

Addictology

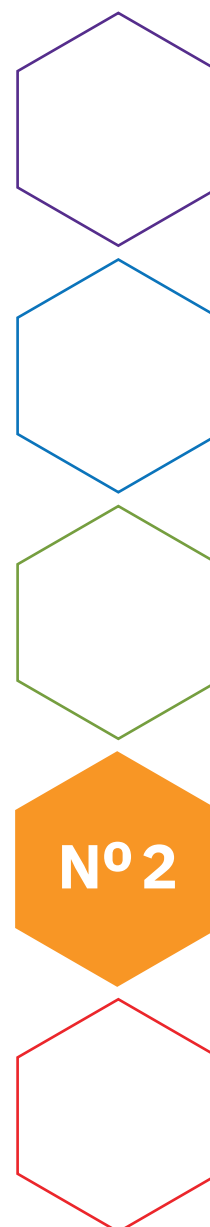
Adiktologie

PROFESSIONAL
JOURNAL FOR
THE PREVENTION,
TREATMENT OF,
AND RESEARCH
INTO ADDICTION

ORIGINAL PAPER

Pilot Training of Stakeholders on Alternatives to Incarceration for People Who Use Drugs in Contact with the Criminal Justice System in Nigeria: Lessons Learned and Future Directions

AGWOGIE, M. O., AMANKWAAH, D.,
KOOMSON, S. E. N.



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ISAJE – International Society
of Addiction Journal Editors

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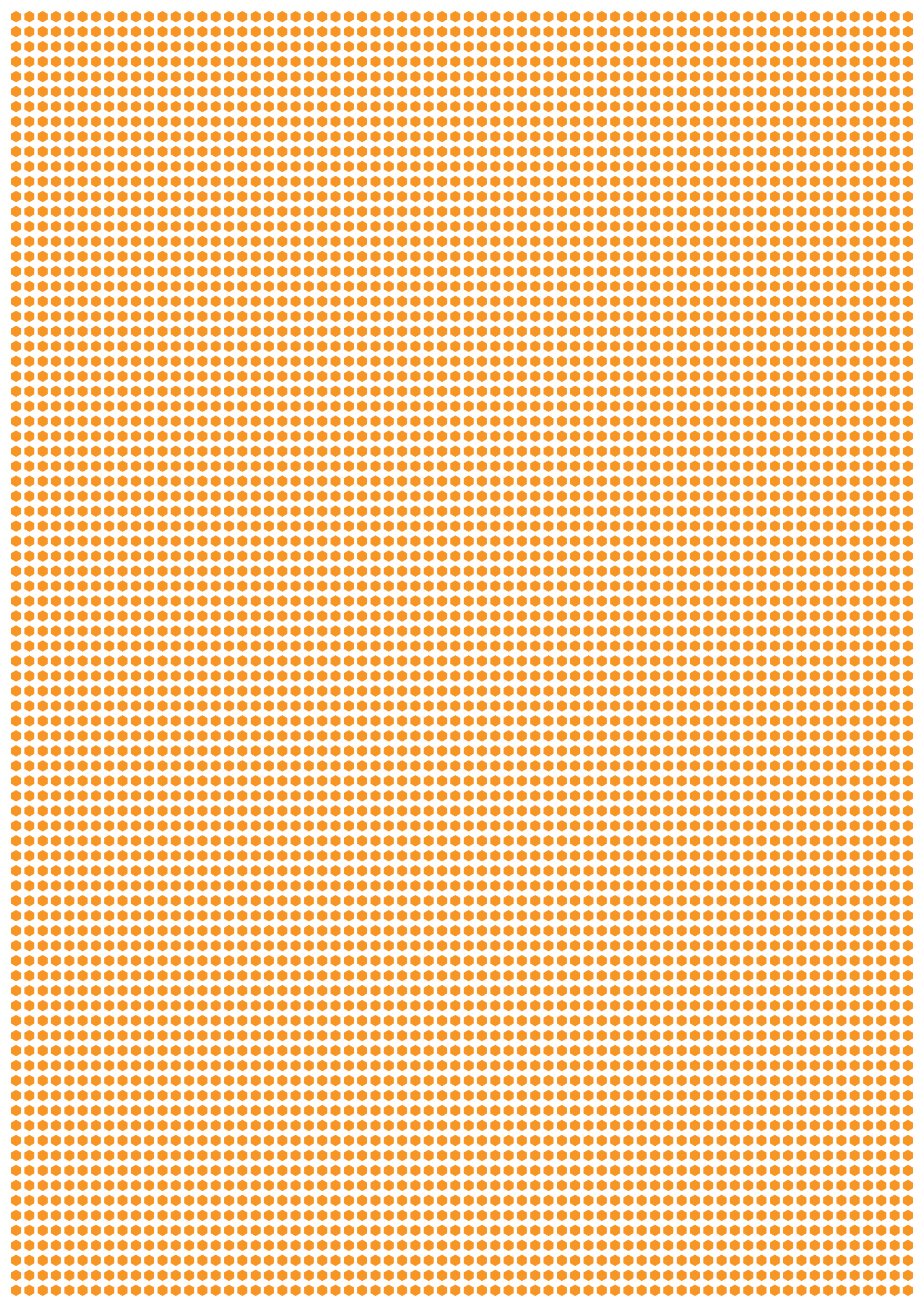
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Articles range from studies on education, training, and fostering professionalism in addiction professionals, prevention and treatment research, public health interventions, and studies employing methods from epidemiology, economics, historical and cultural aspects of substance use.

Original research, scholarly reviews, policy analyses, editorials, commentaries, and book reviews aim to stimulate and support internationally relevant and quality communication between science and prevention, clinical, and decision making practices. Journal continually supports translation of science to practice and policy.

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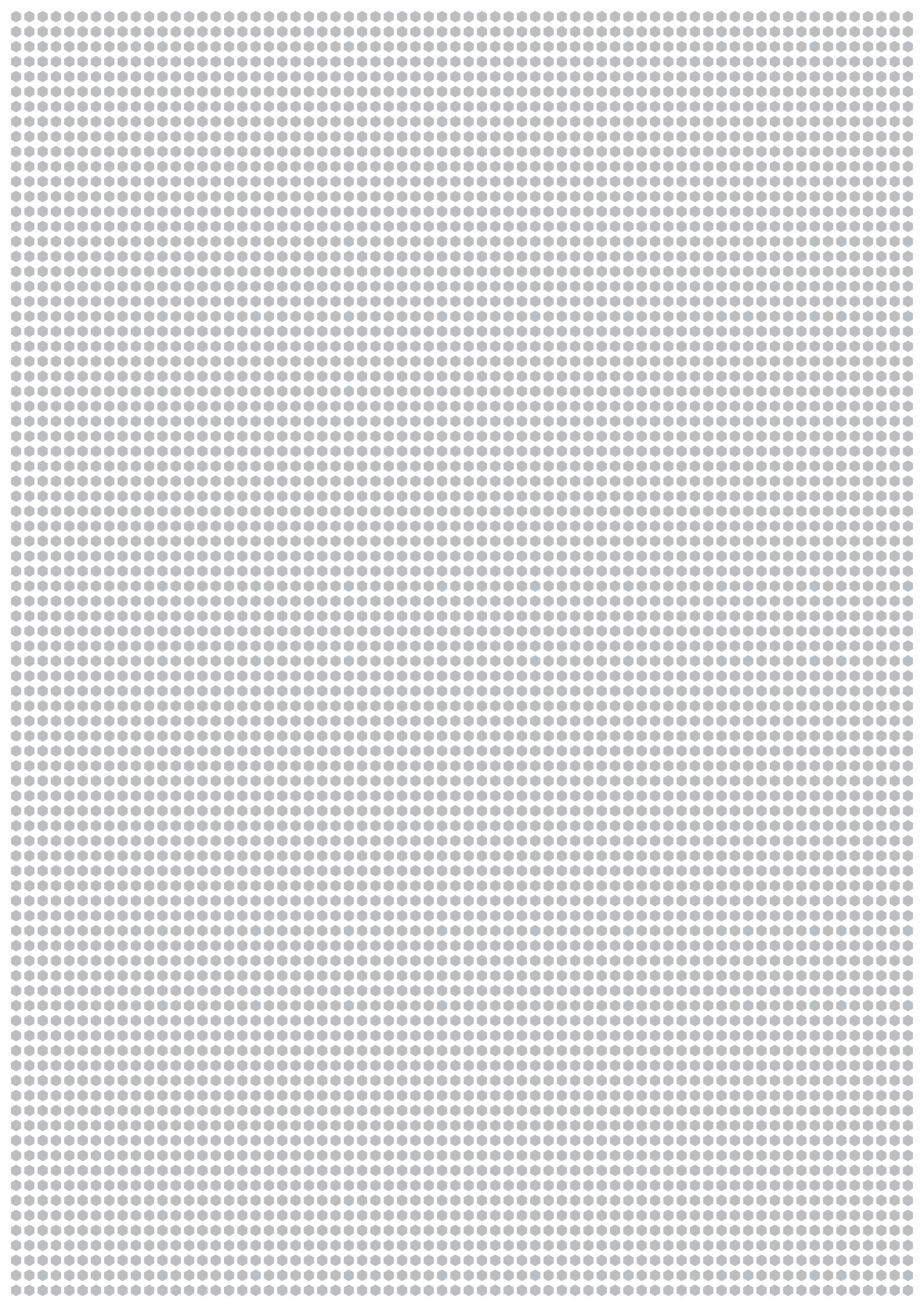
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Pilot Training of Stakeholders on Alternatives to Incarceration for People Who Use Drugs in Contact with the Criminal Justice System in Nigeria: Lessons Learned and Future Directions

AGWOGIE, M. O., AMANKWAAH, D., KOOMSON, S. E. N.

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From Evidence to Implementation: Building Responsive Systems in Contemporary Addictology

Contemporary addictology is increasingly concerned not only with generating scientific evidence, but also with understanding how such evidence can be translated into sustainable prevention, treatment, recovery, and policy responses. Effective interventions do not operate in isolation. Their impact depends on professional competencies, institutional capacity, social and cultural context, appropriate measurement, technological infrastructure, and public policies capable of supporting implementation. The five studies in this issue approach these challenges from different perspectives, spanning prevention education, digital behaviour, prevention infrastructure, recovery, and criminal justice. Together, they illustrate the expanding scope of addiction science and the growing importance of interconnecting evidence with the systems in which it is expected to function.

The first study focuses on professional capacity in substance-use prevention and demonstrates the potential of blended education combining digital and face-to-face learning. Improvements in participants' knowledge were accompanied by important lessons about implementation: flexibility and self-paced learning were valued, but contextual relevance, interaction, appropriate course design, and opportunities for discussion remained essential. The study therefore illustrates a broader principle relevant to prevention science: access to evidence is not equivalent to the capacity to apply it.

The second study addresses another dimension of the contemporary digital environment. Among young adults, Fear of Missing Out (FOMO) was associated with problematic social media use, phubbing, depressive symptoms, greater intensity of social networking site use, and lower life satisfaction. Although the cross-sectional design does not permit causal interpretation, the findings underline the increasing relevance of digitally mediated behaviour for prevention, psychological well-being, and clinical practice. Taken together, the first two studies illustrate the dual role of digital technologies: they can expand opportunities for education and prevention while simultaneously creating environments in which new behavioural vulnerabilities may develop.

The third study shifts attention from individual programmes to the infrastructure required to sustain evidence-based prevention. A national digital platform integrating preventive interventions, professional education, quality assurance, mon-

itoring, and stakeholder communication demonstrates how prevention can be supported at the system level. Its broader message is particularly important: evidence-based prevention is not simply a collection of evidence-based programmes. It also requires trained professionals, implementation support, quality standards, monitoring mechanisms, and institutional coordination. Digital infrastructure may facilitate these processes, but it cannot by itself guarantee the quality or effectiveness of prevention.

The fourth study brings a complementary perspective from recovery research. The Czech adaptation of the Multidimensional Inventory of Recovery Capital (MIRC) provides a promising approach to measuring resources that may support recovery. High internal consistency and the strong relationship between recovery capital and quality of life support its potential relevance, while the observed overlap among some dimensions also indicates areas requiring further investigation. Importantly, recovery capital broadens attention beyond symptoms and treatment completion toward the personal, social, material, and cultural resources that may enable sustained recovery and improve quality of life.

The final study extends the evidence-to-implementation perspective to the criminal justice system. Pilot training on alternatives to incarceration for people, who use drugs demonstrated improvements in knowledge and strong perceptions of feasibility, while also revealing barriers related to institutional resistance, resources, stigma, professional capacity, and policy implementation. The study highlights a distinction that is relevant across the entire issue: feasibility is not the same as implementation, and implementation is not the same as sustainable impact. Long-term change requires collaboration among professionals, institutions, communities, and policymakers.

The characteristic study of this issue lies in precisely bringing these different levels of addictology into a single scientific perspective. Individual psychological processes, professional competencies, prevention infrastructure, recovery resources, and institutional reform are often examined separately. Here, they can be read as interconnected components of a broader addiction-response system. This creates a particularly valuable dialogue between science, professional practice, and public policy.



For practitioners and experts, the issue emphasizes the importance of translating evidence into usable tools, competencies, and interventions. For scientific teams, it highlights the need to move beyond asking whether an intervention works toward examining for whom it works, under which conditions, and whether its effects can be sustained. For policymakers, the implications are equally clear: investment in evidence-based programmes have to be accompanied by investment in workforce capacity, implementation support, monitoring, quality assurance, and institutional coordination.

Therefore, the broader message of this issue is straightforward but consequential. Evidence achieves its full value only when the systems surrounding it are capable of making it actionable. The five studies illustrate different stages of this process and collectively reinforce the need for an addictology that is evidence-based, context-sensitive, implementation-aware, recovery-oriented, and policy-relevant. In this relation, among scientific knowledge, professional practice, and system capacity lies both the originality of the present issue and one of the central challenges for contemporary addiction science.

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