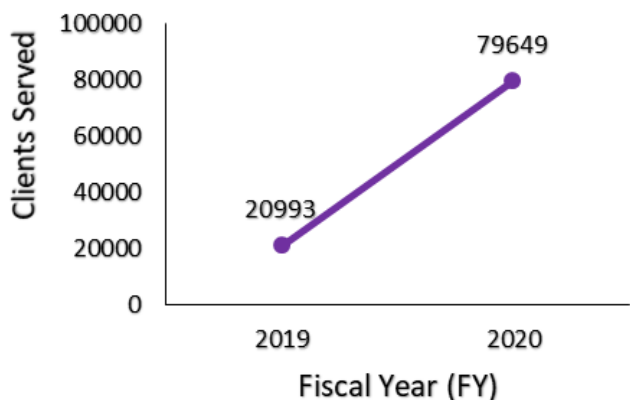


State Opioid Response Grants

In 2019, opioid use disorder (OUD) decreased significantly to 1.6 million from 2.0 million in 2018, suggesting that efforts to increase access to Medication-Assisted Treatment (MAT), psychosocial and community recovery supports have made a significant impact.¹ The purpose of the Substance Abuse and Mental Health Services Administration’s (SAMHSA) State Opioid Response (SOR) grants is to address the opioid crisis by increasing access to MAT; reducing unmet treatment need; and reducing opioid overdose-related deaths. This purpose is accomplished by supporting prevention, treatment, and recovery activities for OUD. SOR supplements current state and territory opioid-related activities and supports a comprehensive response to the opioid epidemic. In Fiscal Year (FY) 2020, SAMHSA distributed approximately \$1.4 billion in SOR funding.

This profile focuses on clients and their achievements from October 2018 through September 2020.

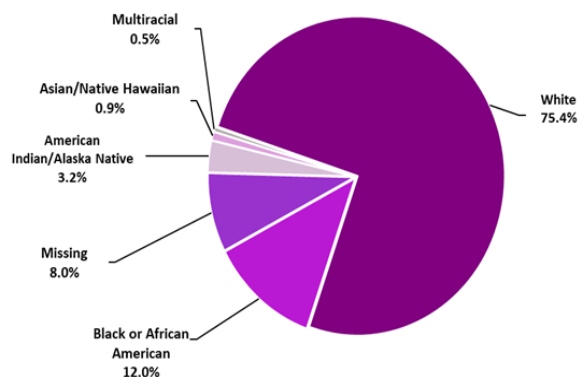
Clients served: FY 2019 - Present



To date, there has been 279% increase in clients served from FY 2019 to FY 2020.

Client Characteristics (Continued)

Race/Ethnicity



In addition, 8.5% clients were Hispanic/Latino.

Client Characteristics

Gender

The majority of the 100,202 clients with demographic data were male (57.0%, N=57,132). Females accounted for 41.8% (N=41,848), and 0.1% (N=132) self-identified as transgender. The remaining clients (N=1090, 1.1%) did not self-identify, indicated 'other', or had missing information.

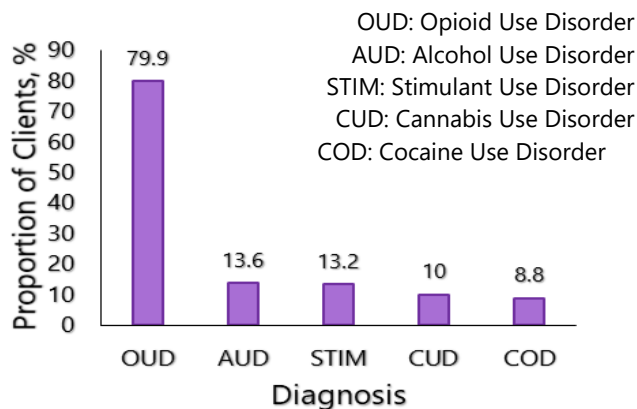
Age

Age Group, years	N	%
17 and Under	97	0.1
18 – 24	6,832	6.8
25 – 34	37,821	37.7
35 – 44	28,785	28.7
45 – 54	14,124	14.1
55-64	8,088	8.1
≥ 65	1,739	1.7
Missing	2,716	2.7

The majority (81%) of clients were 25 to 54 years old, with few younger than 18 or older than 64.

Most Common Diagnoses at Intake

Diagnostic data have been collected since March 2019, with the five most common diagnoses given below.



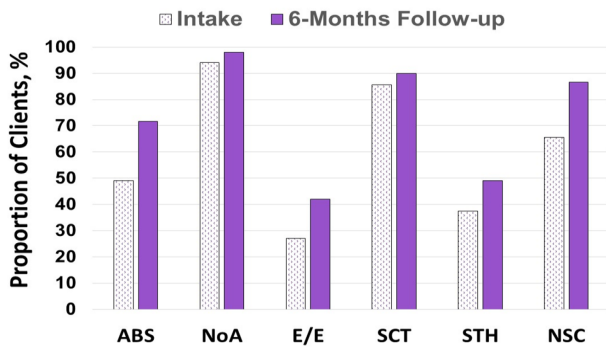
Almost 80% of the clients were diagnosed with an opioid use disorder. The four other common diagnoses were seen on average in about 10% of the clients.

¹<https://www.samhsa.gov/data/report/2019-nsduh-annual-national-report>

State Opioid Response Grants

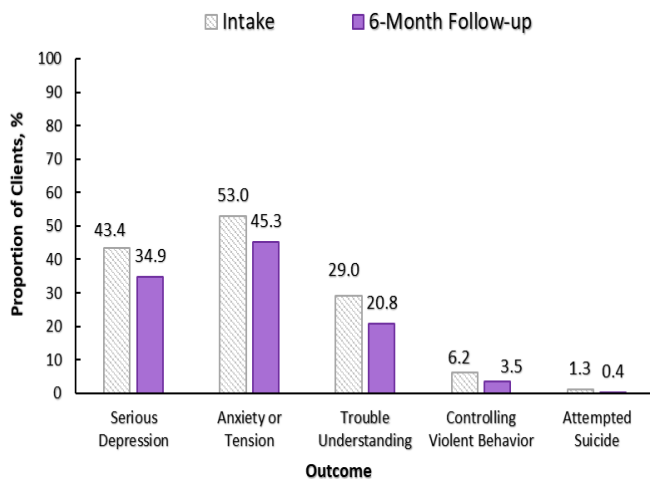
Outcomes: Intake and 6-Month Follow-Up Client Progress on Outcomes

The progress of clients for whom both intake and 6-month follow-up data were available was measured using outcomes. These outcomes included rates in the previous 30 days of (1) abstinence (ABS); (2) no arrests (NoA); (3) employment/being educated (E/E); (4) social connectedness (SCT); (5) stable housing (STH); and (6) no social consequences (NSC), such as interpersonal conflict.



All outcomes improved over the 6 months, suggesting that the SOR program was effective.

Outcomes: Mental Health at Intake and 6-Month Follow-up in the Past 30 Days



As shown above, all mental health outcomes showed improvement at 6-month follow-up.

Outcomes (Continued)

For each outcome, the relative percent change after the 6-month follow-up, calculated as

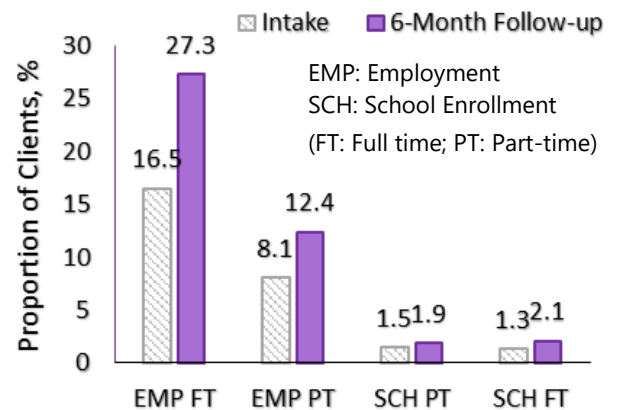
$$\frac{\text{Rate at followup} - \text{Rate at Intake}}{\text{Rate at Intake}} \times 100\%$$

Outcome	Description	% Change
Abstinence	No alcohol or illegal drug use	+46
Crime & Criminal Justice	No arrests within the last 30 days	+ 4
Employment/Education	Employed/enrolled in school	+ 54.7
Social Connectedness	Connected in their community	+ 4.9
Stable Housing	Permanent place to live	+ 31.4
Social Consequences	No illicit-substance related consequences	+ 31.9

Most outcomes improved noticeably, especially abstinence and employment/education.

Employment and Enrollment in School

Employment and school enrollment rates at intake and follow-up were as follows, for clients for whom this information was available:



Full- and part-time employment and school enrollment rates were all better at discharge than at intake, especially full-time employment and schooling rates, both increasing by over 60%.