editorial Note:***

Substance use, especially alcohol use, is a significant public health issue in the Caribbean. Although there are estimates of substance use and alcohol use across the Caribbean, there are none from Sint Maarten, the Netherlands Antilles, in the Dutch West Indies. There is no literature examining well-known correlates of substance/alcohol use in the Caribbean.



## Lessons Learned

- Local context matters: Survey questions and constructs may not translate conceptually across cultures. For example, “trust,” “privacy,” or “well-being” may hold different meanings.
- Pretest in-country: Pilot testing within the actual population is crucial to detect issues with language, clarity, or cultural fit.
- Visual and literacy accommodations: In low-literacy settings, consider using audio, pictorial scales, or interviewer-administered formats.
- Survey length and fatigue: Long surveys may lead to poor-quality data; this risk increases in lower-resource settings.
- Include community stakeholders early in the design process for buy-in and cultural alignment.
- Compensation must be appropriate, culturally acceptable, and not coercive.
- Internet and mobile access: In many regions, digital surveys may not be feasible. Consider offline-capable platforms or paper surveys.
- Power and connectivity issues can delay or disrupt data collection. 9) Work with lay health workers, whom the community trusts.

## International Collaborations

*Current international collaboration countries: Sint Maarten, Netherland Antilles, Dutch West Indies, and Slovenia.*

**Seeking new international collaborations!**

**Countries of interest:** Any

**Types of collaborators sought:** Community Stakeholders; Policymakers or Regulatory Agencies; Neuroscientists or Pharmacologists; Nonprofit Organizations or Advocacy Groups; Industry Partners (e.g., Biotech, Pharma, Technology); Funding Agencies or Grant Collaborators; Multilateral Organizations (e.g., WHO, UNDOC, PAHO).

**Expertise offered:** Substance Use Disorder Research; Clinical Research and Trials; Epidemiology and Data Analysis; Behavioral Science and Psychology; Harm Reduction and Prevention Strategies; Community-Based Research and Engagement; Treatment and Intervention Development; Grant Writing and Research Funding Strategies.

**Maria Melchior, D.Sci**  
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### ***Social Inequalities in Substance Use***

Region(s): France

Focus Area: Tobacco, Alcohol, Cannabis

Key Takeaway: Broadening of social inequalities in substance use not addressed by universal policies.

### ***Description of Research***

This project investigates social inequalities in substance use, emphasizing that universal prevention strategies alone are insufficient to address disparities across socioeconomic groups. The research highlights how social determinants such as education, income, and occupation shape vulnerability to substance use and treatment access. By leveraging large-scale population data, the project seeks to identify mechanisms driving these inequalities and inform the development of targeted interventions aimed at reducing disparities and improving health equity in substance use prevention and treatment.

### ***Lessons Learned***

Social inequalities are pervasive across societies and strongly influence patterns of substance use and related harms. This work demonstrates that universal interventions do not adequately reduce these disparities. Instead, targeted strategies that address structural determinants—such as poverty, stigma, and access to care—are necessary. Key lessons include the need for cross-disciplinary collaboration, culturally sensitive approaches, and ongoing policy advocacy to mitigate inequities in substance use outcomes.

### ***International Collaborations***

*Current international collaboration countries: USA, India, Denmark*

**Seeking new international collaborations!**

**Countries of interest:** Denmark

**Types of collaborators sought:** Epidemiologists or data scientists; Psychologists or behavioral scientists; Multilateral organizations (WHO, UNODC, PAHO).

**Expertise offered:** Epidemiology and data analysis; Grant writing and research funding strategies.

**Sterling M. McPherson, PhD**  
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*From pilot within-subject studies to phase II double-blind randomized clinical trials. An in-depth exposure to different clinical trial designs in substance use disorder treatment research*

Region(s): Spokane, WA & São Paulo, Brazil

Focus Area: Medication development and integrated treatments for people with co-addiction

Key Takeaway: Hands-on experience across multiple clinical trial designs evaluating both pharmacological and behavioral interventions for substance use disorders.

### **Description of Research**

We are currently hosting a Postdoctoral Fellow from Brazil. We have had an MOU in place for several years, and it has been an enormously fruitful collaboration with the exchange of data, ideas, and researchers. We have access to a large dataset with significant potential to support new collaborations and grant proposals. Our Postdoctoral Fellow, Dr. Paola Palombo, is spending one year with us before returning to Brazil. She joined with a strong foundation in basic neuroscience, and through this fellowship she is being immersed in the world of clinical trials and therapeutics, expanding her research scope across disciplines.

#### *Editorial Note:*

Our Analytics and PsychoPharmacology Laboratory began working with colleagues in Brazil over 10 years ago through our main collaborator, Dr. André Miguel. This collaboration has since grown significantly in large part due to his efforts which has resulted in a strong and growing relationship that includes the work of Dr. Palombo.

### **Lessons Learned**

Substance use takes very different forms across the world, as do treatment approaches. Immersive exchanges with international partners provide opportunities to learn from diverse systems and contexts. When hosting scholars from abroad, setting them up for success is crucial—ensuring language is not a barrier, integrating them fully into the research group, and exposing them to new perspectives. Such experiences benefit both the visiting scholars and the host institution, deepening global understanding and fostering mutual growth in research and practice.

*Work in Collaboration with: Andre Miguel, PhD and Paola Palombo, PhD (pictured above)*



## **International Collaborations**

Current international collaboration countries: Brazil, UK, Germany, and the Netherlands. Past or developing collaborations include Ecuador, Iran, Syria, and China.

**Seeking new international collaborations!**

**Countries of interest:** Any

**Types of collaborators sought:** Substance use disorder experts/researchers; Neuroscientists or pharmacologists; Industry partners (biotech, pharma, technology); Funding agencies or grant collaborators; Multilateral organizations (WHO, UNODC, PAHO).

**Expertise offered:** Clinical research and trials; Neuroscience and pharmacology; Treatment and intervention development; Technology and digital health solutions.



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INTERNATIONAL

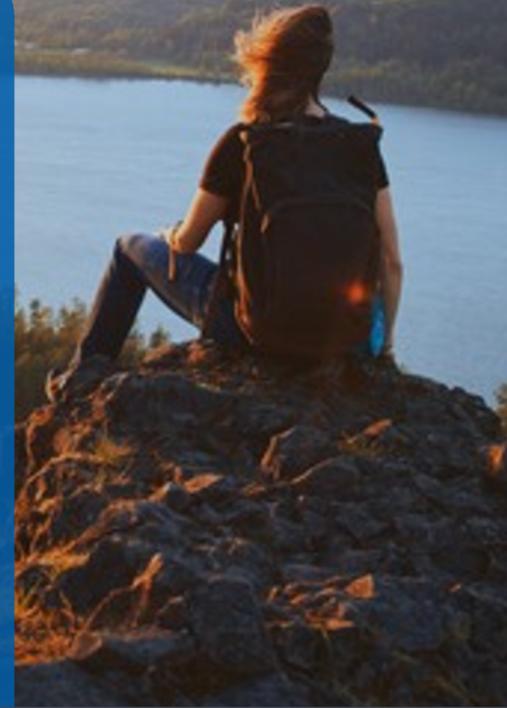
# Travel awards



The National Institute on Drug Abuse (NIDA) and CPDD support International Travel Awards for substance abuse researchers from low-income, lower-middle-income, or upper middle-income countries (as defined by the World Bank) to participate in the CPDD Annual Scientific Meeting, and associated research training activities.

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Travel Awards for 2026 are closed, but be on the lookout for more information on 2027 Travel Awards this Fall.





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of Drug Dependence**