

IRI Impact Highlights

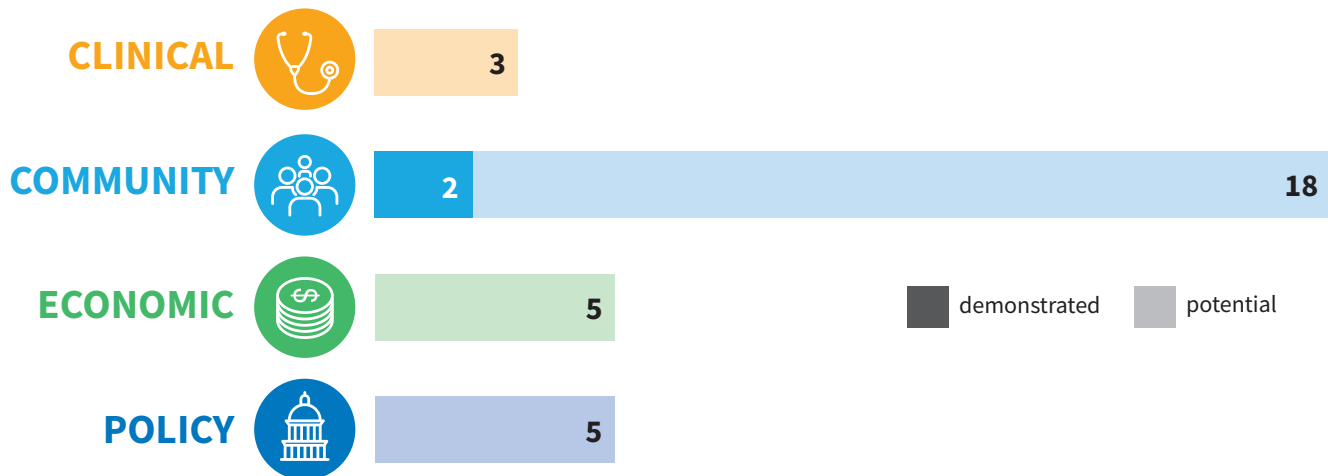
A set of 3 case studies from the **2024 IRI cohort** developed with the **Translational Science Benefits Model** framework

In partnership with the Implementation Research Institute, the Translational Science Benefits Model project developed three impact case studies demonstrating how implementation science can improve health services and change communities. The case studies showcase the impact of IRI fellows' and alums' work, and the impact of the IRI itself as a mentored network.



iri.wustl.edu

Together, the IRI projects identified **33 TSBM benefits**, 2 demonstrated and 31 potential (expected to be realized in the future).



Building Bridges between Primary and Mental Health Care for Latino/a/e Youth



PI: ALLISON STAFFORD, PHD, RN



Allison Stafford's study tests strategies to bridge gaps between primary care and mental health services for Latino/a/e youth with depression. Despite experiencing higher rates of depressive symptoms than non-Latino/a/e white peers, Latino/a/e teens are less likely to receive treatment due to cost, provider shortages, and long wait times. The intervention combines one-on-one support from community health workers with training for primary care providers and interpreters to deliver culturally and linguistically appropriate care. This approach aims to reduce disparities in treatment access, improve lifelong wellbeing, and support equitable outcomes for Latino/a/e youth. Findings may also help justify reimbursement for community health worker services as an essential strategy for addressing health inequities. Read the [case study](#) on our website.



Promoting Emotional Stability to Improve Cardiovascular Health in Chicago's South Side Community



PI: ALLISON J. CARROLL, PHD



Allison J. Carroll's study in Chicago's South Side is testing strategies to improve cardiovascular health among African American adults with hypertension by addressing depression, a condition that complicates blood pressure control and heightens cardiovascular risk. Working closely with a Community Advisory Board, the team identified neighborhood factors influencing depression and adapted an intervention through community partnership. The project centers on M-Body, a mindfulness-based stress reduction program culturally tailored for African American adults and delivered in faith-based settings. The approach seeks to reduce stigma, strengthen mental health resources, and engage community members in managing both depression and cardiovascular risk. Findings may lead to improved clinical outcomes, reduced health disparities, and new models for integrating mental health and primary care in underserved communities. Read the [case study](#) on our website.



Increasing Access to Buprenorphine in Rural Primary Care



PI: BERKELEY FRANZ, PHD



Berkeley Franz's community-engaged study is testing the Buprenorphine Prescribing Support Program (BPSP) to expand access to treatment for opioid use disorder in rural communities. Developed at Ohio University's Heritage College of Osteopathic Medicine, the BPSP combines an online training module with a live booster session to support rural primary care providers. The program addresses common barriers such as stigma, safety concerns, and misinformation that contribute to low buprenorphine prescribing rates, despite the medication's proven effectiveness in reducing overdoses and infectious disease spread. Grounded in social contact theory, the intervention seeks to reduce stigma and encourage wider adoption of buprenorphine in primary care. If successful, the study may improve health outcomes, reduce overdose deaths, and shape clinic-level policies to strengthen opioid use disorder care in rural areas. Read the [case study](#) on our website.



For these and other case studies, visit translationalsciencebenefits.wustl.edu/case-study