

**ARK – PFS – Annual PPR – Year 2**  
**Substance Abuse and Mental Health Services Administration**  
**Center for Substance Abuse Prevention (CSAP) – Annual Programmatic Progress Report (PPR)**

**1. GRANT INFORMATION**

<b>CSAP Grant Program:</b>	Strategic Prevention Framework – Partnerships for Success
<b>Grant Award Number:</b>	H79SP083655
<b>Award Period of Performance:</b>	09/30/2023-09/29/2028
<b>Project Name:</b>	Arkansas PFS 2023
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<b>Reporting Period Dates:</b>	09/30/2024-09/29/2025
<b>Report Submission Date:</b>	

**2. REPORTING PERIOD ACTIVITIES AND ACCOMPLISHMENTS**

**Goal 1: Strengthen infrastructure of underserved communities with high substance misuse risk**

**Objective 1.1: By December 29, 2023, Assess, Collect, and Identify data sources and gaps in the data specific to the prevention landscape across each region in Arkansas (*Required Activity within 90 days*)**

- Update: The statewide Regional Needs Assessment Profiles were finished on time in late 2023 and distributed to all five subrecipients. These profiles were utilized to guide strategy in Year 2, allowing each coalition to use its local data to refine implementation plans. For instance, rural regions identified gaps in youth prevention programming and responded with school-based outreach and youth engagement events. The initial assessment was comprehensive and aligned with SAMHSA key indicators.
- The State Epidemiological Outcomes Workgroup, coordinated by the University of Arkansas for Medical Sciences, compiles and publishes [annual statewide reports](#) in an accessible online format that are vital to the PFS efforts; particularly those of population sub-groups and for our subrecipients' comparison data to statewide trends.
- An updated objective was submitted and approved for this goal in the Year 3 continuation: *By September 29, 2026, and bi-annually thereafter, monitor priority substance use data impacting Arkansas communities at the state, regional, and county level, as measured by updated Regional Profiles every two years.*

**Objective 1.2: By April 1, 2024, coordinate a bi-annual subgrantee roundtable discussion aimed at supporting the dissemination and adoption of evidence-based and promising practices in substance misuse prevention. (*Required Ongoing Activity*)**

- Update: The Sub-Grantee Roundtable series began in FY24 and continued into FY25, where they were conducted more frequently; as a peer sharing element of the monthly subrecipient

technical assistance meetings. Each session brought together subgrantees, SPF-PFS staff, and evaluators for peer learning, targeted technical assistance, sharing program updates, challenges, and best practices. Coalitions discussed wins, challenges, and sought peer feedback. Documentation of attendance and participation was collected at all meetings, demonstrating engagement from all five subrecipients. A key focus was updating the community and evidence-based program options for subrecipients following the updated list of programs, practices, and policies issued by SAMHSA (through the SPARS portal). As the previously selected Communities Mobilizing for Change was not included in the new list of programs, the collaborative selected Communities That Care, Media Campaigns, and Talk They Hear You as programs and practices aligned with the project goals.

- An updated objective was submitted and approved for the upcoming year: *By September 29, 2026, promote fidelity to the use of evidence-based policies, programs, and practices (EBPPP) by coordinating bi-annual (2) EBPPP workgroup meeting as measured by program documentation; meeting agenda and minutes and annual summary report of active EBPPPs in the State.*

**Objective 1.3: By the end of each fiscal year, allocate and provide funding to five (5) sub-regional coalitions from communities with high substance misuse risks, ensuring that they are equipped with state-of-the-art substance misuse prevention and treatment resources. (Required Ongoing Activity)**

- Update: Objective met (continued support for 5 subgrantees). In FY24, five regional coalition subrecipients were selected and funded, covering underserved counties statewide. All five remained active in FY25, receiving timely contracts to ensure continuous prevention activities. The Arkansas Statewide Network of Coalitions expanded partnerships and implemented evidence-based programs across about **20 counties**. Subgrantees participated in regular virtual meetings and capacity-building events. By the end of FY25, all subrecipients met performance goals with activities such as community trainings, school engagement, media campaigns, and targeted coalition-building. Deliverables were tracked through SPARS. An earlier administrative delay was resolved, enabling a focus on program delivery in Year 2. Funding for these subrecipients will continue annually, with yearly contract renewals.
- A slightly updated objective was submitted and approved for the upcoming year: *By November 30, 2025, and annually thereafter, maintain funding to five (5) sub-regional subrecipients from underserved communities with high substance misuse risks, ensuring that they are equipped with state-of-the-art substance misuse prevention and treatment resources as measured by completed contracts.*

**Goal 2: Increase the capacity of community-based organizations from underserved communities to implement and sustain prevention services**

**Objective 2.1: By November 14, 2023, facilitate partnerships with existing State SPF-PFS Grantees and develop and communication plan to reduce areas of overlap and ensure best practices are utilized, as measured by documented meeting minutes and a formalized engagement schedule. (Required Activity within 45 days)**

- Update: Completed (partnership established); ongoing coordination. In Year 1, Arkansas had no other active SPF-PFS State grantees at the community level. In FY25, one agency, The Share Foundation, was awarded a community grant. The PFS staff engaged The Share Foundation, maintained regular communication, and included them in statewide PFS activities. No conflicting jurisdictions were present; integration challenges were addressed through capacity-building trainings. By FY25's end, Objective 2.1 was met, and ongoing partnership is documented. No other Arkansas communities received an award for FY26.

- The updated objective for FY26 refines our plans to engage community PFS grantees: *By October 30, 2025, and annually thereafter, invite all partnerships with existing State SPF-PFS Grantees to the regional coalition network, to Midsouth training, and develop a communication plan to reduce areas of overlap and ensure best practices are utilized, as measured by documented meeting minutes and a formalized engagement schedule.*

**Objective 2.2: By March 28, 2024, review state epidemiological data and identify underserved communities and existing local community prevention providers organizations that are not yet eligible to apply for SPF-PFS award and initiate efforts to partner with these organizations for targeted substance misuse prevention, as evidence by a strategic plan submitted with the fourth quarterly report. (Required Activity within 180 days).**

- Update: In Year 1, the Statewide Strategic Prevention Plan was completed, submitted, and accepted on schedule in SPARS, using epidemiological data and stakeholder input to identify priority underserved communities. In Year 2, subgrantees followed the plan to focus on high need populations, such as Newton County, where local coalition staff overcame initial resistance by building relationships with community leaders and establishing a new prevention team. Similar outreach expanded into other underserved areas, including under resourced communities in the Arkansas Delta region. The project involved local prevention organizations not previously connected to state grants by inviting them to coalition and capacity building activities. Quarterly progress reports documented events and trainings in at least 25 counties, many with no previous prevention grant presence. The plan effectively guided expanded outreach, with annual updates planned to address ongoing gaps and track progress.
- The PFS staff applied and was accepted into NASADAD's Prevention Strategic Planning Policy Academy in Spring 2025. The collaborative group attended all sessions and successfully completed a comprehensive prevention systems improvement plan.
- The updated and approved objective for FY26: *By September 29, 2026, and annually thereafter, monitor and update regional prevention efforts to ensure strategies are planned and targeted to underserved communities as measured by monthly program documentation of number and demographics reached and served by sub-grantees.*

**Objective 2.3: By December 31, 2023, develop an evaluation plan for identified targeted strategies and populations as well as the identification and assessment of strategies and approaches used to build organizational capacity at the community level related to prevention. The evaluation plan is to be submitted with the second quarterly report. (Required Ongoing Activity).**

- Update: *Completed.* The evaluation team and program staff developed a comprehensive **Evaluation Plan** in Q1, finalized and submitted with the Q2 report by December 2023. The plan details measurement strategies, data sources (such as GPRA and state surveys), and timelines, including methods for assessing capacity-building under Goal 2 (e.g., tracking new partnerships and technical assistance feedback). Evaluation results will inform future program improvements. The project is collecting essential data from the outset, meeting all SAMHSA requirements via SPARS. SAMHSA approved the plan without revisions.
- Updates to the evaluation plan are underway following successful SPARS reporting cycles using the new CORT tool with an estimated completion date of January 30, 2026.
- The updated and approved objective for FY26: *By March 31, 2026, and annually thereafter, ensure best practice evaluation practices by reviewing the evaluation plan to ensure that data*

*collection efforts are both in compliance with funding requirements and producing useful information for the State and the sub-grantees to measure their performance.*

**Objective 2.4: By February 1, 2024, identify strategies and implement plans to build the capacity of subrecipients through technical assistance, integration with community partners, and sharing of resources that positively positions subrecipients to prepare and complete applications for prevention award including the SPF-PFS Communities/Tribes award. (Required Ongoing Activity).**

- Update: Significant progress was made in Year 2 to build the organizational capacity of the five subrecipient coalitions. Intensive technical assistance (TA) was provided each month, including monthly meetings to address challenges, review progress, and help each coalition develop tailored Capacity Development Plans for their specific communities. Peer networking was enhanced through online resource sharing and a statewide virtual grant writing workshop, boosting subgrantee confidence in pursuing future funding. Integration with community partners expanded coalitions' support networks, connecting them with county health units and businesses for additional resources and expertise. A major highlight in year 1 was a two-day Sustainability Retreat, which trained coalition leaders in long-term planning and grant proposal development. In Year 2, the annual sustainability retreat focused on targeted planning for FY26; drawing upon lessons learned to identify practical and intentional recruitment of community stakeholders and champions that could provide avenues to sustainability.
- The updated and approved objective for FY26: *By September 29, 2026, and annually, increase the capacity of community prevention providers as measured number of trainings, number of individuals trained, and post-training surveys.*

**Objective 2.5: By April 1, 2024, increase the capacity of community prevention providers by providing training on the Strategic Prevention Framework, as measured post-training surveys.**

- Update: Completed and ongoing. In FY24, the project provided regular SPF training for subgrantees and partners, beginning with an April orientation and continuing with monthly workshops. These skill-building sessions improved knowledge and satisfaction, supported by a Statewide Summit and Regional Conference. By the end of Year 1, twelve trainings had boosted provider capacity. All five coalitions held regular meetings with strong attendance and multi-sector engagement, and each expanded its membership—one coalition saw a 30% increase in active members. Subgrantees are now better positioned for future funding, with two securing supplemental grants outside the PFS project after receiving assistance with grant proposal components. No major challenges occurred; however, varying coalition experience required customized technical assistance. This approach, including group training and one-on-one coaching, ensured substantial progress for all subgrantees. Monthly training and technical assistance will continue in FY25 and FY26, with plans to add new peer-sharing opportunities.
- The updated and approved objective for FY26: *By September 29, 2026, and annually, increase the capacity of community prevention providers as measured number of trainings, number of individuals trained, and post-training surveys.*

**Goal 3: Enhance positive health behaviors and prevent substance use across all regions of the State.**

**Objective 3.1: By December 29, 2023, develop a statewide community health needs assessment (CHNA) that identifies key substance use prevention needs and issues through systemic, comprehensive data collection and analysis, as evidence by the submission of the CHNA with the second quarterly report. (Required Activity within 90 days)**

- Update: *Completed*. The project completed a Statewide Substance Misuse Community Health Needs Assessment (CHNA) within 90 days and submitted it to SAMHSA in December 2023. This assessment analyzed statewide substance use data, overdose and hospitalization rates, and included community input. Key findings were rising overdose deaths (especially from opioids and methamphetamine), methamphetamine and marijuana as the main substances of concern, and significant gaps in prevention and treatment resources in rural and underserved areas. The CHNA has been essential for developing state and local strategies and is regularly shared with stakeholders. Despite a tight timeline, the team successfully compiled the report, which will be updated annually.
- An updated objective was submitted and approved for the upcoming year: *By September 29, 2026, and annually, review and update as needed the statewide community health needs assessment (CHNA) that identifies key substance use prevention needs and issues through systemic, comprehensive data collection and analysis*

**Objective 3.2: By December 29, 2023, integrate information learned from community health needs assessment process into a statewide community health improvement plan (CHIP) that illustrates a systematic effort to address public health problems and addresses long-term substance use prevention across the state, as evidenced by the submission of the CHIP with the third quarterly report. (Required Activity within 90 days)**

- Update: Completed and ongoing collaboration. The Arkansas Department of Health (ADH) leads the annual update of the State Health Improvement Plan (CHIP). The PFS team and evaluators met with the CHIP coordinators in October 2025 to update them on initiatives and resources available from the Office of Substance Abuse and Mental Health (OSAMH), specifically the State Epidemiological Outcomes Workgroup and PFS evaluators for data research support on indicators related to substance misuse and treatment. The multi-agency effort was completed in 2024 and 2025, resulting in an updated [SHIP for the years of 2024-2029](#). The PFS team, and OSAMH, continue to offer support, input, and partnership for monitoring and implementation of the SHIP.
- An updated objective was submitted and approved for the upcoming year. Updated Objective: *By September 29, 2025 and annually, provide input and assistance to the Arkansas CHIP committee to ensure substance use data is included and program strategies are aligned with statewide priorities as measured by meeting agendas, minutes, and updated plans.*

**Objective 3.3: By December 29, 2023, Identify and collaborate with coalition entities serving the selected communities and underserved populations throughout Arkansas by publishing a Request for Proposals, soliciting participation as subgrantees to increase the capacity of their community to implement prevention strategies. (Allowable Activity)**

- Update: *Completed in Year 1*. Arkansas issued a Request for Proposals (RFP) in October 2023, selected five sub-regional subgrantees by December, and met Goal 1, Objective 3. These agencies continued to receive funding in FY25, with no new RFP needed, ensuring stability and focused support through training, technical assistance, and monitoring. All five entities remained engaged and met expectations. Our long term goal to create regional coalition networks that make up a state network of coalitions is well underway. The delay in funding

announcements for continued funding for FY26 has slowed our annual kickoff of activities but as of this submission, all subrecipients are under contract and the official kickoff meeting was completed on December 1, 2025.

- Year 3 updated and approved objective: *By October 31, 2024, and annually, maintain funding for the regional PFS sub-grantees.*

**Objective 3.4: By the end of the project period in 2028, reduce by 15% the number of hospitalization and emergency department visits due to Substances (Marijuana, Cocaine, Alcohol, Opioids, Stimulants, Tobacco, Vaping). (Priority: Other Drugs).**

- Update: Baseline data were established, including Arkansas's 2021 emergency department visit rate of 128.4 per 100,000 population. FY25 activities focused on prevention strategies to reduce high-risk use and overdose, such as Naloxone distribution and community training in overdose reversal. These efforts lay the groundwork for reducing future hospitalizations and ER visits.
- Updated and approved objective for FY26: *By the end of the project period in 2028, lower the rate of fatal overdose attributed to methamphetamine use in adults in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from the Arkansas Department of Health. (Priority: Methamphetamine).*

**Objective 3.5: By the end of the project period in 2028, increase the perception of harm of methamphetamine use among youth (12-17) by 15% in each region of the State of Arkansas, as measured by the APNA. (Priority: Methamphetamines)**

- Update: APNA 2023 data show relatively low perception of harm for methamphetamine among youth. Coalitions implemented school-based education and community campaigns to address this gap. A notable effort was a youth-led awareness campaign in region 3, which reached hundreds of students and emphasized methamphetamine risks.
- Year 3 updated and approved objective: *By the end of the project period in 2028, lower the rate of non-fatal drug overdose attributed to all drug use in adults in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from the Arkansas Department of Health. (Priority: Other drugs)*

**Objective 3.6: Within the next five years, increase the perception of harm associated with marijuana use among youth (12-18) by 15% in each region of the State of Arkansas, as measured by the APNA. (Priority: Marijuana)**

- Update: Similar to methamphetamine, APNA data indicate low harm perception for marijuana. Sub-recipients delivered school-based activities, targeted technical assistance to coalition's conducting prevention, and disseminated prevention awareness campaigns to increase awareness of cannabis dangers. These initiatives aim to shift attitudes over time through consistent messaging.
- Updated and approved objective for FY26: *By the end of the project period in 2028, reduce the percentage of last 30-day use of alcohol in youth in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from APNA. (Priority: Alcohol)*

**Objective 3.7: By the end of the project period in 2028, reduce methamphetamine use in each region of the state, as measured by NSDUH. (Priority: Methamphetamine).**

- Update: The PFS team and subrecipients are implementing media campaigns, school-based prevention, and community engagement to raise perceived harm.
- Updated and approved objective for FY26: *By the end of the project period in 2028, reduce the percentage of last 30-day use of nicotine using a vape device in youth in each region of the*

*State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from APNA. (Priority: Other)*

**Objective 3.8 (Added and approved for FY 26): By the end of the project period in 2028, reduce the percentage of last 30-day use of marijuana in youth in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from APNA. (Priority: Marijuana)**

**Objective 3.9 (Added and approved for FY26): By September 29, 2026, improve surveillance of the persistent concerns (Prevalence of use of tobacco and other illicit drugs; Rate of hospitalizations related to priority substance concerns; Substance-related injuries and illnesses; Prevalence of use of opioids, methamphetamine, and alcohol) and emerging concerns (Prevalence of the use of vaping devices for marijuana and tobacco) identified in the Strategic Prevention Plan by identifying how we are monitoring those persistent and emerging concerns.**

### 3. EVALUATION UPDATES AND OUTCOMES

- Onboarded subrecipients to an online prevention tracking and reporting platform (pSTAR) customized to collect data needed for grant and other reporting.
- Completed trainings for the newly developed CORT tool with sub-recipients.
- Trained and selected updated EBPs based on new SAMHSA and SPARS guidance.
- Provided sub-recipients with training and resource materials regarding “reached and served” strategies, definitions and documentation requirements.
- Conducted post-event feedback sessions for PFS Summits and Conferences and provided report to PFS team and MidSouth Training Academy (UALR).
- Received training and assistance from MidSOUTH

Activity/Deliverable	Date	Updates
MidSOUTH to coordinate 5 regional workshops focusing on community mobilization/youth focused prevention across the state	Beginning October 2024	- Arrangements made to coordinate trainings and to create a training schedule. - Virtual & in-person regional trainings/workshops conducted in March 2025 (focused on community mobilization/youth focused prevention; received training on newly designed Arkansas-specific All-Stars Training) - Approximately 24 total participants
MidSOUTH to coordinate the organization of two-day NexGen Youth Prevention Summit	Beginning October 2024	Set up location; Created registration link; Secured catering; Created event program (brochure); Set up speakers; Secured promo items and swag for attendees Conference Attendance: Total – 393 Under 13 – 32 Age 13-17 – 211

		Adults – 128 22 - Unknown
MidSOUTH to provide monthly reports	Beginning October 2024	Monthly reports provided with total # of attendees, demographics, and evaluations
Other trainings/presentations	June 27, 2025	Hosted presentation skills training with APAC with 5 participants present
	April 29-May 2, 2025	Hosted SPF Application Prevention Skills Training (SAPTS) with 23 participants present
	May 8, 2025	Hosted SAPTS TOT with 10 participants present

- In-person “NextGen” Youth Prevention Summit in July 2025
  - a. All regions participated in the summit. A post-event survey (5-items) was conducted with adult and youth attendees to assess their perceptions of the conference’s impact on their confidence, motivation, and readiness to support community-based prevention efforts. Specifically, the survey explored whether attendees felt empowered to make a difference, gained practical tools and strategies, increased their confidence in creating meaningful change, and felt motivated to take action within their communities.
    - i. For all questions, at least 84% of adults and youth reported positive agreement. However, the average across all questions by group was 92% agreement for adults and 86% agreement for youth.
    - ii. Compared to youth, adults reported 'more favorably' for all questions except question 3 (feeling confident about making a positive change).

Adults (n=38)	Agreement % (Agree + Strongly Agree)
I feel empowered to make a difference in my community based on what I learned during the conference.	94.7%
The conference provided practical tools and strategies I can apply in my work or community.	97.4%
I feel more confident in my ability to create meaningful change as a result of attending this conference.	83.8%
I feel confident that I can support prevention efforts that make my community stronger.	89.5%
I feel motivated to take action in my community after attending this conference.	94.7%

Youth (n=160)	Agreement % (Agree + Strongly Agree)
I feel like I can make a difference in my community because of what I learned during the conference.	83.8%
The conference gave me helpful ideas and tools I can use at school or in my community.	88.0%

This conference helped me feel more confident about making a positive change.	85.6%
I believe I can make my community better by helping other make safe and healthy choices.	85.0%
I feel inspired to do something positive in my school or community after attending this conference.	85.4%

- Annual Reached and Served

Reach

	Q1	Q2	Q3	Q4	FY 25 Total
<b>Total Reach</b>	3,653	2,725	22,313	139,984	<b>168,675</b>
<b>New Reach</b>	3,653	2,555	16,735	16,798	<b>160,442</b>

Served

	Q1	Q2	Q3	Q4	FY 25 Total
<b>Total Served</b>	90	1,297	0	1,795	<b>3,182</b>
<b>New Served</b>	90	514	0	215	<b>819</b>

#### 4. PLANNED ACTIVITIES FOR UPCOMING REPORTING PERIOD BY GOAL AND OBJECTIVE

**Goal 1: Strengthen infrastructure of underserved communities with high substance misuse risk**

**Objective 1.1: *By September 29, 2026, and bi-annually thereafter, monitor priority substance use data impacting Arkansas communities at the state, regional, and county level, as measured by updated Regional Profiles every two years.***

**Activities:** In FY26, the project will update Regional Needs Assessment profiles with new data and compile state and local substance use indicators for each region by early 2026. The revised CHNA addendum will be shared with subgrantees and the State Epidemiological Workgroup to identify gaps. Ongoing data monitoring, such as tracking opioid overdoses and youth vaping trends, will ensure interventions stay data driven. Outreach plans will adjust if new data shows underserved communities, aligning with Goal 2, Obj. 2.

**Objective 1.2: *By September 29, 2026, promote fidelity to the use of evidence-based policies, programs, and practices (EBPPP) by coordinating bi-annual (2) EBPPP workgroup meeting as measured by program documentation; meeting agenda and minutes and annual summary report of active EBPPPs in the State. (Required Ongoing Activity)***

**Activities:** In FY26, the project will hold two statewide Sub-Grantee Roundtable meetings: one in late March (spring) on sustaining evidence-based programs and another in late summer focused on data-driven decision making and mid-project outcomes. Each session features coalition peer presentations and a best-practice workshop led by the state SPF-PFS team. Attendance and action items will be

tracked, with valuable insights integrated into technical assistance. This schedule supports ongoing peer learning and sharing of promising practices throughout all five regions.

**Objective 1.3: *By November 30, 2025, and annually thereafter, maintain funding to five (5) sub-regional subrecipients from underserved communities with high substance misuse risks, ensuring that they are equipped with state-of-the-art substance misuse prevention and treatment resources as measured by completed contracts. (Required Ongoing Activity)***

**Activities:** In FY26, AR PFS will renew contracts and funding for its five sub-regional coalition subgrantees. Oversight will ensure annual benchmarks are met through orientations, quarterly SPARS data reviews, check-ins, and technical support as needed. No new RFPs or subgrantees are planned; the focus is on strengthening the current network. Each coalition is expected to complete its Year 3 action plan to prepare for Year 4.

**Goal 2: Increase the capacity of community-based organizations from underserved communities to implement and sustain prevention services**

**Objective 2.1: *By October 30, 2025, and annually thereafter, invite all partnerships with existing State SPF-PFS Grantees to the regional network and to midsouth and develop and communication plan to reduce areas of overlap and ensure best practices are utilized, as measured by documented meeting minutes and a formalized engagement schedule. (Required Activity within 45 days)***

**Activities:** The project will maintain collaboration with the Share Foundation, Arkansas’s SPF-PFS community grantee, ensuring ongoing communication and sharing of best practices. Planned efforts include inviting Share Foundation staff to all ARK\_PFSST-23 training and roundtables in FY26, holding quarterly coordination calls to align efforts, and creating a “communication charter” detailing meetings and shared goals. As new SPF-PFS grants are awarded in Arkansas or nearby, the project will proactively involve them in this network to coordinate resources and avoid duplication, aiming to present unified prevention strategies statewide.

**Objective 2.2: *By September 29, 2026, and annually thereafter, monitor and update regional prevention efforts to ensure strategies are planned and targeted to underserved communities as measured by monthly program documentation of number and demographics reached and served by sub-grantees.***

**Activities:** In Q4 FY26, the project will update the statewide prevention strategic plan based on new data and insights. Subrecipients will assess whether to engage more underserved communities if local substance misuse spikes appear. A mid-year strategic review with all subgrantees in July 2026 will cover newly identified high-need groups and partnership strategies. Subgrantees will maintain outreach to unfunded providers—such as grassroots groups, faith-based organizations, or minority leaders—to expand coalition efforts. By year’s end, each coalition targets at least two new active community partners not previously involved in FY24–25. Progress will be tracked through quarterly reports and an updated strategic plan.

**Objective 2.3: *By March 31, 2026, and annually thereafter, ensure best practice evaluation practices by reviewing the evaluation plan to ensure that data collection efforts are both in compliance with funding requirements and producing useful information for the State and the sub-grantees to measure their performance.***

**Activities:** In FY26, the team will implement and refine the evaluation plan from Year 1. Main tasks include completing the first annual outcomes evaluation (using data through Q4 FY25) and sharing results with stakeholders by January 2026; updating data tools for any SPARS changes, like the CORT format; and adding qualitative feedback, such as coalition questions on capacity growth and outreach.

The team will also prepare for the FY27 mid-term evaluation by defining baseline and mid-term outcome comparisons. Subgrantee involvement will increase through a data utilization training to help subrecipients better use their data. These efforts support continued progress and evidence-based adjustments.

**Objective 2.4: *By September 29, 2026, and annually thereafter, provide ongoing technical assistance and support to sub-grantees for capacity building as measured by monthly prevention trainings and peer-sharing opportunities as measured by meeting agendas, minutes, and training summaries.***

**Activities:** In FY26, the project will enhance technical assistance and capacity-building for five subrecipients, focusing on professionalizing operations and preparing for future funding. Monthly TA calls will shift to advanced topics like sustainability planning and grant readiness. By Q2 2026, a second Sustainability & Grant Writing Workshop will help subrecipients refine plans and begin grant proposals. Each coalition will identify at least one funding opportunity, with hands-on mentoring through the application process. Peer-to-peer support will increase, such as pairing experienced coalitions with newer ones for targeted guidance. Operational issues like staff turnover will be addressed promptly with training support. By year-end, all coalitions are expected to show greater capacity, and at least two will have submitted grants or secured new funding.

**Objective 2.5: *By September 29, 2026, and annually, increase the capacity of community prevention providers as measured number of trainings, number of individuals trained, and post-training surveys.***

**Activities:** The monthly training series for subgrantees and community partners will continue through FY26, with virtual workshops held on the last Thursday of each month covering advanced prevention topics. Planned sessions include program evaluation (Oct 2025), cultural competence (Nov 2025), leadership (Feb 2026), policy advocacy (Mar 2026), and sustainability (May 2026). An in-person “NextGen” Youth Prevention Summit is set for July 2026, offering peer education and project planning for youth leaders. Each coalition will also hold at least one local training event, such as a Naloxone workshop or a town hall on underage drinking. All trainings will be evaluated via post-session surveys, with content updated per participant feedback. By FY26’s end, we anticipate increased provider skills and more trainings led by subgrantees.

**Goal 3: *Reduce the onset and progression of substance misuse and its related problems throughout each region of the State.***

**Objective 3.1: *By September 29, 2025, and annually, review and update as needed the statewide community health needs assessment (CHNA) that identifies key substance use prevention needs and issues through systemic, comprehensive data collection and analysis.***

**Activities:** The project will update the Statewide Community Health Needs Assessment (CHNA) in FY26, using new data on substance use from 2024 surveys and 2025 overdose reports. An addendum will highlight current trends and issues, to be submitted with the FY26 Q2 report to SAMHSA. We’ll also expand qualitative data collection by holding focus groups or interviews in Year 3 to gather insights, especially on barriers to treatment in affected areas. These findings will enhance the CHNA and ensure prevention planning matches the state’s evolving needs.

**Objective 3.2: *By September 29, 2025 and annually, provide input and assistance to the Arkansas CHIP committee to ensure substance use data is included and program strategies are aligned with statewide priorities as measured by meeting agendas, minutes, and updated plans.***

**Activities:** We will work closely with the Arkansas Department of Health (ADH) to ensure substance misuse priorities are part of the State Health Improvement Plan (CHIP). For the 2026 CHIP update, we

will share key findings from the updated CHNA with ADH and attend stakeholder meetings. We aim to include metrics related to our project outcomes, like youth perception of harm and overdose rates, in the CHIP monitoring framework. We also plan to co-host a "Prevention in the CHIP" workshop with ADH in spring 2026 to connect coalition leaders and public health officials on addressing CHNA needs through our and other initiatives. By mid-2026, we expect CHIP to maintain a focus on long-term substance use prevention influenced by our work, helping align resources and support sustainability beyond our grant term.

**Objective 3.3: By October 31, 2024, and annually, maintain funding for the regional PFS sub-grantees.**

**Activities:** We will continue supporting our existing coalition network to serve targeted underserved populations. All five subgrantees have annual renewable contracts; FY26 renewals are complete, and FY27 renewals will be addressed later in the reporting period. Network expansion will only occur if additional funding or special opportunities arise; otherwise, we will focus on deepening impact within the current subgrantee cohort for FY26.

**Objective: 3.4 - By the end of the project period in 2028, lower the rate of fatal overdose attributed to methamphetamine use in adults in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from the Arkansas Department of Health. (Priority: Methamphetamine).**

Baseline data from Arkansas Department of Health (2021)	
Region	Rate per 100,000
Region 1 – Community Clinic NWA	2.1
Region 2 – Crowley’s Ridge Development Council	5.6
Region 3 – Bridging the Gaps of Arkansas	5.1
Region 4 – Community Empowerment Council	3.0
Region 5 – Women’s Council on African American Affairs	9.5
State of Arkansas	5.3

**Objective 3.5 - By the end of the project period in 2028, lower the rate of non-fatal drug overdose attributed to all drug use in adults in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from the Arkansas Department of Health. (Priority: Other drugs)**

Baseline data from Arkansas Department of Health (2021)	
Region	Rate per 100,000
Region 1 – Community Clinic NWA	59.9
Region 2 – Crowley’s Ridge Development Council	332.9
Region 3 – Bridging the Gaps of Arkansas	97.4
Region 4 – Community Empowerment Council	68.0
Region 5 – Women’s Council on African American Affairs	121.0
State of Arkansas	128.4

**Objective 3.6 - By the end of the project period in 2028, reduce the percentage of last 30-day use of alcohol in youth in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from APNA. (Priority: Alcohol)**

Baseline data from 2023 APNA	
Region	Percentage indicating alcohol use in the past 30 days
Region 1 – Community Clinic NWA	5.8%
Region 2 – Crowley’s Ridge Development Council	6.6%
Region 3 – Bridging the Gaps of Arkansas	9.8%
Region 4 – Community Empowerment Council	8.5%
Region 5 – Women’s Council on African American Affairs	5.6%
State of Arkansas	7.0%

**Objective 3.7 - By the end of the project period in 2028, reduce the percentage of last 30-day use of nicotine using a vape device in youth in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from APNA. (Priority: Other)**

Baseline data from 2023 APNA	
Region	Percentage indicating vaped nicotine use in the past 30 days
Region 1 – Community Clinic NWA	4.3%
Region 2 – Crowley’s Ridge Development Council	7.4%
Region 3 – Bridging the Gaps of Arkansas	9.2%
Region 4 – Community Empowerment Council	9.5%
Region 5 – Women’s Council on African American Affairs	5.4%
State of Arkansas	6.7%

**Objective 3.8 - By the end of the project period in 2028, reduce the percentage of last 30-day use of marijuana in youth in each region of the State of Arkansas, as highlighted in the priority concerns of the Strategic Prevention Plan and as measured by data from APNA. (Priority: Marijuana)**

Baseline data from 2023 APNA	
Region	Percentage indicating any marijuana use in the past 30 days
Region 1 – Community Clinic NWA	4.0%
Region 2 – Crowley’s Ridge Development Council	6.6%
Region 3 – Bridging the Gaps of Arkansas	5.7%
Region 4 – Community Empowerment Council	5.1%
Region 5 – Women’s Council on African American Affairs	3.7%
State of Arkansas	4.4%

**Objective 3.9 – By September 29, 2026, improve surveillance of the persistent concerns (Prevalence of use of tobacco and other illicit drugs; Rate of hospitalizations related to priority substance concerns; Substance-related injuries and illnesses; Prevalence of use of opioids, methamphetamine, and alcohol) and emerging concerns (Prevalence of the use of vaping devices for marijuana and tobacco) identified in the Strategic Prevention Plan by identifying how we are monitoring those persistent and emerging concerns.**

**5. REPORTING PERIOD CHALLENGES AND MITIGATION STRATEGIES IMPLEMENTED**

Nature of Challenge	Mitigation Strategies
Bi-annual round tables insufficient for timely support; subgrantees needed more frequent communication and feedback.	<ul style="list-style-type: none"> <li>- Shifted to monthly roundtable meetings.</li> <li>- Monthly one-on-one check-ins with each subgrantee.</li> <li>- Shared dashboard for tracking deliverables.</li> <li>- Enhanced informal communication (Teams, email threads).</li> </ul>
Variations in local readiness, especially in rural areas; difficulty engaging stakeholders; technology/internet barriers; inconsistent data tracking at events.	<ul style="list-style-type: none"> <li>- Focused on relationship-building and personal outreach.</li> <li>- Adjusted timelines for engagement in low-readiness areas.</li> <li>- Structured communication plans with local partners.</li> <li>- Standardized event feedback forms and data capture.</li> <li>- In-person meetings and mailed materials to offset digital divide.</li> </ul>
Difficulty tailoring training to diverse audiences (professionals, volunteers, youth); scheduling conflicts; need for responsive TA.	<ul style="list-style-type: none"> <li>- Solicited and incorporated subgrantee feedback.</li> <li>- Customized regional workshop agendas.</li> <li>- Added youth-specific tracks at conferences.</li> <li>- Expanded peer-led trainings and ad hoc TA.</li> <li>- Coordinated and staggered scheduling.</li> </ul>
Need to align project plans with statewide initiatives (SHIP, CHIP); risk of siloed efforts and missed resource opportunities.	<ul style="list-style-type: none"> <li>- Early engagement with Arkansas Department of Health.</li> <li>- Regular information sharing with SEOW and other state bodies.</li> <li>- Formalized collaboration and document exchange.</li> <li>- Leveraged state initiatives for support (e.g., telehealth, media campaigns).</li> </ul>

**6. ADDITIONAL COMMENTS**