

Addressing Opioid Misuse and Use Disorders: The Impact of State Targeted Response and State Opioid Response Grants

Background on State Targeted Response and State Opioid Response Grants

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. The STR program was designed to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose–related deaths through the provision of prevention, treatment, and recovery support activities for opioid use disorder (OUD). Following STR, the SOR program similarly aims to address the opioid crisis by increasing access to medication-assisted treatment (MAT) using the three Food and Drug Administration (FDA)–approved medications for treatment of OUD and through the provision of prevention, treatment and recovery activities for OUD. In addition, the SAMHSA SOR program supports evidence-based prevention, treatment, and recovery support services to address stimulant misuse and use disorders, including for cocaine and methamphetamine.

In FY 2017 and FY 2018, grantees received a total of \$1 billion through STR. From FY 2018 through FY 2020, states, territories, and jurisdictions received a total of \$4 billion in SOR grants.

Single State Agency (SSA): Arkansas Department of Human Services Division of Aging, Adult, and Behavioral Health Services

In FY 2017 and FY 2018, the Arkansas Department of Human Services (DHS) Division of Aging, Adult, and Behavioral Health Services received a total of \$7.8 million in STR funds. From FY 2018 through FY 2020, the state received a total of \$23.7 million in SOR funds.

Overview of Arkansas' efforts to address opioid misuse and use disorders

The Division of Aging, Adult, and Behavioral Health Services is currently using STR/SOR funding to expand and further develop MAT in the state. This expansion includes the development of recruiting efforts for Drug Addiction Treatment Act (DATA)–waivered medical staff to perform MAT. The populations of focus identified in the grant are pregnant and parenting women, including a subset of parents at risk of losing their children to the child welfare system; parolees reentering the community from incarceration; and those who have survived an opioid overdose. Other noteworthy initiatives under the grants are the development of the first-ever peer recovery infrastructure within the state; and education on OUD to various populations, including first responders and medical professionals. Family members of those who survived an opioid overdose are also trained on the use of naloxone and given a kit.

Innovative service delivery models

- Expansion of MAT
- Development of peer recovery infrastructure and Recovery Community Organizations
- MAT Recovery Initiative for Arkansas Rural Communities (MATRIARC)
- Naloxone training/distribution project

Building workforce capacity

Arkansas has been engaged in various workforce development initiatives throughout the history of receipt of these and related grants. Major efforts include:

Peer Recovery Support Specialist (PRSS) training and certification programs

Arkansas has developed an innovative, three-tiered PRSS system with Core (entry-level), Advanced, and Supervisor certification. This system has undergone significant growth and development, partially supported by STR/SOR grants. The state provides training courses at each of the three certification levels, available to individuals in recovery who meet application criteria at each level, and support for eligible candidates to receive financial assistance with exam fees and association memberships related to certification. Most recently the state has affiliated with NAADAC to administer all aspects of the peer certification/workforce system, which will provide structure and processes consistent with national standards.

MAT providers

The state has historically had a shortage of MAT providers, especially in a large proportion of the state that is medically underserved and rural. MATRIARC/Project ECHO is a collaborative effort between the state and the University of Arkansas for Medical Sciences (UAMS)/Psychiatric Research Institute Center for Addiction Services and Treatment. Project ECHO is part of MATRIARC, providing weekly video conferences to community-based providers needing assistance in OUD treatment and related practice areas. An addiction psychiatrist is available free of charge via telephone to offer consultations to primary care physicians, general psychiatrists, advanced practice nurses, physician assistants, and mental health professionals engaged in MAT provision to patients dealing with OUD. The university, one of the largest MAT providers in the state, provides MAT practice development through subcontracts with MAT providers in underserved/rural areas, consultation/mentoring services, and weekly online seminars covering a range of topics related to substance use disorders, focused primarily on opioids and offering continuing medical education credits to eligible participants.

Collaborating with public and private entities

Arkansas DHS/Division of Aging, Adult, and Behavioral Health Services has strengthened existing partnerships with UAMS, the Arkansas Department of Health, the Prescription Drug Monitoring Program, local communities, and the Arkansas Medical Board in building a stronger MAT infrastructure in Arkansas. These collaborations have also led to development and growth of new and existing advisory boards that oversee substance use issues within the state.

Preventing opioid misuse before it starts

Arkansas Collegiate Network (ACN)

The ACN plans to use grant funds to prevent drug overdose among the college-age population (ages 18–40 [average ages of traditional and nontraditional students]) by increasing the number of campus police departments, college administrators and faculty, and student groups equipped and trained to administer naloxone. One campus will provide NaloxBoxes and training on their use. ACN will develop a digital media campaign targeting colleges about overdose awareness.

Prevention services for aging adults

Arkansas is working with the UAMS Donald W. Reynolds Institute on Aging (RIOA) to implement a prescriber education program at the RIOA, Centers on Aging, and affiliated skilled nursing facilities to gradually reduce opioid prescriptions in mature (≥ 50) adult whenever it appears excessive. Education will also be offered to seniors, their caregivers, and the community on the benefits and potential serious risks of opioid medications and alternative therapies and non-opioid medications that may be as effective in managing chronic pain. Education will be face-to-face or via digital health (mobile apps, telehealth, Skype, Zoom, etc.).

Education and public awareness

Prescriber education

Prescriber education is also supported by these funding sources. Programming includes assistance in developing online educational/case conference programs on opioid-related topics (e.g., pain management/alternatives, medication management, signs of dependence). The state interacted with over 200 providers at conference information booths and through the provision of weekly webinar consultations. In addition, conferences and print material distribution have received support from grant funds. That included large-scale distribution of 8,500 American Society of Addiction Medicine (ASAM) opioid guideline pocket reference books, sent to doctors and nurses (e.g., MD, DO, and APRN mailing lists) statewide. Arkansas also has trained over 107 people in the Centers for Disease Control and Prevention (CDC) Opioid Prescribing Guideline and has partnered with the DHS Division of Child Care and Early Childhood Education (DCCECE) to develop a family opioid Interactive training called “Protecting Our Loved Ones.” The training is a short interactive course on opioid overdose, rescue, and secure medication storage. It has successfully trained over 12,000 families and daycare providers. Arkansas also works with the Division of Children and Family Services and DCCECE to distribute secure medication storage lockboxes and lockbags to daycare providers and program staff.

Media campaigns

The state’s public health and health literacy campaigns, including billboards and social media, have generated an estimated 5 million views per month. Arkansas distributed over 6,000 “How to Talk to Your Doctor” handbooks to patients and over 100,000 “Don’t Run, Call 911” brochures regarding the state’s Good Samaritan Law. Additionally, we have distributed over 25,000 opioid education materials.

Overdose reversal efforts: saving lives

NARCANSas smartphone app

NARCANSas is a mobile phone app designed to educate and inform individuals about OUD. It includes information about prevention, treatment, and recovery. It walks individuals through the steps of rescuing someone who has overdosed by administering naloxone and calling 911. It describes signs of an overdose and information about the drug take-back efforts. It is available for download on both [Apple](#) and the [Google Play Store](#). To date it has been downloaded 4,651 times.

Collaborating with local coalitions

STR and SOR funds support opioid prevention work with local coalitions through the naloxone training/distribution project, which includes assisting target communities to establish and/or build local coalitions. These efforts begin with the community service contractor's introduction of the naloxone project that is focused on 1) first responder agencies, and 2) treatment centers that provide training and issue naloxone kits to support network members of OUD-diagnosed patients at risk of relapse-related overdose. The ultimate aim of working with these coalitions is to create groups that sustain and expand community-level prevention efforts well beyond the scope and lifespan of STR/SOR activities.

Increasing access to treatment

Access to MAT through provider recruitment

STR/SOR funds contributed to the recruitment of DATA-waivered medical professionals, allowing for the treatment of 1,365 clients with MAT. In 2017 there were fewer than 100 waived providers in the state. The latest (2020) data indicated there were now 353 waived providers. MATRIARC (discussed above) has been integral in increasing active, accessible MAT practitioners in previously underserved/unserved locations. These efforts have yielded greater access to MAT in areas where formerly there were no providers. Geographic distance to nearest MAT provider(s), related time/transportation costs, environmental influences (inclement weather, etc.), and tolls of such factors on motivation and treatment continuity have thus been significantly reduced as barriers to MAT access.

Peer services

The state ensures that trained peers with lived experience are available to deploy to treatment facilities, hospitals, jails, prisons, and drug courts. The state's efforts and workforce capacity have expanded significantly since the first of these grant-supported initiatives was launched; great progress has been made in integrating peer recovery concepts and services into treatment settings, which have historically operated under models that did not formally provide for peer support services.

Supporting long-term recovery

Peer recovery infrastructure

Arkansas has been able to create a comprehensive peer recovery infrastructure using STR and SOR funds. Between July 2019 and January 2020, Arkansas has trained 285 peer recovery support specialists, many of whom have become certified in Peer Recovery through the Arkansas Substance Abuse Certification Board. This laid the groundwork for the state to create the Arkansas Model of Peer Recovery, building on foundations of the Georgia Model as developed by Appalachian Consulting Group.

The state also developed and implemented a peer reporting system with a variety of tools designed to document services delivered, peer service recipient data (demographics, etc.), and priority peer service outcomes (e.g., changes in recovery capital measures over time and involvement in peer recovery services).

The state is also in the early stages of developing its first domestic nonprofit Recovery Community Organization, which aims to make peer recovery a free service.

Peer recovery mobile app

Arkansas is in the final stages of development of the Peer Recovery Network Arkansas Mobile Application, which has a real-time locator map allowing peers to track the location of one another throughout the state's 75 counties. It also allows Arkansas DHS to share information on awareness and education focusing on the opioid epidemic as well as a resource database for treatment and recovery resources based on county locations.

Serving special populations

While all who suffer from OUD are eligible to receive STR/SOR funding for MAT, special populations identified for treatment under both grants are pregnant and parenting women, parolees reentering the community, and individuals receiving naloxone.

Overdose reversal efforts

First responder naloxone program resources are focused on high-need communities (HNCs), which are determined by an annual data-driven needs assessment. All counties across the state are ranked by scores on a composite index of risk/severity/resource access, and then communities are selected prospectively with consultation/approval of the State Opioid Prevention Workgroup to be HNC targets for the following year of programming. The state continues to implement naloxone training and distribution in regional treatment centers statewide.

AR MORE (Arkansas Maternal Opioid Rural Expansion)

AR MORE was implemented at UAMS to expand capacity, enhance interactions with rural care providers, and optimize participation through individualized treatment planning. It aimed to improve clinical and social outcomes of pregnant adolescent and adult women with OUD by encouraging hope and independence.

Arkansas Community Correction

Arkansas implemented a program that provides MAT, group and individual counseling sessions, bus passes as needed, employment, GED (General Educational Development), and other assistance for individuals involved in the criminal justice system. This program also includes a component by which participants can receive long-acting injectable naltrexone as a pre/post-release treatment option which, for some, provides a vital relapse prevention tool early on in community reentry.

Opioid Prevention for Aging and Longevity program

SOR grant resources have allowed for expansion of opioid prevention efforts for those age 65 and over in Arkansas through the Opioid Prevention for Aging and Longevity (O.P.A.L.) program. The program is being implemented through collaboration with the UAMS Donald W. Reynolds Institute on Aging, which operates geriatric clinics and other services throughout the state.

Demonstrating outcomes for a healthier future

- The state has used STR and SOR funds to purchase 6,632 doses of naloxone. There have been 903 lives saved using naloxone reported to the Arkansas State Police. Arkansas anticipated the number of lives saved to increase as a direct result of continued programming taking place under these grants.
- To date, 5,784 naloxone kits have been distributed to first responders under the state's first responder trainings.
- SOR peer recovery services have reached a cumulative total of 1,721 unduplicated individuals to date (up to March 2021).

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