

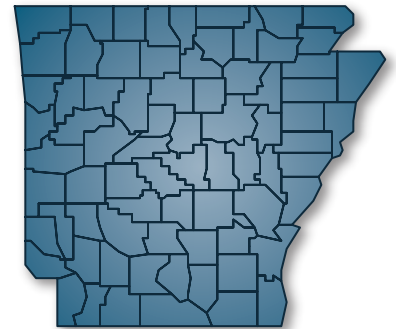


Opioid  
Response  
Network



# ORN Data Brief: Arkansas

The *Opioid Response Network (ORN)*, funded by SAMHSA, was established to provide local training and educational resources. ORN supports locally identified needs and promotes evidence-based practices for opioid use disorder (OUD) and stimulant use disorder in the areas of prevention, treatment, and recovery. This data brief describes ORN's technical assistance (TA) efforts, including training and education, in Arkansas.



## Overall Impact in Arkansas

Common unique population TA requests

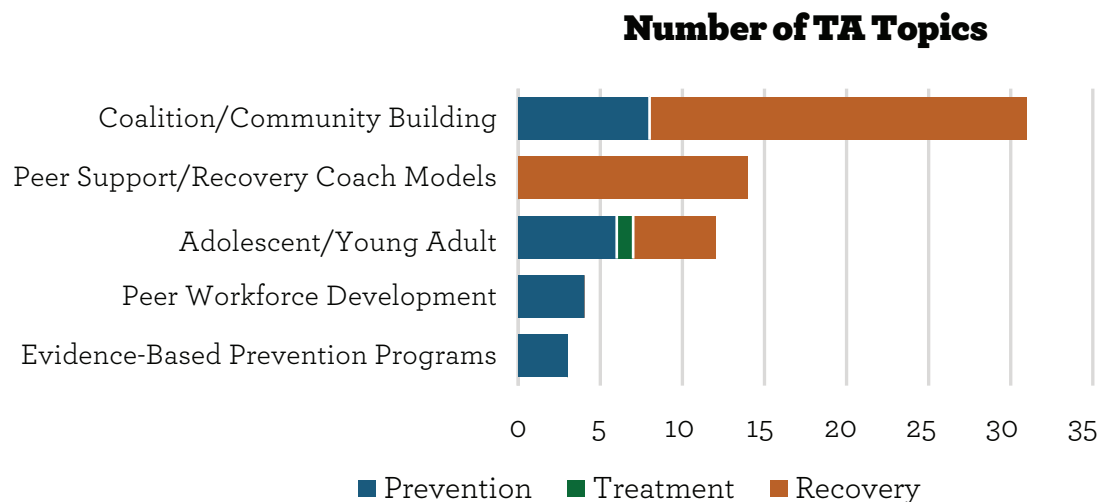
- 3 requests from adolescents and transitional age youth
- 3 requests in rural or remote areas
- 1 request from people experiencing homelessness

### ORN in Arkansas:



## Top TA Activity Topics

**Recovery Coalition and Community Building was the most frequent topic** of the 54 TA activities conducted in Arkansas. Additional **TA topics focused on peer support/recovery coach models, prevention coalition building, and adolescent/young adult.**

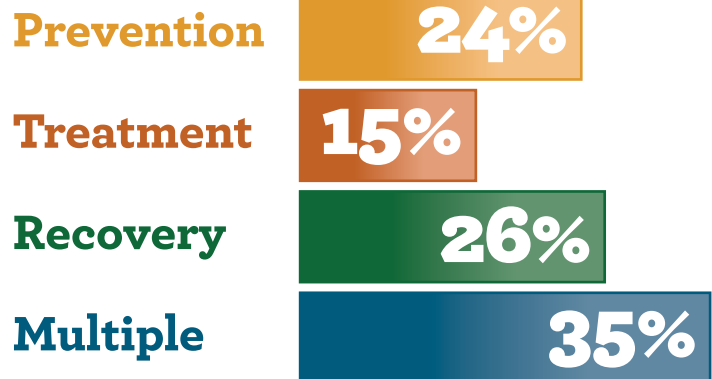


## TA Requests

**Arkansas received 20 TA requests.**



Many TA requests were related to a combination of OUD prevention, treatment, or recovery, followed by OUD recovery and OUD prevention.



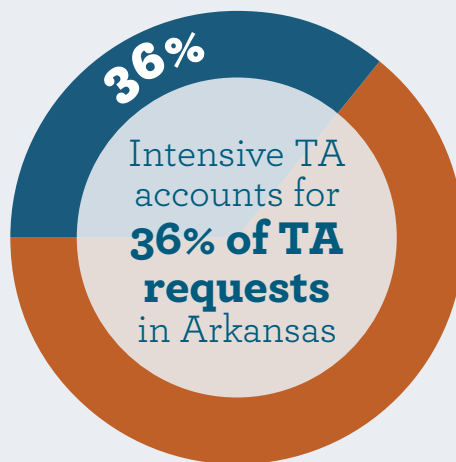
Percentages may not total 100% due to rounding.

## Top 3 Strategies

TA Strategy	Virtual	Face-to-Face	
1. Distribute educational materials or resources	6	0	<b>Distributing educational materials or resources and building coalitions were the most frequent strategies for delivering TA.</b> All TA was delivered virtually.
2. Build a coalition	6	0	
3. Conduct local discussions and strategic planning	5	0	

## Intensive TA

Intensive TA requires a stable, ongoing relationship between ORN staff and the TA recipient in which they work to develop a plan. Intensive TA should result in changes to policy, program, practice, or operations that support increased recipient capacity of improved outcomes at one or more system levels.



## TA Participants

**The most common professions among TA participants**

