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Evaluation of an Innovative Medical-Legal Partnership in Camden, NJ: Implications for Practice and Research

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Abstract

The challenge: Medical–Legal Partnerships (MLPs) incorporate legal services into healthcare settings to address the intertwined legal, social, and health challenges faced by patients. Research has shown that MLPs effectively address unmet legal needs and reduce health disparities (Klein et al., 2013). This study evaluated a Medical-Legal Partnership (MLP) coordinated between the Camden Coalition and the Cooper Center for Healing in Camden, NJ.

Potential consequences: Addressing the legal needs of individuals with SUDs through MLPs can mitigate barriers to recovery, improve health outcomes, and enhance quality of life.

Description/ analysis/methods: Researchers used a mixed-methods design to evaluate the Camden Coalition MLP. Data were collected through interviews with 39 MLP participants and 13 staff members and a survey of 70 MLP participants. Analyses explored legal needs, service delivery, and participant outcomes.

Rationale/reflection/replication: The findings highlighted the MLP's comprehensive approach, which included direct legal representation in both criminal and civil matters, the co-location of services, and interdisciplinary collaboration among providing partners. Participants reported high satisfaction, positive recovery-related outcomes, and confidence in addressing future legal

issues. This model offers a replicable framework for integrating legal and medical care to address social determinants of health and foster recovery. Key lessons include the importance of multidisciplinary collaboration and sustained funding mechanisms.

Keywords: evaluation, medical-legal partnership, campus-community partnerships, determinants of health, collaborative research

Introduction

New Jersey, like many states across the country, has struggled with the opioid epidemic. Camden County is among the hardest-hit counties across the state, ranking second out of New Jersey's 21 counties in fatalities from 2015 to 2021 (NJ CARES, 2023). Overdose fatalities in Camden County, New Jersey, increased by 121.25% from 2013 to 2022 (NJ CARES, 2023). Camden County also saw the second-highest number of drug deaths and the second-highest number of drug-related distribution and possession arrests during that time period (Rotuno-Johnson, 2022). With 7,390 treatment admissions (2,301 for alcohol and 5,089 for drugs), Camden County had the third-highest substance use treatment admissions in the state in 2022. Camden County borders the Delaware River in New Jersey and is home to half a million people (523, 485). The median household income is $83,763 ($99,781 in New Jersey), and the poverty rate is 12.5% (9.7% in New Jersey) (U.S. Census, American Community Survey, 2023). The median age is 39 (40 in New Jersey), and Camden County residents are majority White. Camden City is the county's largest city with 71,791 residents. The median household income is $35,129, and the poverty rate is 26.8% (U.S. Census, American Community Survey, 2023). The median age is 38.3, and residents are predominantly people of color (Black and Hispanic). In Camden City, there were 2,081 admissions (464 for alcohol, 1,617 for drugs) in 2021, the highest substance use admissions count in the County and more than three times the admissions count of the next highest municipality (632 in Gloucester Township) (New Jersey Department of Human Services, 2022; Rotuno-Johnson, 2022).

In the United States, adults with criminal legal system (CLS) exposure, such as arrests, probation, or incarceration, are more likely to experience substance use disorders and drug-related overdoses (Ford, Ortiz, Schepis & McCabe, 2022). Individuals with substance use disorders often face compounded legal and social challenges, including housing instability, limited access to benefits, and employment barriers, which hinder recovery and well-being (Pulitzer et al., 2021). Additionally, people who struggle with substance use challenges often face stigmas from loved ones, healthcare providers, and society at large (Chang et al., 2016). Substance use challenges can be isolating, and individuals can be shamed for their addictions (Chang et al., 2016). Prior research has highlighted the range of legal needs among the client population of an addictions medicine clinic, showing top legal needs as housing, government benefits, debt management, mental health treatment, and employment (WRI, 2020). Research has emphasized the importance of integrated, low-barrier reentry programs that function as "one-stop shops" to support individuals with a history of substance use in addressing health, employment, housing, and legal challenges (Pulitzer et al., 2021).

Medical-Legal Partnerships

Medical-legal partnerships (MLPs) incorporate legal expertise into healthcare settings, allowing lawyers to collaborate with clinicians to address structural issues contributing to health inequities. Some MLPs operate in a "referral model," where there is limited interaction between medical and legal teams beyond initial referrals. Other MLPs use an "integrated care model" where MLP attorneys work closely with the healthcare team as an interdisciplinary unit (Mantel & Fowler, 2020). MLPs provide direct service to clients and address a variety of legal concerns that impact patients' health (Tobin-Tyler & Tietelbaum, 2019). Research has shown that MLPs effectively address unmet legal needs and reduce health disparities (Klein et al., 2013). One study highlighted that MLPs enhance access to resources, boost adherence to preventive care, reduce acute care use, and improve both physical and mental health outcomes, with patients reporting reduced stress and increased well-being after engaging with an MLP (Hsieh, 2021). Another study found that patients referred to an MLP experienced significantly less stress and fewer emergency department visits (Liaw et al., 2022).

The Camden Coalition Medical-Legal Partnership

Attorneys in the Camden Coalition's MLP work closely with the staff of Cooper Center for Healing, an innovative addictions medicine care center based at Cooper University Health Care in Camden City, NJ. Both Camden Coalition and the Cooper Center for Healing are situated in a shared building space in downtown, metropolitan Camden City. The Camden Coalition is a multidisciplinary, community-based nonprofit working to improve care for people with complex health and social needs in the city of Camden, across New Jersey, and around the country.

The Cooper Center for Healing is an integrated center that provides innovative, compassionate care for patients with substance use disorder (SUD), pain, trauma, and psychiatric disorders. The center's medical specialists in addiction medicine, toxicology, emergency medicine (EM), emergency medical services (EMS), internal medicine, family medicine, and psychiatry provide interdisciplinary specialty care in hospital, ambulatory, and community settings. The center also has a robust interdisciplinary clinical team of behavioral health clinicians, nurses, and navigator specialists who offer wraparound services to patients in a biopsychosocial model, including helping them to address social determinants of health (SDOH). The SDOH are the elements that make up a person's environment, and they explain how the environment can affect health and quality of life outcomes (CDC, 2018). The five main SDOHs are economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context.

Legal issues can present significant barriers to health and recovery, particularly for people with complex health and social needs. To address this challenge, the Camden Coalition and Rutgers Law School launched a Medical-Legal Partnership (MLP) in November 2017, integrating legal services into healthcare settings to better serve community members involved in the Coalition's

complex care interventions. The program began with a consulting attorney joining the Coalition's complex care team of nurses, social workers, and community health workers, and has since expanded to include additional attorney fellows. Currently, three MLP attorneys work in close partnership with the Cooper Center for Healing.

The partnership streamlines the ability to share data between the agencies and supports referrals from the Cooper Center for Healing healthcare providers to the Camden Coalition MLP legal staff (Spiegel et al., 2023). Anyone treated at Cooper Center for Healing is eligible for the MLP. Following a referral, attorneys meet with patients who become MLP participants to determine their legal needs and collaboratively create a course of action. The Camden Coalition MLP is unique among medical-legal partnerships in that attorneys provide direct representation in defending criminal matters (Spiegel et al., 2023). Other legal services provided include representation for housing matters, legal advice around securing public benefits, issues regarding court fines and fees, and other matters.

The Current Study

The focus of the current research project was to understand the experiences of MLP program participants served through the MLP and to understand how the MLP is meeting the legal needs of its program participant population. The main research questions were, for MLP participants: 1) *What does participant use of MLP services, engagements across the health care and legal system(s), and progress in recovery look like?* and 2) *How is the MLP meeting/serving participant needs?,* and for CCH/MLP staff: 3) *How is the MLP operating?*

Methods

Through a convergent mixed-methods design, this research conducted qualitative research (e.g., interviews) with patients, staff, and leadership of CCH and MLP, and a quantitative survey of MLP participants. A research team from a local metropolitan university research center (the Senator Walter Rand Institute for Public Affairs at Rutgers University- Camden) led the project, in collaboration with the Cooper Center for Healing and the Camden Coalition. The use of multiple qualitative and quantitative data collection methods for this study was chosen to help facilitate data triangulation and understand MLP operations in a comprehensive manner (Nastasi et al., 2017). A gap exists in mixed methods research among MLPs, as past research has not settled on an established and best standard of MLP programs nor best practices for evaluations of MLPs (Nerlinger et al., 2021; Tobin-Tyler & Teitelbaum, 2019; Trott et al., 2019). There is a need to use qualitative process data and quantitative outcome data within an evaluation framework to best develop, test, and refine MLP programs, locally and nationally, and the evaluation of the Camden Coalition/CCH MLP will provide additional research to support this body of work moving forward (Nastasi et al., 2017; Needleman & Needleman, 1996).

Participants and Procedures

This research conducted interviews with 39 MLP participants and 13 Camden Coalition MLP and Cooper Center for Healing staff, and conducted a brief survey of 70 MLP participants. Data collection involved interviews with MLP participants and program staff and a survey of MLP participants. Recruitment for data collection occurred through targeted email, text messages, phone calls, and in-person outreach for interview and survey participants. The researchers involved in this project are Collaborative Institutional Training Initiative (CITI) Human Subjects Research-certified, and this project was approved by the Rutgers University and Cooper University Health Care Institutional Review Boards (IRB). Data confidentiality was a key part of the project process. Two separate interview guides were developed for interviews with the MLP staff and interviews with the MLP participants. For MLP participants, topics addressed overall experience with the MLP, specifics for what the MLP did and how it helped, and recommendations. For staff interviews, topics addressed the goals of the MLP, barriers and opportunities in MLP operations, the role of medical-legal partnerships, and recommendations and ideas for future sustainability. A survey was developed for distribution to the MLP participants that included sections on legal needs, recovery capital, MLP staff engagement, and ability to address legal needs (Best, 2012; Boccaccini et al., 2002; Groshova et al., 2013; Valsaint et al., 2017). Camden Coalition provided additional demographic data to merge with the MLP participant survey data. The university research team conducted all interviews with MLP participants and MLP staff to maintain consistency across data collection. The study's purpose and procedures were explained to each potential participant, and informed consent was obtained from each individual.

Interview recruitment took place from January to April 2024, and the study PI reached out to 17 staff individuals involved with the MLP operations. Staff included current addictions medicine physicians, behavioral specialists, psychiatrists, Cooper Center for Healing directors, patient navigators, MLP attorneys, and the MLP main consulting attorney. The research team engaged in at least three outreach attempts per contact. The research team held 13 interviews with MLP staff in person or on the WebEx virtual platform. Interviews were recorded, and interview data were transcribed. Each interviewee received a $40 VISA gift card.

Recruitment took place from February 2024 to April 2024, and the research team reached out to 242 individuals who were current and former clients/patients of the MLP program from February 2022 through April 2024. At least three engagement attempts were conducted for each individual. Each outreach attempt included the survey link and asked if the potential participants would like to engage in an interview. The university research team held 39 interviews with MLP participants in person, on the WebEx virtual platform, or on the phone. Interviews were recorded, and interview data were transcribed. Participants received a $40 VISA gift card for completing the survey and/or the interview (up to a total of $80). For the MLP participant

survey, the study's purpose was explained in the consent form embedded at the beginning of the survey, and informed consent was obtained from each individual participating. Each person completed the survey on a computer or cell phone. Seventy individuals completed the survey.

Analysis

Audio data from the MLP staff interviews and the MLP client/patient interviews were sent to a transcription company. Data were entered into NVivo 14, a research software, for analysis. The data from interviews, separated by staff and client/patient interviews, were first open-coded by the research team to identify key topic areas. Researchers then met to discuss individual theme lists. They worked collaboratively to compile a final list of themes from the data, resulting in a consensus codebook of six key themes for the MLP staff and four key themes for MLP clients/patients. The codebook was then used to code the focus group and interview data. Following survey data collection, responses were reviewed for discrepancies and duplicates, and the data were cleaned up to account for multiple responses and non-responses. Secondary data from the Camden Coalition were combined with the survey data set for analysis. The statistical program SPSS was used to run descriptive and inferential statistics.

Findings

Interviews with MLP Staff

Goals of the MLP

One of the primary goals of the MLP is to provide integrated care that considers the full spectrum of challenges faced by clients/patients. One staff participant explained, "Our goal is to provide care that's not just about treating the addiction but also addressing the underlying legal and social issues that contribute to it. By working together, we can help [clients/patients] stabilize their lives in a more comprehensive way." This holistic approach recognizes that health is influenced by a wide range of factors, many of which are legal in nature. One participant highlighted the direct impact of legal issues on health, noting that, "Many of our [clients/patients] face legal issues that are directly tied to their health. If they're at risk of eviction or can't access benefits, it can derail their recovery. The MLP helps remove these barriers so they can focus on getting better." The MLP also aims to promote hope and human dignity among clients/patients who often feel marginalized and overlooked. "For so many of our [clients]/patients, they feel like the world has given up on them. We want to show them that we care, that they matter. When they see us fighting for their rights, it gives them a reason to keep going, to believe in themselves again," one participant explained. This emphasis on dignity and support underscores the MLP's commitment to treating clients/patients not just as cases to be managed but as individuals deserving of respect and compassion. A client/patient-centered approach is central to the MLP's work.

Value and Importance of Legal Help in Recovery

The MLP program focuses on legal aid as a standard component of medical care and is essential to overall well-being. This approach recognizes that recovery is not just about treating the physical and psychological aspects of addiction but also about managing the legal issues that often accompany it. Many clients/patients face legal barriers, such as warrants or housing issues, which can prevent them from fully engaging in their health and recovery. Furthermore, one of the most notable impacts of integrating legal assistance into addiction medicine is the hope it provides to clients/patients. Substance use disorder is often accompanied by feelings of shame, isolation, and hopelessness, which legal issues can exacerbate. As one staff member reflected, “It is a partnership where I do learn more about the legal system and how it works. It allows us to do what I call the installation of hope for [clients/patients]."

MLP Operations: Logistics and Location

A critical part of the MLP operations is the constant collaboration between the program’s two main partner agencies. The Camden Coalition and the Cooper Center for Healing are on two separate floors of the same building in Camden, NJ, and multiple participants spoke about how the co-location improved service provision. The physical location also eases the client/ patient burden of having to go to multiple locations and reduces the time it takes to address multiple appointments. Participants commented on how the MLP attorneys will make daily or almost daily rounds throughout the clinical floor to ask if the healthcare providers have any patients who need legal aid. Staff participants discussed the importance of physical presence in generating buy-in from providers and trust from clients/patients. This trust creates a:

> …very smooth like handing off. Like I don't have those barriers of clients/patients not wanting to open up or share with me or tell me what their issue is because they do it from the rip, and I think a lot of that has to do with the relationship they have with their medical provider and that gets like impeded on me which is a great thing.

Staff discussed how the multi-specialty team (e.g., physicians, psychiatrists, patient navigators, attorneys, therapists) that work with the MLP supports clients/patients in their recovery. Participants discussed how the organizations and staff are “on the same page” and mission-aligned, which supports collaboration.

The MLP Staff

Participants discussed how staff working in an MLP must exude compassion and be accessible to clients/patients. As one person shared,

> I think the most important thing is that the team that you're working with is coming into a sacred space of your healthcare relationship. And for many people, that's life or death - for people with substance use disorders and mental health. And so those people [staff]

> need to be safe people, which means when you're selecting lawyers to work in an MLP, they need to be, you know, harm reduction, stigma-free, kind, compassionate, and supportive of your [client/]patient population…"

Data from interviews spoke to the MLP staff's responsiveness, patience, and direct and timely communication (over the phone, email, text, and face-to-face) with clients/patients and other staff. MLP attorneys were reported to have wide availability and to make themselves available to speak with clients/patients as soon as possible. The MLP attorneys themselves discussed how they made themselves accessible and were active listeners in their work with clients/patients, one sharing how they talk conversationally to build trust. MLP staff exhibited respect and compassion for the clients/patients. As one person shared,

> Just because they have substance use or [are] in recovery doesn't change the fact of anything. It's like any other disease that someone may have. And that's the first thing that [MLP attorneys] always do is that they treat them like they're human. They ask them how they're doing, how's their day - they'll remember little details about them…

"Secret Sauce": The Camden Coalition MLP's Unique Model

Participants explained how the Camden Coalition MLP attorneys engage directly in the legal work, whereas many other MLPs operate in a consulting model where they consult with the client/patient but do not do the direct legal work. The Camden Coalition MLP engages in legal work across a range of issues and also addresses criminal issues, something many other MLPs do not do. The MLP credits its distinction as a separate organization from the main healthcare entity, where clients/patients are referred from, for being able to take on the legal risk and liability insurance to address criminal cases. The MLP's existence under a separate organization reduces bureaucracy and creates flexibility in how the program can serve clients/patients. The MLP's funding structure also supports the attorney's accessibility and relationship-building with clients/patients. In the MLP, attorneys are able to take quick phone calls and do repeated follow-ups and check-ins with clients/patients because they do not have to so strictly track the amount of time they spend on each case/with each client/patient. The program is free to clients and therefore does not charge any fee for consultation or representation.

Data from interviews with MLP staff illustrated how the program uses a Camden Coalition coaching and client/patient empowerment model to provide legal aid. MLP attorneys view their role as assisting their clients/patients in determining their goals and letting the client/patient be the driver of decisions. One person shared the approach as,

> We're gonna meet you where you are, and we want to always be prepared for, you know, whatever that is. We don't judge…we try to do more sort of patient-centered l egal services, thinking about the whole person and also like, okay, we're gonna help you with your legal issue that you have, but where does that fit in with your broader,

> you know, wellbeing and what can we do to position you so that when we address this legal issue, you're gonna be in a better position?…

Existing Barriers in the MLP's Work and Sustainability Considerations

Although the program is housed within the larger Camden Coalition organization, the MLP staff and its infrastructure are funded through grants, which are not guaranteed. Funds to support the program (e.g., costs of Camden Coalition attorneys that staff the program) are garnered through a conglomeration of private and public funding sources. A few staff suggested that future funding could come through avenues such as Medicaid, where payment for medical-legal partnerships is part of Medicaid reimbursement. While MLPs represent a financial investment, prior research has calculated that MLPs offer overall cost savings (Richman et al., 2023). Additionally, other challenges exist because of complex laws, creating limitations to what the MLP attorneys can do in certain situations. Staff participants also shared how the stigma of addiction poses barriers to their work and to the recovery of their clients/patients. One staff member said: "And so, I think that's something completely outside of our [clients/patients' control…I think one challenge is just, it's a system, it's a world that's not always throwing its doors wide open for the folks that we're trying to serve…."

Participants expressed that they would like to see this MLP model replicated in other settings due to its success over the past several years. "What we've done here is just the beginning. We want to see this model replicated across the state and beyond so that every person struggling with substance use has access to the legal support they need," one staff person said. This vision reflects the broader goal of making integrated legal and medical care a standard practice, ensuring that people in need of addiction medicine treatment have access to comprehensive support.

MLP Patient Survey Demographics

The participant survey about MLP experience yielded 70 responses. Please refer to the Appendix for the percentages for each response in the full survey. Among individuals for whom information was reported in the survey, the majority of MLP survey respondents were female (65.7%; 44), and about a third were male (34.3%; 23). Just over half (57.8%; 37) of respondents were White, followed by 23.4% (15) individuals who identified as Black, 15.6% (10) as Hispanic or Puerto Rican, and 1.6% (1) mixed race or preferred not to say. The age of when clients/patients began their engagements with the MLP program ranged from 22 years old to 64 years old, the most common age being 36 years old, and the average age of MLP engagement being 41 years old. Note that all data are reported as valid percentages minus missing responses.

The highest number of self-reported mental health diagnoses was seven (1.5%; 1), and the lowest was zero diagnoses (4.5%; 3). The majority of respondents had one (22.4%; 15), two (28.4%; 19), or three (26.9%; 18) mental health diagnoses. The most common diagnoses were attention-deficit/hyperactivity disorder (ADHD), depression, anxiety, bipolar disorder, and post-traumatic stress disorder (PTSD). The highest number of self-reported physical health diagnoses was seven (1.5%; 1), and the lowest was zero diagnoses, which accounted for 20.9% of the respondents (14). Most respondents, if not zero, had one (28.4%; 19) or two (20.9%; 14) physical health diagnoses. The most common diagnoses were asthma, diabetes and/or obesity, hypertension and/or hyperlipidemia, and hepatitis C. Out of the 67 survey-takers for whom information was reported, 85.1% (57) had been diagnosed with substance use disorder.

Interviews and Survey with MLP Participants

Legal Needs

Data from the client/patient survey showed that MLP clients/patients had multiple legal needs, the majority having one (37.7%; 26) or two (30.4%; 21) legal needs. Among 64 people who responded, most had one (60.9%; 39) or two (21.9%; 14) main legal needs served by the MLP. Table 1 shows the specific legal areas that MLP clients/patients worked on with the MLP, with the majority of needs focusing on criminal (e.g., warrants) (43.8%), landlord-tenant (e.g., evictions) (23.4%), and municipal/county matters (e.g., fines and fees) (23.8%).

TABLE 1. Legal needs served by the medical-legal partnership (MLP)

Legal Need/ Matters	**%**	**#**
Criminal	43.8%	28
Municipal/County (fines & fees)	23.8%	15
Landlord-Tenant (eviction)	23.4%	15
Family Law (custody, visitation, child support)	17.5%	11
Disability (SSD/SSDI)	14.3%	8
Traffic / License	14.3%	9
Other	7.7%	5
Estate (wills, power of attorneys)	4.6%	3
Domestic Violence	3.2%	2
Employment/Wage/Labor	1.5%	1

Public Benefits (GA, SNAP, TANF, etc.)	1.6%	1

Note that percents add over 100% and frequencies over the full sample of 70, as respondents could select more than one / all needs served by the MLP, and each legal type was responded to by a varying number of respondents (e.g., 64 or 68 out of 70).

What the MLP Did to Help Participants

During an engagement with the MLP program, the participants worked with the MLP staff to resolve a range of straightforward and complex legal challenges. Many participants' work with the MLP was to find, gather, and compile paperwork needed for submission to government agencies and court purposes. Participants described how the attorneys answered all their questions, kept their clients/patients informed, and explained step-by-step what was happening with their cases. Multiple participants commented that the MLP attorneys were extremely thorough and on "top of everything" in their text, phone, and in-person communication with clients/patients.

A large portion of the MLP attorney-client/patient interactions involved the attorneys going over options and explaining the nuances of the law and related procedures. These interactions helped clients/patients understand the potential avenues they might have for their various legal situations. MLP attorneys provided legal information to empower their clients/patients to move forward with various legal decisions, as exhibited by the quote

> ... And [they] call me with-with every update-- and [they] don't make the decision for me. [They're] like, 'This is where we're at. This is what's going on. These are our options. What do you want me to do?' And I've said before, like, 'Um, what do you think is best?' [They're] like, 'No, I need for you to tell me what you're thinking about and which direction we should go in.' So, I do like that because that helps me have control over the situation. And I don't have to rely on [them] like that. So, [they] give me all of the tools…

How the MLP Helped Participants

Survey responses indicated that MLP participants received robust support from the MLP. Out of a range of 14 - 36, with 36 indicating the highest self-reported level of perceived support from the MLP staff, the average response from clients/patients was 31.4, with the most common response (mode) at 36, indicating overall satisfaction with the support provided by the MLP staff.

Over two-thirds of the 70 MLP participant survey-takers strongly agreed that the legal staff "listen to [their] issues and concerns" (70.6%; 48), "involve [them] in making decisions

regarding [their] legal issues,"(67.6%; 46) "care what happens to [them],"(67.6%; 46) "have a comprehensive knowledge of the law,"(72.1%; 49) and are "able to effectively advocate for [them]"(70.6%; 48).

When it came to *how* MLP staff did their work, interview data from clients/patients spoke to the MLP staff having the clients/patients' "best interest" in their cases even though the client/patient was not paying for their services. As one person shared, "[They] seemed to actually care about my situation and actually, you know, want the outcome to be as good as possible." Data from multiple people outlined how the attorneys helped them regulate their emotions, generate self-esteem, grow their voice, and advocate for themselves. One person shared, "[MLP attorney] is almost like a psychologist, so when you're dealing with multiple personalities, [they] know how to calm you down, talk to that person, relate to the person. I guess you would have to have coping skills, concern, care about that person's issues."

Participants noted their appreciation for the MLP staff being friendly, offering them coffee, and being respected. One person stated, "It was really good. You know, [the MLP attorney's] communication was great. [They] knew [their] stuff, you know what I mean? [They] made me feel comfortable…[They] treated me professionally, and I liked that about [them]." Participants expressed that the personalized legal help made them feel like a priority and more confident in addressing their legal needs.

MLP Impacts

Many individuals experienced relief as their legal cases were resolved favorably. Charges were downgraded, cases dismissed, and records expunged, alleviating the stress and anxiety of ongoing legal battles. For some, this meant avoiding jail time, getting off probation, having charges that may have impacted their future removed from their records, or resolving interpersonal issues through restraining orders.

Participants also reported that they could regain basic rights and privileges, such as reinstating driver's licenses, essential for finding employment and achieving a sense of normalcy. One participant explained,

> I mean, the situation, I couldn't have asked for a better outcome. I actually got a better outcome than I possibly expected. I had a driving while suspended that I assumed was going to, uh, be more of an issue, but whatever- whatever [the MLP attorney] said to the district attorney made them, they dropped it. So that's like unheard of for me, so I found that to be, uh, interesting. I never heard of them ever dropping a driving while suspended so kudos to [the MLP attorney] for that.

The MLP program provided crucial support in resolving legal fees and fines, which were substantive burdens for many participants. This financial, legal assistance, including help with fine payment plans, eviction prevention, and navigating court orders, significantly reduced the economic stress on participants, allowing them to focus on rebuilding their lives. The program also played a critical role in preventing evictions and securing housing for participants. Legal intervention helped some clients/patients retain their homes, avoid eviction records, and transition to new housing arrangements, thereby ensuring stability in their living conditions.

The legal assistance program participants received was crucial for individuals seeking employment, particularly in fields requiring a clean record. For instance, one participant explained:

> A lot of people that struggle with this disease, they don't really get to a level of, like where they can really thrive professionally because of anything, records, anything like that, right?… And so the effect that it had was it made it took a huge barrier away, to help me to thrive.. And so that's the biggest difference that it [the program] made for me is I was fortunate enough to have services to help me, just to get, like we always say in the rooms, just to get back to a normal level of functioning society, right?

Beyond legal outcomes, the support provided by the program helped participants' mental and emotional well-being. Many participants reported feeling less judged, more hopeful, and motivated to pursue positive life changes, including recovery from addiction and improving their economic and social circumstances. One participant explained how the lack of judgment and consistent support from their MLP attorney played a crucial role in their recovery journey, sharing,

> And [the MLP attorney] never judged me, uh, of anything, never looked at me as a bad guy, which helped me open up to not only be honest with [them] but like let [them] know what's really going on. And, you know, it was just- it was an amazing, uh, I don't know how to say it, like an exciting situation for me because I felt so hopeless. Like, I'm never going to get out of this, I'm never gonna be able to be in recovery. All types of chaos was in my life and [the MLP attorney] helped me slowly but surely get back on track. So, you know, that played a major part in my recovery.

Recovery capital is the extent, depth, and amount of internal and external resources that a person has to tap into to initiate and sustain recovery (Groshkova et al., 2013). Recovery capital can be supported through social connections, socioeconomic resources, and access to health care and social services (Groshkova et al., 2013). When clients/patients were asked about their recovery in the MLP client/patient survey, clients/patients reported favorable outcomes related to their recovery. Out of a range of 28-60, with 60 indicating the highest level of recovery capital, the average response from clients/patients was 49.3, with the most common response (mode) at 55, indicating progress in recovery. Note that this progress cannot be attributed solely to the MLP

program and represents a point-in-time view from clients/patients on how their overall recovery is progressing.

The majority (75%) of participant survey-takers strongly agreed that they were "making good progress on their recovery journey." Ninety percent also strongly agreed that "there are more important things in life than using drugs or alcohol," while just under half (49.3%) strongly agreed with the statement that they "regard [their] life as challenging and fulfilling without the need for using drugs or alcohol." Survey findings also showed a weak to moderate relationship between overall MLP support given to MLP participants and their recovery capital (.245), suggesting that greater MLP support may also tend to show an increase in overall recovery capital among MLP participants. This finding is significant at the $\rho<0.05$ level.

Due to the guidance and support they received from the MLP staff, participants felt empowered to advocate for themselves. The program helped clients/patients navigate complex legal systems, fight for their rights, and make informed decisions about their future. One participant shared,

> It opened my eyes to be more proactive, like if you have an issue. In finding out information. Looking for the information. Because some people think oh there's no way out of this or you know I'm just stuck and I'm just gonna deal with it or I'm gonna run for the rest of my life. Unfortunately I can't be that person… That's why I was like getting my record expunged would like really open me up to different things and new things but I'm still on my journey.

When clients/patients were asked about their ability to and confidence in understanding and resolving legal issues, clients/patients reported confidence and likelihood of resolving legal needs. Out of a range of 14 - 36, with 36 indicating the highest level of confidence and self-belief in resolving legal concerns, the average response from clients/patients was 31.4, with the most common response (mode) at 36, illustrating high levels of confidence.

Over half (55.1%) of respondents strongly agreed that they "have an understanding of the steps [they] need to take to resolve my current legal issue(s)," 58% "[are] confident that [their] current legal issue(s) will be resolved through working with the MLP staff," 52.9% "[are] more likely to address legal needs in the future," and 65.2% "[are] confident that a future legal issue could be resolved." Survey findings also showed a moderate relationship between MLP support and legal knowledge and confidence (.595), suggesting that greater MLP support may also tend to show an increase in overall confidence in addressing legal concerns among MLP clients/patients. This finding is significant at the $p < 0.001$ level. Furthermore, there is a moderate relationship between recovery capital and legal knowledge and confidence (.595), suggesting that confidence around legal aid and resources for recovery may positively influence one another among MLP clients/patients. This finding is significant at the $p < 0.001$ level.

Discussion

This research project set out to more deeply understand the operations of the Camden Coalition and Cooper Center for Healing Medical-Legal Partnership. Through interviews with MLP staff, and interviews and a survey with MLP clients/patients, data revealed how the MLP runs its operations daily, how clients/patients directly work with the MLP, and how both MLP staff and clients/patients view the program and how it helps people.

Research question one aimed to understand what the use of MLP services, engagements across the health care and legal system(s), and progress in recovery looked like in practice. MLP clients/patients spoke to the professionalism and ease of access to their substance use treatment and legal needs providers. Participants chronicled the various ways that the MLP staff helped them through completing and submitting paperwork, making phone calls, providing court representation, and explaining the nuances of legal terms and options.

Research question two aimed to understand how the MLP was meeting participant needs. Survey data from 70 current and former MLP participants highlighted the various legal needs that the MLP addressed across criminal, landlord-tenant, and various other matters. Successes included resolving pending eviction cases, expunging old warrants, and helping receive social assistance payments, among others. Findings from the MLP participants' survey also showed positive connections between MLP engagement and recovery progress.

Large portions of the data spoke to research question three, which aimed to understand how the MLP operates. The collaboration between the healthcare providers, social workers, patient navigators, and legal professionals at the Cooper Center for Healing and the Camden Coalition was key in providing comprehensive support to patients and MLP program participants. This multidisciplinary approach ensured that MLP program participants/patients' holistic medical, psychological, and legal needs were addressed, often leading to positive outcomes in their legal cases and overall well-being. Overall, findings showed that the Camden Coalition and Cooper Center for Healing MLP are a model of integrated care that addresses the complex and interrelated needs of patients with substance use disorders. Study participants noted the ways the MLP has changed legal outcomes for MLP participants and praised the program's unique model and co-location of services.

Implications

Findings from this research can support not only the expansion of this type of MLP program into other treatment centers in metropolitan places like Camden City and similar cities but also provide support for similar evaluations that can explore and highlight efficient and effective ways to serve a range of patient needs in the substance use disorder arena. Institutions of higher

education located in urban centers could also benefit from this type of practitioner-research partnership, supporting research collaborations and student/researcher/practitioner learning between higher education and medical institutions in local areas. To date, MLPs focused on serving individuals with substance use disorders remain understudied, and evaluation methods remain varied (Nerlinger et al., 2021). This evaluation also provides the foundation for future outcome evaluation phases that could employ a quasi-experimental design to look at other clinical and criminal justice outcome measures. Additionally, information from this study outlining how the MLP is serving individuals seeking addiction treatment and highlighting considerations for addressing the social determinants of health and legal needs among these clients/patients will add to the body of evidence around the usefulness of MLPs and what contributes to their effectiveness. This research has important policy and practice implications around the integration of healthcare and legal services that are traditionally siloed. This study underscores the importance of MLPs in addressing these social determinants and improving health outcomes by providing legal assistance (Spiegel et al., 2023; Trott et al., 2019).

Limitations

While this research provides important insights for the MLP field, it is not without limitations. One limitation was the use of a nonprobability sample in outreach and recruitment. Additionally, a limitation was the researchers' inability to make contact with everyone we attempted to contact. Some people did not respond to outreach attempts and/or chose not to participate, which likely reduced the number of participants. The participants involved were affiliated only with the MLP and the Cooper Center for Healing. Similar to many other program evaluations, those who responded may have induced self-selection bias into the data by their willingness to participate (compared to other people who were involved with the MLP and Center for Healing that the research team reached out to, but did not choose to participate).

Conclusion

This study sought to understand MLP operations and how the program was meeting MLP participants' legal needs. Through interviews with MLP staff and MLP participants and a survey with MLP participants, data revealed a deep appreciation for the MLP work, with interview findings highlighting the MLP's staff's professionalism, thoroughness, and compassionate service. The MLP between the social service provider, Camden Coalition, and the addiction medicine clinic, Cooper Center for Healing, an arm of Cooper University Health Care, represents a promising model for integrating legal services into healthcare settings within a metropolitan area. The unique co-location of the MLP agencies generated a sense of trust between partnering organizations and their clients/patients and reduced access burdens for individuals to receive both substance use and legal aid. The flexibility, focus on criminal legal needs, and interdisciplinary nature of the Camden Coalition's MLP offers multiple best practice

considerations for the field of MLP development and implementation. The findings from this study can be used to inform further development and replication of MLPs across the region and nationally. Future research can focus on examining the longer-term effects of MLP engagement, expanding MLP services to various areas of health care beyond addiction (e.g., following violence injury, in domestic violence situations, in child welfare situations), and assessing MLP implementation practices.

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Additional Findings: Survey with MLP Clients/Patients

Support Provided by the MLP

Support	Strongly Agree	Agree	Somewhat Agree	Somewhat Disagree	Disagree	Strongly Disagree
The legal staff listens to my issues and concerns	**70.6% (48)**	**19.1% (13)**	5.9% (4)	n/a	n/a	4.4% (3)
The legal staff keeps me informed about the status of my legal issues	**64.7% (44)**	**22.1% (15)**	2.9% (2)	2.9% (2)	1.5% (1)	5.9% (4)
The legal staff involves me in making decisions regarding my legal issues	**67.6% (46)**	**20.6% (14)**	4.4% (3)	2.9% (2)	1.5% (1)	2.9% (2)
The legal staff cares what happens to me	**67.6% (46)**	**14.5% (11)**	8.8% (6)	1.5% (1)	1.5% (1)	4.4% (3)
The legal staff stands up for my rights	**64.7% (44)**	**25% (17)**	2.9% (2)	2.9% (2)	n/a	4.4% (3)
The legal staff has a comprehensive knowledge of the law	**72.1% (49)**	**20.6% (14)**	2.9% (2)	1.5% (1)	1.5% (1)	1.5% (1)
The legal staff is able to effectively advocate for me	**70.6% (48)**	**19.1% (13)**	4.4% (3)	n/a	n/a	5.9% (4)

Note that a differing number of respondents, up to 70, answered each item, so the totals are 70 or slightly below 70.

Overall Recovery Capital

Support	Strongly Agree	Agree	Somewhat Agree	Somewhat Disagree	Disagree	Strongly Disagree
There are more important things to me in life than using drugs or alcohol	**89.9% (62)**	**5.8% (4)**	n/a	n/a	n/a	4.3% (3)
In general, I am happy with my life	**41.8% (28)**	**26.9% (18)**	17.9% (12)	3% (2)	3% (2)	7.5% (5)
I have enough energy to complete the tasks I set out for myself	**37.7% (26)**	**23.2% (16)**	24.6% (17)	2.9% (2)	4.3% (3)	7.2% (5)
I am proud of the community I live in and feel a part of	**23.9% (16)**	**31.3% (21)**	20.9% (14)	3% (2)	13.4% (9)	7.5% (5)
I get lots of support from friends	**29.4% (20)**	**19.1% (13)**	20.6% (14)	5.9% (4)	17.6% (12)	7.4% (5)
I regard my life as challenging and fulfilling without the need for using drugs or alcohol	**49.3% (34)**	**36.2% (25)**	5.8% (4)	2.9% (2)	2.9% (2)	2.9% (2)
My living space has helped to drive my recovery journey	**38.8% (26)**	**26.9% (18)**	16.4% (11)	4.5% 93)	6% (4)	7.5% (5)
I take full responsibility for my actions	**73.1% (49)**	**23.9% (16)**	3% (2)	n/a	n/a	n/a
I am happy dealing with a range of professional people	**50% (34)**	**35.3% (24)**	8.8% (6)	5.9% (4)	n/a	n/a
I am making good progress on my recovery journey	**75% (51)**	**16.2% (11)**	5.9% (4)	1.5% (1)	1.5% (1)	n/a

Note that a differing number of respondents, up to 70, answered each item, so the totals are 70 or slightly below 70.

Overall Confidence in Addressing Legal Needs

Support	Strongly Agree	Agree	Somewhat Agree	Somewhat Disagree	Disagree	Strongly Disagree
I have an understanding of the steps I need to take to resolve my current legal issue(s)	**55.1% (38)**	**37.7% (26)**	4.3% (3)	2.9% (2)	n/a	n/a
I am confident in my ability to navigate legal issues	**39.1% (27)**	**26.1% (18)**	24.6% (17)	5.8% (4)	4.3% (3)	n/a
I am confident in my ability to navigator other concerns (e.g., health care, medical, employment)	**42.6% (29)**	**35.3% (24)**	19.1% (13)	n/a	1.5% (1)	1.5% (1)
I am confident that my current legal issue(s) will be resolved through working with the MLP staff	**58% (40)**	**26.1% (18)**	7.2% (5)	2.9% (2)	1.4% (1)	4.4% (3)
I am more likely to address legal needs in the future	**52.9% (36)**	**30.9% (21)**	7.4% (5)	1.5% (1)	2.9% (2)	4.4% (3)
I am confident that a future legal issue could be resolved	**65.2% (45)**	**23.2% (16)**	10.1% (7)	n/a	n/a	1.4% (1)

Note that a differing number of respondents, up to 70, answered each item, so the totals are 70 or slightly below 70.

