FINAL REPORT
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Evaluation of ARC's INSPIRE Initiative

Presented by:

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East Tennessee State University Center for Rural Health Research

Housed in the East Tennessee State University (ETSU) College of Public Health, the Center for Rural Health Research works to improve health and well-being at the community, state, regional, and national levels. Located in the heart of Appalachia, the Center fulfills its mission by engaging rural communities to advance health and improve quality of life through innovative solutions that contribute to the expanding evidence base of what works in rural America. The Center works to honor and preserve its rich Appalachian heritage and Tennessee ties through distinctive research, community engagement, training, and policy.

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East Tennessee State University Addiction Science Center

The East Tennessee State University (ETSU) Addiction Science Center partners with affected communities in Central Appalachia to advance the science of substance misuse prevention and treatment. The Center accomplishes this mission by conducting innovative research; disseminating and implementing evidence-based prevention and treatment solutions; educating and training health professionals; engaging with and learning from the community to create lasting solutions; and providing evidence-based, high quality clinical care.

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Background

The INvestments Supporting Partnerships in Recovery Ecosystems (INSPIRE) Initiative "addresses the substance use disorder (SUD) crisis across Appalachia by creating or expanding a recovery ecosystem that will lead to workforce entry or re-entry."[1] Since launching the initiative in April 2021, the Appalachian Regional Commission (ARC) has funded 84 grantee projects across the Appalachian Region.[1]

The East Tennessee State University (ETSU) Center for Rural Health Research, in collaboration with the ETSU Addiction Science Center, conducted an evaluation of the INSPIRE Initiative on behalf of ARC in 2022-2023. The evaluation was designed to advance understanding of the accessibility of the application process, implementation successes and challenges, and preliminary grant impacts. It focused on the first 2 cohorts of grantees (n=50). Evaluation findings informed recommendations aimed at strengthening the INSPIRE Initiative.

The evaluation combined multiple strategies to address evaluation questions identified by ARC. Key evaluation strategies included: 1) a review of application materials and processes; 2) analyses of grant portfolio data available through ARC and other publicly available data; 3) administration of a cross-sectional, web-based survey to grantees; and 4) convening of virtual focus groups with grantees. The final report presents key findings and recommendations for ARC resulting from the evaluation of the INSPIRE Initiative.

Key Findings

An overview of key findings is presented below. A full summary of key findings is available in the final report.

Application Process

- The overall reach of select marketing/outreach methods used by ARC varied by method. Newsletters appeared to have a wider reach than press releases, while social media announcements regarding funding had a wider reach than other social media posts.
- Multiple potential grantees prematurely exited the application process according to findings from an analysis of organizational participation. Of the 313 organizations potentially interested in the INSPIRE Initiative, 213 of those organizations did not apply for funding.
- Survey respondents reported learning about the funding opportunity through multiple outreach methods, including engagement with ARC and finding promotional content developed by ARC. Similarly, focus group participants emphasized the value of an established connection to or relationship with ARC when describing how they learned about the INSPIRE Initiative.

- Approximately half of survey respondents described the overall process of applying for the grant as "easy." They also generally reported that key elements of the funding announcement as well as the pre-application workshop offered by ARC were helpful. Similarly, some focus group participants described the ease of the application process.

- Focus group participants most commonly identified the requirement for cost sharing or matching as a barrier to the application process. Consistent with this theme, based on survey findings, the most commonly identified suggestion for improving the application process was for ARC to provide a tool to help calculate funding/matching funds.

Needs Assessment

- Survey respondents leveraged multiple approaches to identify community needs in the recovery-to-work ecosystem when preparing their grant applications. The approaches most commonly reported as influential included: interviews with community members, key informants, or other populations of interest; informal relationships with community leaders; and third-party data analysis.

- Survey respondents applied information on community needs in multiple ways when preparing their grant applications. The most commonly reported uses included: identifying challenges to workforce participation; identifying gaps in behavioral health services, training, employment, and provision of support services; and demonstrating impacts of substance use.

- Most survey respondents continued to assess community needs as part of their projects. The most commonly reported uses of this information included: identifying new organizational/business partners; modifying project activities; and modifying projected outputs and/or outcomes.

Grantee Organizations and Goals

- A total of 50 grants were awarded according to the grant portfolio data provided by ARC. This included 16 planning grants and 34 implementation grants. Grantees focused on 197 Appalachian counties, representing nearly 47% of counties in the Appalachian Region. Most counties with INSPIRE funding were classified as transitional, at-risk, or distressed using ARC's levels of economic distress.[2]

- Varying types of organizations received grants. The most common organization type for all grants was non-profit organizations with 501(c)(3) status, followed by local governments and institutions of higher education.

- Grantee projects aligned with goals and objectives articulated in ARC's Strategic Plans.[3,4] Thirty projects corresponded to goal 2[*] of the 2016-2020 Strategic Plan,[3] while 20 projects corresponded to goal 2[†] of the 2022-2026 Strategic Plan.[4]

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[*] Goal: "Increase the education, knowledge, skills, and health of residents to work and succeed in Appalachia."
[†] Goal: "Expand and strengthen community systems (education, healthcare, housing, childcare, and others) that help Appalachians obtain a job, stay on the job, and advance along a financially sustaining career pathway."

- Grantee project goals, as described by survey respondents, generally clustered into 3 categories: employment goals (e.g., increasing workforce participation among individuals in recovery); aspirational goals (e.g., cultural change around substance use); and partnership goals (e.g., new coordination among partners to expand services).
- Across grant types, survey respondents identified multiple project activities. Among implementation grantees, the most commonly identified activities included: deliver soft skills training to individuals in recovery; build or expand partnerships with employers; and provide employment or job placement services to individuals in recovery. Among planning grantees, the most commonly identified activities included: establish partnerships with other organizations or employers; facilitate communication among organizations and/or employers; foster commitments from employers to offer opportunities to individuals in recovery; and develop training or other education for employers.
- Survey respondents reported serving a variety of populations, and many identified more than 1 population. The most commonly identified populations of focus included: individuals with substance use disorders or addiction; general adult population; individuals who have been incarcerated; and individuals employed in organizations serving or engaging with people with substance use disorders.

Partnerships

- Survey respondents incorporated a diverse array of partners into their projects. The most commonly identified partners included: 501(c)(3) nonprofits (other than institutions of higher education); county governments; and small businesses. Approximately half of survey respondents reported that all or most partnerships were established before the launch of their project.
- Survey respondents reported multiple areas of collaboration with partners. The most commonly identified area was project implementation or service delivery. Focus group participants also highlighted differences in the functions of partnerships by grant type, such as a focus on plan development or needs assessments among planning grantees compared to service delivery or participant referral among implementation grantees.
- Most survey respondents had engaged business/employer partners. The most commonly identified mechanisms for engaging these partners included: delivered training or other education to employers; established a network of employers that hire individuals in recovery; and created partnerships with in-demand industry sectors. More than half of survey respondents further reported that they had partnered or planned to partner with businesses/employer partners to modify their policies to support individuals with substance use disorder in staying employed.
- Survey and focus group participants described challenges and successes when engaging partners. Areas of success included establishing and expanding partner networks, partner alignment with project goals, and partnerships with businesses or employers. The primary

Grant Performance and Successes

- Grantee projects were designed to achieve multiple output and outcome performance measures defined by ARC.[5] Exhibit 1 presents the ARC performance measures designated for the INSPIRE Initiative, along with collective projected grantee outputs and outcomes. Note that while all of these ARC performance measures are designated for the INSPIRE Initiative, all grantees are not required to address each of them.

Exhibit 1. ARC Performance Measures: Projected Outputs and Outcomes for Grantee Projects	
Measure	Projected Outputs/Outcomes
Plans/reports developed (output)	24
Businesses served (output)	3,261
Businesses improved (outcome)	726
Students served (output)	640
Students improved (outcome)	461
Workers/trainees served (output)	4,586
Workers/trainees improved (outcome)	2,786

- Grantee projects that were closed and open at the time of the survey (November-December 2022) had addressed multiple output and outcome performance measures defined by ARC.[5] Exhibit 2 presents the ARC performance measures designated for the INSPIRE Initiative, along with collective achieved grantee outputs and outcomes.

Exhibit 2. ARC Performance Measures: Achieved Outputs and Outcomes for Grantee Projects	
Measure	Achieved Outputs/Outcomes
Plans/reports developed (output)	21
Businesses served (output)	525
Businesses improved (outcome)	384
Students served (output)	261
Students improved (outcome)	112
Workers/trainees served (output)	1,542
Workers/trainees improved (outcome)	1,081

- Grantees experienced early successes that expanded beyond performance measures. According to survey and focus group findings, major areas of success included: establishing and expanding partner networks; securing community and organizational support; and providing comprehensive services to individuals in recovery.

- During focus groups, implementation grantees described successful referral pathways for their programs that involved traditional and innovative partners, such as jails and drug court programs. They also frequently highlighted the involvement of Certified Recovery Specialists or Peer Recovery Specialists in these pathways.

Challenges and Costs

- Survey and focus group participants reported facing a range of challenges. Commonly identified challenges included stigma associated with substance use disorder and staffing difficulties.
- Survey respondents reported employing various strategies in an attempt to address challenges that they encountered. The most commonly reported strategies included: identified or engaged new organizational or business partners; expanded community outreach efforts; and expanded partner recruitment and/or retention efforts.
- Approximately half of survey respondents reported that they had not encountered any unanticipated costs. Among those reporting costs, the most commonly identified types included: staffing; participant recruitment or retention; and communications or marketing.
- Survey respondents identified multiple ways in which the COVID-19 pandemic impacted their ability to serve their communities or beneficiaries. The most commonly identified impacts included: modification of in-person services/events/activities; greater focus on virtual services/events/activities; and difficulty recruiting, engaging, or retaining participants. Focus group participants also highlighted significant staffing impacts resulting from the pandemic.

Data Collection and Reporting

- Approximately half of survey respondents were collecting data on performance measures identified by ARC and data on additional measures identified by their organization.
- Survey respondents identified additional measures that they were using to assess the impact of their projects, ranging from services provided to job placement and retention. Focus group participants, however, focused on job placement and retention. They noted the importance of collecting data on short-term job placement and long-term job retention.
- Survey respondents were using multiple tools to collect data for their projects. The most commonly identified tools included: data collection/reporting tool for project staff; survey of businesses; and survey of participants. They identified similar tools that they would use to continue to collect data on outputs and outcomes for up to 3 years after grant closure.
- Nearly all survey respondents reported moderate or high capacity to collect and report outputs and outcomes to ARC until grant closure, whereas most survey respondents reported low or moderate capacity up to 3 years after grant closure.

Sustainability Plans

- Approximately half of survey respondents had plans to sustain the work of their projects after grant closure. Most of the remaining respondents reported intentions to create a plan before closure. Sustainability plans, as described by survey and focus group participants, focused on securing additional funding, building on successes in expanding the recovery ecosystem, and leveraging partnerships.

Recommendations

A summary of recommendations aimed at strengthening the INSPIRE Initiative is presented below. Full recommendations are available in the final report.

Improving the Accessibility of the Application Process for the INSPIRE Initiative

1. Consider opportunities to enhance training for reviewers of INSPIRE applications.
2. Increase technical assistance or resources available during the application process, particularly for sections that could be more challenging for applicants.
3. Consider opportunities to improve the overall usability of the INSPIRE Requests for Proposals (RFPs) for applicants, such as offering a fillable grant application form.
4. Expand technical assistance or resources to support fulfillment of the application requirement for cost sharing or matching.
5. Continue to provide and promote pre-application workshops for applicants.
6. Ensure that outreach efforts reach Appalachian counties without INSPIRE funding that have evidence of high need.
7. Consider opportunities to expand outreach and engagement efforts to organizations that participate in the pre-application workshop or submit a Letter of Intent (LOI).
8. Consider opportunities to expand outreach and engagement efforts to organizations without a well-established relationship with ARC.
9. Continue to leverage ARC's website and *In The Region* newsletter as platforms for communicating about the INSPIRE Initiative.
10. Consider opportunities to include organizations without INSPIRE funding in the examination of the accessibility of the INSPIRE application process.

Improving the Implementation of the INSPIRE Initiative

11. Consider the implications of the scale of cost sharing or matching required for INSPIRE projects.
12. Provide training or resources to assist grantees in reducing stigma associated with substance use disorder.
13. Explore opportunities to assist grantees in delivering effective training to participants and partners.
14. Explore the implications of increasing the maximum length of the performance period.
15. Create platforms to support communication and collaboration among grantees.

Improving the Ability to Document the Effectiveness of the INSPIRE Initiative

16. Provide supplemental training or technical assistance on reporting requirements to new and current grantees.
17. Consider opportunities to enhance guidance on performance and other measures for new and current grantees.

18. Consider opportunities to support grantees in designing or identifying high-quality tools and processes for data collection.

19. Gather feedback to enhance the usability of the reporting system from recent or current grantees.

Evaluation Background

This section presents background information on the evaluation of the INvestments Supporting Partnerships In Recovery Ecosystems (INSPIRE) Initiative.

Established in 1965, the Appalachian Regional Commission (ARC) is dedicated to the economic development and community capacity-building of the Appalachian Region, which represents 423 counties across 13 states along the Appalachian Mountains.[6] One of the many funding opportunities of ARC is the INSPIRE Initiative, which began in April 2021 in response to the substance use disorder (SUD) crisis.[1] The INSPIRE Initiative seeks to establish and expand substance use disorder recovery ecosystems across the Appalachian Region in order to support workforce development.[7] According to ARC, the recovery ecosystem is defined by linkages among various sectors, with an aim of supporting individuals in maintaining recovery from substance use disorder and attaining employment.[8] To date, ARC has awarded approximately $28 million in INSPIRE funding to 84 projects serving 289 Appalachian counties.[1] The evaluation described in this final report focused on the first 2 cohorts of grantees (n=50) that received funding in April 2021 and November 2021.

The East Tennessee State University (ETSU) Center for Rural Health Research, in collaboration with the ETSU Addiction Science Center, was selected by ARC to conduct a one-year evaluation of the INSPIRE Initiative during 2022-2023. The purpose of the mixed-methods evaluation was to examine the accessibility of the application process, implementation successes and challenges, and preliminary grant impacts. Specifically, the evaluation addressed a series of evaluation questions, reflecting 4 domains, identified by ARC (below). Evaluation findings also informed a set of recommendations aimed at strengthening the INSPIRE Initiative, including opportunities to improve the accessibility of the application process, initiative implementation, and documentation of initiative effectiveness.

- Needs Assessment and Application Process
    - How did current grantees find out about INSPIRE?
    - How do grantees identify community needs in the SUD recovery-to-work ecosystem, and to what extent are they applying this information to their INSPIRE applications and projects?
    - To what extent does the INSPIRE marketing/outreach process reach potential grantees?
    - To what extent are INSPIRE application processes and requirements accessible to potential grantees?
- Description of the Grant Portfolio
    - What are the goals of grantee projects?
    - What approaches are the grantees implementing to meet these goals?
    - What types of organizations have received the grants, and what are the characteristics of their beneficiaries?

- Grant Implementation and Performance
  - What specific outputs and outcomes were grantee projects designed to achieve?
  - What are the current outputs and outcomes for the grants?
  - What are early successes of INSPIRE grants, and what factors have contributed to these successes?
  - What challenges have grantees faced and how have they addressed them?
  - What are grantees' plans to sustain the work of their projects after their INSPIRE grant closes?
  - How have grantees incorporated partnerships into the design and implementation of their projects? What successes and challenges related to partnerships have grantees experienced?
  - How have grantees engaged business partners as potential employers in supporting individuals with SUD entering or re-entering the workforce? To what extent are business/employer partners modifying their policies to support the SUD population with maintaining employment?
  - Which referral pathways have grantees found to be most successful in supporting people recovering from SUD to engage or reengage in the workforce?
  - What types of unanticipated costs have grantees encountered in implementing their INSPIRE grants?
  - What impacts has the pandemic had on INSPIRE grantees' ability to serve their communities/beneficiaries?
- Grant Performance Measurement
  - What capacity do grantees have to collect and report on outputs and outcomes up to three years after grant close?
    - What data collection tools are they using?
    - What data are they collecting?
  - Other than outputs and outcomes identified for the project, are there other outputs and outcomes that the grantee feels would be important to capture?

The evaluation combined multiple strategies to address the evaluation questions identified by ARC, including strategies involving primary data collection and secondary data analyses. Key evaluation strategies included: 1) a review of application materials and processes; 2) analyses of grant portfolio data available through ARC and other publicly available data; 3) administration of a cross-sectional, web-based survey to grantees; and 4) convening of virtual focus groups with grantees. A summary of the evaluation methods and associated limitations can be found in Appendix A.

Evaluation Findings

This section presents key findings from the evaluation of the INvestments Supporting Partnerships in Recovery Ecosystems (INSPIRE) Initiative. It is organized using the evaluation questions identified by the Appalachian Regional Commission (ARC), with evaluation questions on similar topics combined where appropriate. Each evaluation question, or group of evaluation questions, was addressed through 1 or more evaluation strategies.

Application Process

- To what extent does the INSPIRE marketing/outreach process reach potential grantees?
- To what extent are INSPIRE application processes and requirements accessible to potential grantees?
- How did current grantees find out about INSPIRE?

The reach of the marketing/outreach process as well as the accessibility of the application processes and requirements for the INSPIRE Initiative were evaluated through multiple strategies. This section presents key findings from several strategies. These strategies include a review of select marketing/outreach methods used by ARC, a review of the Requests for Proposals (RFPs) released by ARC for 3 rounds of funding, an analysis of the points at which potential grantees chose to enter and exit the application process, and, lastly, insight from grantees gathered through the web-based survey and virtual focus groups.

ARC leveraged multiple marketing/outreach methods to inform potential grantees of the INSPIRE Initiative, including press releases (n=2), newsletters (n=2), and social media posts (n=4) for round 1 and round 2 of funding. Overall reach varied by method. Press releases generally reached around 4,000 individuals, while newsletters reached greater than 10,000 individuals for both rounds 1 and 2 of funding (Exhibit 3). Click rates for these materials ranged from 2.7% (round 2 newsletter) to 5.8% (round 2 press release).

Exhibit 3. Press Release and Newsletter Outreach for Rounds 1 and 2
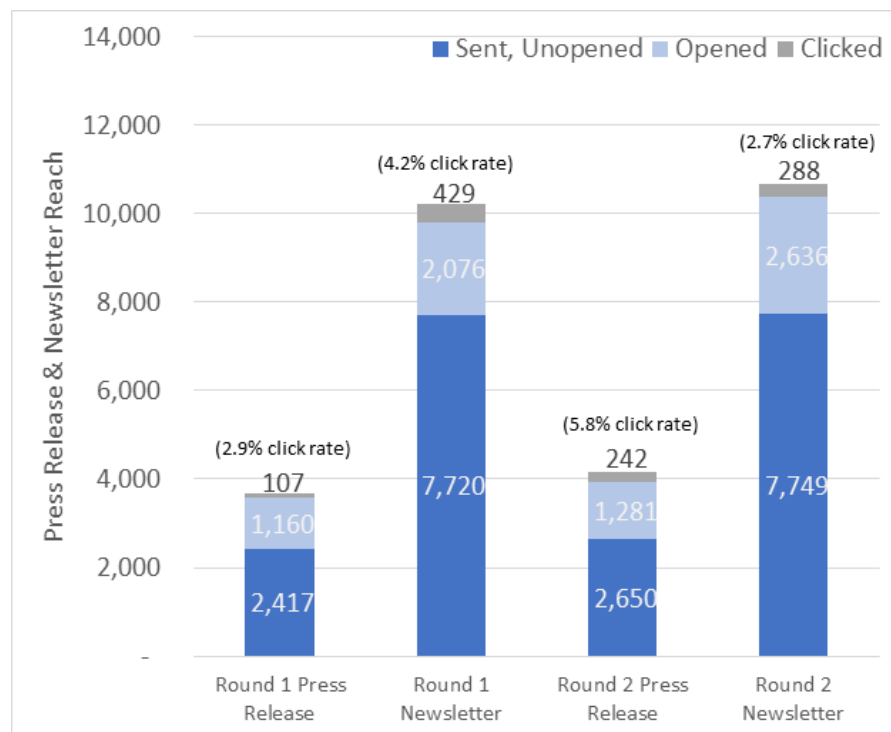
Evaluation strategy: Application accessibility analysis

Social media posts varied widely in terms of reach by post and social media outlet (Exhibit 4). The round 1 INSPIRE funding announcement had the widest reach of all social media posts, reaching 21,484 individuals. The round 2 INSPIRE funding announcement reached 11,081 individuals. The regular promotion post for round 1 and the Inspiring Change post for round 2 reached smaller audiences of 1,875 and 3,676, respectively. For the funding announcements, Twitter reached the widest audience followed by Facebook. For these funding announcement posts, LinkedIn reached the smallest audience, representing only 5% of the reach of these social media posts. In contrast, the round 2 Inspiring Change post had the largest reach on LinkedIn compared to Facebook and Twitter; however, it still had a much smaller reach than the funding announcements.

Exhibit 4. Social Media Outreach for Rounds 1 and 2
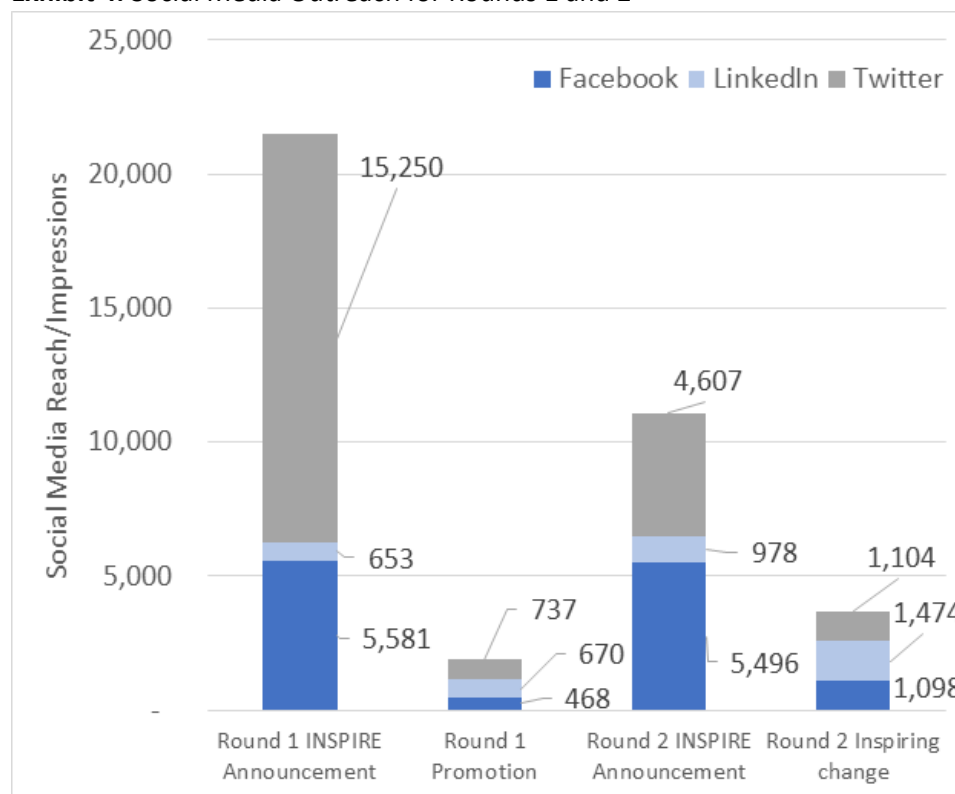
Evaluation strategy: Application accessibility analysis

The accessibility of the application process could be reflected in the points at which potential grantees chose to enter or leave the process. To the extent possible, the points at which organizations entered and exited the process of applying for and/or receiving INSPIRE funding were identified (Exhibit 5). Of the 313 potentially interested organizations, 213 did not apply for INSPIRE funding. A total of 206 organizations attended the pre-application workshop; 51 applied for funding, while 155 did not apply for funding. Additionally, 107 organizations did not attend the pre-application workshop and 49 of those applied for funding, while 57 did not apply. Of the 170 organizations that submitted an LOI, 100 went on to submit an application, while 70 did not. Of the 100 submitted applications, 50 were funded and 50 were not.

Exhibit 5. Organizational Entry and Exit Points in the Application Process				
Points	Number of organizations			
Attended pre-application workshop (No LOI)	143			
Submitted LOI for planning grant (No application)		17		
Submitted LOI for implementation grant (No application)		53		
Applied, but not funded for planning grant			7	
Applied, but not funded for implementation grant			43	
Applied and received funding for planning grant				16
Applied and received funding for implementation grant				34

Abbreviation: LOI, Letter of Intent

Evaluation strategy: Application accessibility analysis

The RFPs released in 2020 (round 1), 2021 (round 2), and 2022 (round 3) by ARC for the INSPIRE Initiative were reviewed to assess their accessibility to prospective grantees. Potential strengths and challenges for applicants were identified by the evaluation team.

Potential strengths that may improve accessibility to prospective grantees include:

- Time allowed;
- Pre–application workshop;
- Clear eligibility statements;
- Efforts to clarify via examples, templates, and appendices;
- Specific and transparent scoring rubric;
- Opportunities to ask questions; and
- Broad interpretation of partnerships.

Potential difficulties that may reduce accessibility to prospective grantees include:

- Presentation of expectations for planning and implementation grants within a single RFP;
- Use of specialized language;
- Links to external sources of information;
- Cost sharing or matching requirement; and
- Broad interpretation of partnerships.

Strengths

The funding announcement was released 60 days prior to the submission deadline, which generally appeared to be appropriate for an application of this length (50 pages). The preliminary workshop was noted for the first time in the RFP for round 3. This was a positive addition, helping to ensure that prospective grantees received key information and had potential questions answered in advance of submission. The eligibility guidelines also appeared clear, and the move toward detailed feasibility and organizational capacity should have been beneficial. Several examples, templates, and appendices were provided (particularly in round 3), which was likely helpful to applicants. Similarly, the scoring rubrics were described and

mirrored the order of the content in the RFP and application. The broad interpretation of partnerships was another potential strength. Permitting diverse partnerships may have allowed organizations to be creative and include partners that may have been previously excluded. Lastly, applicants were provided resources to ask questions. While these potential strengths were based on a review completed by the evaluation team and not the perspective of potential applicants, they suggest that the RFPs for the INSPIRE Initiative were generally understandable and encouraged potential grantees to apply.

Difficulties

Prospective grantees may have found it difficult to follow the expectations for each grant type as each RFP moves back and forth between planning and implementation grants. Notably, both types of applications have a limit of 50 pages, despite different expectations and funding amounts. There was also some use of specialized language. Such language may have deterred organizations from applying that were less advanced in their understanding of recovery ecosystems or related concepts. In some cases, terms were identified and well-defined, such as recovery ecosystems and substance use disorder. Examples of terms that may benefit from further explanation included "economic development systems", "post-treatment-to-employment continuum", "upskilling", and "wraparound services." Consistent with the use of specialized language, the SMOG Index Readability Test[9] scored the RFPs at the college level. Additionally, there were multiple links to external information, though these links were handled differently in each RFP. Some were hyperlinked, whereas others were not. Many links were for the overall ARC website on substance use disorder, but not necessarily the specific resource related to the sentence or paragraph where the link was located. The cost sharing or matching algorithm was also relatively complex and could have deterred organizations that struggled to calculate the match rate for their county(ies). While broad interpretation of partnerships may have been an area of strength, it may have also been an area of difficulty. The language on partnerships at times appeared to be inconsistent, which could have contributed to confusion. While these potential difficulties were based on a review completed by the evaluation team and not the perspective of potential applicants, they may highlight opportunities to improve the RFPs for the INSPIRE Initiative and, in turn, promote accessibility.

It was beyond the scope of this evaluation to gather information from potential grantees who did not apply, or applied, but were not funded. Grantees, however, represented a rich source of information on the reach of the marketing/outreach process and accessibility of the application processes and requirements. Grantees shared their perspectives and experiences through the survey and focus groups.

Grantees reported learning about the INSPIRE funding opportunity through multiple outreach methods, including engagement with ARC or finding promotional content developed by ARC. While multiple methods were identified, the 3 most frequently identified methods in the survey included: ARC website (n=24 of 49 survey responses); an established relationship with ARC

(n=13 of 49 survey responses); and information disseminated by other organization(s) (n=13 of 49 survey responses).

Grantees subsequently elaborated on how they learned about the INSPIRE Initiative through focus groups. They often connected learning about it to prior applications for or awards for an ARC grant (n=16 references), being in direct contact with ARC (n=14 references), or specifically having a relationship with ARC (n=12 references). While other outreach methods were noted (e.g., ARC website), grantees overall emphasized the value of an established connection to or relationship with ARC.

> *"Many of our infrastructure grants come through the ARC, but on this grant in particular, we are partnering with several entities in our area. Different in [that] sense . . . for us. Frequent flyers with ARC funding." (Implementation Grantee)*

> *"We've worked with ARC on other grant projects through our local development district. We saw it and we were going through some transitions here and it was hard not to respond but then when we were encouraged by someone, a colleague that felt we should try for it, that really made us go after the grant, and very needed in our area as well." (Implementation Grantee)*

Concerning grant applications, over half of grantees deemed the overall process of applying for an INSPIRE grant "very easy" (n=4 of 49 survey responses) or "easy" (n=26 of 49 survey responses) according to survey findings. Similarly, they generally reported that key elements of the structure and content of the funding announcement were helpful when preparing their grant applications. Examples of elements commonly identified as "very helpful" or "helpful" included the description of eligible grant activities, organization eligibility information, and templates. Specific to the pre-application workshop offered by ARC, most grantees that attended the workshop likewise described it as "very helpful" (n=22 of 33 survey responses) or "somewhat helpful" (n=10 of 33 survey responses). Prior to submission of the grant application, applicants were required to contact the ARC program manager(s) in the state(s) to be impacted by the proposed project. Most grantees reported that it was "very easy" or "easy" to not only contact the state program manager(s) (n=22 of 48 survey responses and n=17 of 48 survey responses, respectively), but also communicate with the state program manager(s) (n=19 of 46 survey responses and n=18 of 46 survey responses, respectively).

Grantees expanded on their application experiences, both positive and challenging, through the focus groups. Some grantees noted not only the ease or straightforwardness of the application process (n=12 references), but also positively characterized the overall application process or specific aspects of it (n=13 references). They described a positive experience working with ARC during the application process, such as having a positive working relationship with a grants officer and the timeliness of responses to applicant questions. More broadly, they highlighted flexibility in the application process as well as the availability of application forms and templates provided by ARC. Consistent with application requirements, a positive working relationship with state program managers (n=6 references) was also noted.

> *"Our experience was really positive. We found ARC was great to work with. We found the support and guidance was really good." (Implementation Grantee)*

Grantees identified several barriers to the application process, which could have implications for accessibility. The application requirement for cost sharing or matching, and related calculations, was the most commonly identified barrier (n=11 references). This included concerns with classifying counties using the required economic designations in order to identify the correct match rate for their projects. The second most commonly identified barrier centered on timelines (n=8 references), with various timelines of concern noted by grantees. Potential incongruities between planning grant completion and implementation grant execution, delays between award notification and public announcement of awards, and concerns over short grant timelines relative to delays often associated with federal funding were among those described. Although less common and in contrast to the positive experiences reported by some grantees, other identified barriers included difficulty using application forms and templates (n=5 references) and concerns about a lack of involvement or response from state program managers (n=4 references).

> *"I think the biggest challenge is their matching and their matching formula. I think the overall grant process I believe is relatively simple. The outcomes, outputs are a little bit different from how I think they define them and just how logically I think about them so that was a little bit of a challenge so I did appreciate the TA assistance with explaining that. . . . That's [the match] probably the biggest challenge because obviously, that's one of the keys in this planning grant and how we move forward." (Planning Grantee)*

In addition to application experiences, grantees identified opportunities to improve the application process and potentially increase accessibility. While multiple suggestions were reported across grantees (Exhibit 6), the most common suggestions for improvement identified in the survey included: provide a tool to help calculate funding/matching funds (n=13 of 47 survey responses); provide additional examples, templates, and/or appendices (n=9 of 47 survey responses); provide state-specific substance use disorder or workforce resources (n=9 of 47 survey responses); and increase the amount of time between release of the funding opportunity and submission (n=9 of 47 survey responses).

Exhibit 6. Grantee Suggestions for Improving the Application Process	
Suggestion	Total (n=47)
Provide a tool to help calculate funding/matching funds	13
Provide additional examples, templates, and/or appendices	9
Provide state-specific substance use disorder or workforce resources	9
Increase the amount of time between release of the funding opportunity and submission	9
Provide a comprehensive fillable form for writing the grant application	8
Provide additional information on the scoring rubric	7
Separate the funding announcements for Planning and Implementation Grants	7
No improvements are needed.	6
Provide general grant writing resources	5
Other improvement(s)	5
Expand the type of organizations and/or activities eligible for funding	4
Clarify or modify the expectations for Planning Grants	4
Clarify or modify the expectations of partners	3
Clarify or modify the expectations for Implementation Grants	2
Offer more opportunities to ask questions of the state program manager	2
Offer additional pre-application workshops	2
Reduce the amount of specialized language/jargon used in funding opportunity	2
Reduce the number of electronic links to outside sources of information in funding opportunity	1
Offer more opportunities to ask questions of the Appalachian Regional Commission	0

Evaluation strategy: Web-based survey of grantees

Needs Assessment

- How do grantees identify community needs in the SUD recovery-to-work ecosystem, and to what extent are they applying this information to their INSPIRE applications and projects?

The approaches used by grantees to identify community needs in the substance use disorder recovery-to-work ecosystem and the extent to which they applied this information were evaluated through the web-based survey and virtual focus groups. This section presents key findings from those strategies.

Grantees leveraged multiple approaches to identify community needs in the substance use disorder recovery-to-work ecosystem when preparing their grant applications for the INSPIRE Initiative. Collectively, the approaches reflected a variety of data collection methods, data sources, and audiences or populations of interest. According to survey findings, the 3 approaches for identifying needs most commonly reported as influential when preparing grant applications included: interviews with community members, key informants, or other populations of interest (n=21 of 47 survey responses); informal relationships with community leaders (n=21 of 47 survey responses); and third-party data analysis (e.g., analysis of US Census data) (n=20 of 47 survey responses). This was consistent for both implementation (n=13, 17, and 12 of 31 survey responses, respectively) and planning grantees (n=8, 4, and 8 of 16 survey responses, respectively). Similarly, grantees applied information on community needs in the recovery-to-work ecosystem in multiple ways when preparing their grant applications, including designing and demonstrating need for proposed projects. The 3 most commonly reported uses included: identifying challenges to workforce participation (n=34 of 45 survey responses); identifying gaps in behavioral health services, training, employment, and provision of support services (n=29 of 45 survey responses); and demonstrating impacts of substance use (n=27 of 45 survey responses).

Beyond the application process, most grantees (n=41 of 46 survey respondents) reported continuing to assess community needs related to the recovery-to-work ecosystem as part of their INSPIRE projects at the time of the survey. These grantees reported using information on community needs to inform multiple aspects of their projects, particularly project activities and partnerships. Specifically, the 3 most commonly reported uses of this information included: identifying new organizational/business partners (n=37 of 41 survey responses); modifying project activities (n=27 of 41 survey responses); and modifying projected outputs and/or outcomes (n=13 of 41 survey responses). As part of the focus groups, grantees expanded on their approaches for identifying community needs in the context of their projects. They commonly described organizational input (either their organization or others) (n=29 references) or community input (n=26 references) as sources for information. Some grantees described defined data collection methodologies (e.g., focus groups and surveys) (n=20 references), while the use of secondary data (n=11 references) or identification of existing paths for substance use

disorder recovery as proof of concept or for adoption/adaption (n=11 references) were described by others.

> *"For us, it was fairly simple to really reach out to those partners and say, 'What's going on? What are you seeing? What are the needs?' It was pretty easy for us to figure out how to move forward and what the actual needs were. For us, it was fairly simple." (Implementation Grantee)*

> *"We had a set of indicators that we looked at to monitor drug overdoses and things like that. We also talked to a lot of key players in the area about what they were experiencing and what kind of support they needed." (Planning Grantee)*

Grantee Organizations and Goals

- What types of organizations have received the grants, and what are the characteristics of their beneficiaries?
- What are the goals of grantee projects?
- What approaches are the grantees implementing to meet these goals?

The goals, approaches, and beneficiaries of grantee projects, along with the characteristics of organizations that received INSPIRE grants, were evaluated through several strategies. This section presents key findings from those strategies. These strategies include an analysis of grant portfolio data provided by ARC, an analysis of the characteristics of counties with and without INSPIRE funding, and insight from grantees gathered through the web-based survey and virtual focus groups.

In total, 50 grants were awarded during rounds 1 and 2 of the INSPIRE Initiative according to the grant portfolio data. This included 10 planning and 21 implementation grants in cohort 1 and 6 planning and 13 implementation grants in cohort 2. Varying types of organizations received these grants. The most common organization type for all grant types and cohorts was non-profit organizations with 501(c)(3) status (n=28). Local governments, including county, city or township, and special districts, were the next most common organization type (n=7), followed by institutions of higher education (n=5). Grantees provided additional information about their organizations through the survey. Among planning and implementation grantees, most organizations that received INSPIRE grants had been in existence for 10 or more years (n=41 of 49 survey responses; n=27 of 33 implementation; n=14 of 16 planning) and served multiple counties (n=22 of 49 survey responses; n=17 of 33 implementation; n=5 of 16 planning), a Local Development District (n=8 of 49 survey responses; n=6 of 33 implementation; n=2 of 16 planning), or a Congressional District (n=1 of 33 implementation). Half or more of grantees reported relying on federal (n=44 of 48 survey responses), state (n=42 of 48 survey responses), local (n=30 of 48 survey responses), and foundation (n=24 of 48 survey responses) funds. Regarding federal funds, multiple grantees (n=27 of 31 survey responses) specifically indicated that they had previously received a grant (not including the INSPIRE grant) from ARC.

As part of the application process, grantees explained how their INSPIRE projects aligned with the goals of ARC's Strategic Plans. Accordingly, grantee projects aligned with specific goals and objectives articulated in the 2016-2020[3] and 2022-2026[4] ARC Strategic Plans. Thirty grantee projects, primarily those in cohort 1, corresponded to goal 2 of the 2016-2020 ARC Strategic Plan (Exhibit 7). This "Ready Workforce" goal is to "Increase the education, knowledge, skills, and health of residents to work and succeed in Appalachia."[3] The remaining 20 grantee projects, largely from cohort 2, corresponded to goal 2 of the 2022-2026 ARC Strategic Plan (Exhibit 8). This goal to "Build Appalachia's workforce ecosystem" is described as "Expand and strengthen community systems (education, healthcare, housing, childcare, and others) that

help Appalachians obtain a job, stay on the job, and advance along a financially sustaining career pathway."[4] Within these goals, grantee projects corresponded to various objectives.

Exhibit 7. Grantee Project Objectives by 2016-2020 ARC Strategic Plan Goals			
	Cohort 1		Total
	Planning [a] (n=9)	Implementation (n=21)	N=30
Strategic Plan 2016-2020			
Objective 1: Develop and support educational programs and institutions to prepare students for postsecondary education and the workforce	0	3	3
Objective 2: Support programs that provide basic and soft-skills training to prepare workers for employment	0	8	8
Objective 3: Develop and support career-specific education and skills training for students and workers, especially in sectors that are experiencing growth locally and regionally and that provide opportunities for advancement	0	4	4
Objective 5: Improve access to affordable, high-quality health care for workers and their families	0	1	1
Objective 6: Use proven public health practices and establish sustainable clinical services to address health conditions that affect the Region's economic competitiveness	4	4	8
Objective 7: Develop and support sustainable programs that remove barriers to participating in the workforce	5	1	6

Evaluation strategy: Grant portfolio data analysis

[a] One planning grantee project from cohort 1 corresponded to objective 1 within goal 2 under ARC's 2022-2026 Strategic Plan.

Exhibit 8. Grantee Project Objectives by 2022-2026 ARC Strategic Plan Goals				
	Cohort 1	Cohort 2		Total
	Planning (n=1)	Planning (n=6)	Implementation (n=13)	N=20
Strategic Plan 2022-2026				
Objective 1: Develop and support educational programs and institutions from early childhood through post-secondary that provide the building blocks for skills development and long-term employment success	1	0	0	1
Objective 2: Invest in workforce development programs and strategies informed by industry talent needs and designed to allow workers to simultaneously earn, learn, and advance along a career pathway	0	4	4	8
Objective 3: Develop a network of employment supports to help Appalachians enter and remain in the workforce	0	2	9	11

Evaluation strategy: Grant portfolio data analysis

Beyond alignment with ARC's Strategic Plans, grantees noted the overall goals and major activities of their INSPIRE projects through the survey. Project goals as described by grantees generally clustered into 3 categories: employment goals (n=47 references); aspirational goals (n=34 references); and partnership goals (n=24 references). Employment goals, the most commonly described, reflected a desire to increase participation in the local workforce among individuals in recovery or to train businesses on best practices for employing individuals in recovery. Aspirational goals reflected broad, sweeping project goals focused on a region or community. These goals were generally more difficult to quantify or reflected a cultural change around substance use and addiction (e.g., stigma reduction). Partnership goals reflected the incorporation of existing services within a community or new coordination among multiple partners to offer expanded services within the recovery ecosystem. Similarly, major project activities as described by grantees generally clustered into 5 categories: training for program participants (n=51 references) and businesses (n=15 references); employment services (n=41 references); wraparound services (n=26 references); recovery support services (n=14 references); and transportation services (n=12 references). Overall, employment-specific goals and approaches were strongly represented in grantee descriptions of their projects.

In addition to describing major activities, survey respondents identified specific project activities based on grant type (planning or implementation) that they were using to achieve their project goals. Across grant types, multiple project activities were identified, with grantees frequently identifying more than 1 activity. Among implementation grantees, the most

commonly identified project activities focused on supporting employment opportunities for individuals in recovery (Exhibit 9). Specifically, these activities included: deliver soft skills training to individuals in recovery (n=28 of 31 survey responses); build or expand partnerships with employers (n=27 of 31 survey responses); build or expand partnerships with organizations (n=26 of 31 survey responses); and provide employment or job placement services to individuals in recovery (n=26 of 31 survey responses).

Exhibit 9. Project Activities of Implementation Grantees	
Activity	Implementation grantees (n=31)
Deliver soft skills training to individuals in recovery	28
Build or expand partnerships with employers	27
Build or expand partnerships with organizations	26
Provide employment or job placement services to individuals in recovery	26
Provide career development or readiness services to individuals in recovery	25
Provide peer recovery support services to individuals in recovery	25
Deliver basic or advanced training to individuals in recovery	23
Provide wraparound or other supportive services to individuals in recovery	23
Deliver certificate-based training programs to individuals in recovery	22
Offer new employment opportunities to individuals in recovery	21
Provide case management services to individuals in recovery	21
Prepare employers to expand job opportunities for individuals in recovery	21
Deliver training or other education to employers	19
Provide transportation services to individuals in recovery	18
Offer apprenticeships or internships to individuals in recovery	16
Promote general workplace wellness through employers	14
Provide financial literacy training to individuals in recovery	13
Provide housing or related assistance to individuals in recovery	13
Provide counseling services or other psychosocial support to individuals in recovery	12
Provide crisis services to individuals in recovery	12
Provide mental or behavioral health services (including medication-assisted treatment) to individuals in recovery	10
Provide stipends or other financial support to individuals in recovery	10
Provide nutrition assistance to individuals in recovery	8
Provide legal services to individuals in recovery	8
Provide childcare services to individuals in recovery	7
Provide healthcare services to individuals in recovery	7
Deliver legal or other support services to employers	6
Other activity(ies)	0

Evaluation strategy: Web-based survey of grantees

Among planning grantees, the most commonly identified project activities focused on connections with other organizations and employers (Exhibit 10). These activities included: establish partnerships with other organizations or employers (n=14 of 16 survey responses); facilitate communication among organizations and/or employers (n=11 of 16 survey responses); foster commitments from employers to offer opportunities to individuals in recovery (n=11 of 16 survey responses); and develop training or other education for employers (n=10 of 16 survey responses).

Exhibit 10. Project Activities of Planning Grantees	
Activity	Planning grantees (n=16)
Establish partnerships with other organizations or employers	14
Facilitate communication among organizations and/or employers	11
Foster commitments from employers to offer opportunities to individuals in recovery	11
Develop training or other education for employers	10
Convene a workgroup or coalition	9
Develop employment readiness planning	9
Conduct an assessment of the needs of employers/workforce	9
Foster commitments from organizations that serve individuals in recovery	9
Establish a network of organizational and/or employer partners	8
Conduct an assessment of the needs of individuals in recovery	7
Conduct an assessment of services or resources available to support individuals in recovery	7
Develop a strategic plan	5
Develop workplace policies that are supportive of individuals in recovery	5
Develop or deliver a marketing or awareness campaign	4
Explore evidence-based or promising practices for individuals in recovery and/or employers	4
Other activity(ies)	2

Evaluation strategy: Web-based survey of grantees

Grantees reported serving a variety of populations through their projects, and many grantees identified more than 1 population. Among planning and implementation grantees, the most commonly identified populations of focus included: individuals with substance use disorders or addiction (n=37 of 47 survey responses; n=24 of 31 implementation; n=13 of 16 planning); general adult population (n=23 of 47 survey responses; n=13 of 31 implementation; n=11 of 16 planning); individuals who have been incarcerated (n=22 of 47 survey responses; n=12 of 31 implementation; n=10 of 16 planning); and individuals employed in organizations serving or engaging with people with substance use disorders (n=18 of 47 survey responses; n=10 of 31 implementation; n=8 of 16 planning). A variety of other populations of focus were identified by smaller numbers of grantees including, but not limited to families, veterans, individuals with

disabilities, individuals who are unemployed, individuals who are court involved, and individuals or families that are experiencing homelessness.

In total, grantees focused on 197 counties across all 13 Appalachian states, representing nearly 47% of counties in the Appalachian Region (Exhibit 11). Approximately half or more of counties within the Northern and Southern Appalachian subregions were reached by at least 1 grantee, while less than half of counties in the Central, North Central, and South Central Appalachian subregions were supported by grantees. The characteristics of these counties provided additional insight into the potential beneficiaries and communities served through grantee projects (Appendix C). Most counties with INSPIRE funding were classified as transitional, at-risk, or distressed on ARC's levels of economic distress.[2] As compared to counties without INSPIRE funding, counties with INSPIRE funding had higher unemployment rates, lower median household income, lower net migration rates, and higher overdose-related mortality rates. There were also significant differences across the categories of primary industry dependency, Appalachian subregion, and levels of rurality of counties with INSPIRE funding as compared to those without funding. Bivariate analyses showed differences across categories rather than direct comparisons of individual levels, but in general counties with INSPIRE funding tended to be more likely to have mining as a primary industry and less likely to have farming or federal/state government as a primary industry. A lower proportion of counties with INSPIRE funding were located in the Central and South Central Appalachian subregions, with a greater proportion in the Northern subregion. Additionally, a greater proportion of counties with INSPIRE funding were located in rural categories 5 (rural) and 3 (nonmetro, adjacent to a large metro area), but a lower proportion in category 4 (nonmetro, adjacent to a small metro area). There were not significant differences in other measures of poverty, persistent poverty, uninsurance status, internet access, disability, measures of access to substance use services, or the Recovery Ecosystem Index.[10] However, identifying counties that may have high need for strengthened recovery ecosystems could be useful for outreach efforts. According to the Recovery Ecosystem Index,[10] a total of 36 counties without INSPIRE funding were identified as having "weak" substance use disorder recovery ecosystems (scores of 4 or 5 out of 5). This included 12 counties in the Southern Appalachian subregion, 10 in Central, 8 in South Central, 4 in Northern, and 2 in North Central. These counties were located in Alabama (n=8), Virginia (n=7), Kentucky (n=6), Tennessee (n=5), Pennsylvania (n=3), Georgia (n=2), South Carolina (n=2), West Virginia (n=2), and Ohio (n=1).

Exhibit 11. Funding Status of Counties in the Appalachian Region for Cohorts 1 and 2
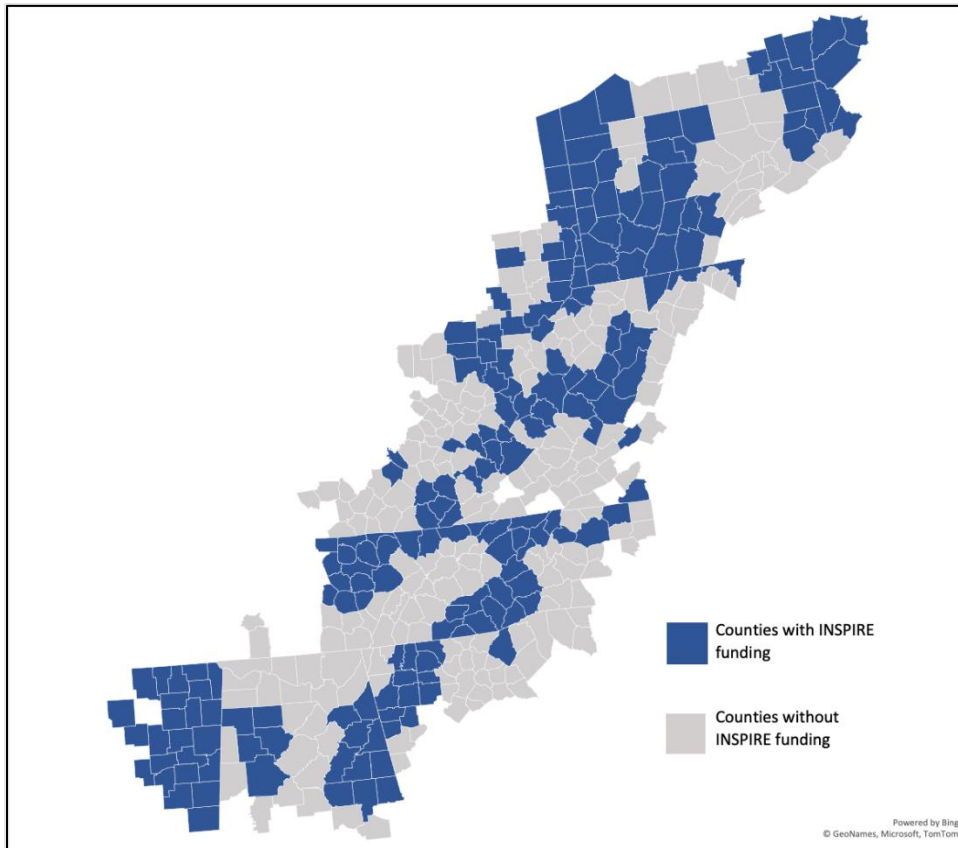
Evaluation strategy: Grant portfolio data analysis

Partnerships

- How have grantees incorporated partnerships into the design and implementation of their projects?
- How have grantees engaged business partners as potential employers in supporting individuals with SUD entering or re-entering the workforce?
- To what extent are business/employer partners modifying their policies to support the SUD population with maintaining employment?
- What successes and challenges related to partnerships have grantees experienced?

Partnerships incorporated in grantee projects were evaluated through the web-based survey and virtual focus groups. This section presents key findings from those strategies.

Grantees have incorporated a diverse array of partners into the design and implementation of their INSPIRE projects. At the time of the survey, grantees (n=46 of 49 survey responses) reported currently partnering with a median of 4 organizations. While multiple organization types were identified (Exhibit 12), the 3 most commonly identified organizations with which grantees were partnering included: 501(c)(3) nonprofits (other than institutions of higher education) (n=39 of 48 survey responses); county governments (n=24 of 48 survey responses); and small businesses (n=24 of 48 survey responses). Approximately half of grantees (n=24 of 46 survey responses) reported that all or most partnerships were established before the launch of their INSPIRE project, with relatively few grantees reporting that all or most partnerships were established at or after project launch.

Exhibit 12. Types of Partner Organizations	
Type	Total (n=48)
501(c)(3) nonprofit organization (other than institution of higher education)	39
County government	24
Small business	24
Regional organization	22
Public/State controlled institute of higher education	18
For-profit organization (other than small business)	18
Nonprofit organization without 501(c)(3) status	16
City/town government	14
Other type(s)	7
Special district government	2
Independent school district	2
Public Indian Housing Authority	1

Evaluation strategy: Web-based survey of grantees

Grantees elaborated on the mechanisms by which they have incorporated partnerships into their projects through both the survey and focus groups. At the time of the survey, grantees

identified multiple motives for partnering with other organizations, with the most common being to leverage additional resources (n=34 of 47 survey responses), increase project impact (n=34 of 47 survey responses), and increase project reach (n=32 of 47 survey responses). Additionally, they reported multiple areas of collaboration with organizational partners. The 3 most commonly identified areas included: project implementation or service delivery (n=40 of 46 survey responses), followed by project planning or design (n=31 of 46 survey responses) and project data collection and reporting (n=25 of 46 survey responses). These areas were expanded on during focus groups, highlighting differences in the functions of partnerships by grant type. Planning grantees generally described bringing partners together for purposes of conducting needs assessments, forming collaborations, and developing plans for implementation. Additionally, implementation grantees generally described bringing partners together that could support program or service delivery. They reported engaging partners that not only supported referrals of individual participants or businesses to a program, but also advanced a program component that ultimately supported the entry of individuals into the workforce. Overall, grantees described great variation in the partnerships that have been incorporated into their projects. Many grantees likewise took pride in the diversity of their partnerships and creativity of their collaborations.

> *"We are collaborating with, first up, there's a local recovery expert who provides a lot of training. . . . From there, we also built in, there were a couple regional resource providers . . . that had a strong and long-term relationship with people and agencies . . . and a good lay of the land of how things worked out there. There were some smaller providers, some folks that were trying to come together to set up recovery houses and resource centers and things like that. We were able to pull everyone together along with some peer recovery coaches, people who were in recovery themselves who could provide first-hand information about what they experienced and a couple of local employers who had experience in employing people in recovery who could talk about their perspective and what kind of skills they thought people needed to learn. It was a broad spectrum of people and organizations that we pulled in." (Implementation Grantee)*

Within the broader context of partnerships, grantees described their engagement of business and employer partners in particular as part of their INSPIRE projects. At the time of the survey, most grantees (n=42 of 46 survey responses) had engaged these partners, with the remaining grantees planning to engage them prior to closure of their grants. Grantees identified multiple mechanisms by which they have engaged business/employer partners in order to support individuals with substance use disorder in becoming part of the workforce (Exhibit 13). The 3 most commonly identified mechanisms included: delivered training or other education to employers (n=27 of 46 survey responses; n=20 of 31 implementation; n=7 of 15 planning); established a network of employers that hire individuals in recovery (n=26 of 46 survey responses; n=20 of 31 implementation; n=6 of 15 planning); and created partnerships with in-demand industry sectors (n=23 of 46 survey responses; n=17 of 31 implementation; n=6 of 15 planning). Specific to workplace policies, more than half of grantees (n=29 of 47 survey responses) reported that they had partnered or planned to partner with businesses/employer

partners to modify their policies to support individuals with substance use disorder in staying employed. Among the smaller number of grantees that had engaged these partners in this capacity at the time of the survey (n=9 of 47 survey responses), types of policy changes reported included changes in criminal history hire policy, changes in attendance/sick policy, changes in drug test to hire policy, and changes in drug testing policy.

Exhibit 13. Mechanisms for Engaging Business/Employer Partners			
Mechanism	Planning (n=15)	Implementation (n=31)	Total (n=46)
Delivered training or other education to employers	7	20	27
Established a network of employers that hire individuals in recovery	6	20	26
Created partnerships with in-demand industry sectors	6	17	23
Established or engaged second chance employers	6	12	18
Shared strategies to create workplaces supportive of individuals in recovery	4	14	18
Promoted general workplace wellness through employers	2	13	15
Developed or implemented employer-based program models	2	7	9
Placed graduates of vocational or other training program into employment	2	7	9
Provided services to employers in exchange for programmatic support	1	4	5
Delivered legal or other support services to employers	2	2	4
My organization has not engaged business/employer partners, but plans to engage them before INSPIRE grant closure.	3	1	4
Other approach(es)	2	2	4

Evaluation strategy: Web-based survey of grantees

Grantees experienced both challenges and successes when engaging partners as part of their INSPIRE projects. They shared these experiences through the survey and focus groups. These qualitative data were analyzed in combination to generate a more comprehensive understanding of their experiences. Overall, grantees identified multiple challenges and successes. In some cases, a partnership-related process or outcome was conveyed as both a success and a challenge across grantees. While multiple challenges and successes were noted, they generally corresponded to 4 key areas. Areas of success focused on establishing and expanding a partner network (n=79 references), partner alignment with project goals (n=54 references), and partnerships with businesses or employers (n=23 references). The primary challenge, or barrier to success, was stigma associated with substance use disorder and its impact on community support, partner alignment with project goals, and sustainability (n=49

references). Given the reported impacts of stigma both within and beyond partnerships, stigma is described in the section on challenges and costs.

Establishing and Expanding Networks

Grantees brought varying levels and types of experience to the establishment or expansion of partnership networks. Despite variation, grantees often described success with growing their networks. Grantees reported feeling welcomed, having partners share that their efforts were long overdue, and receiving robust organizational and community support as they established new networks. Conversely, some grantees described a history of network engagement from which they were expanding. These grantees often included recovery-oriented organizations that were expanding into employment, employment organizations that were expanding into recovery, healthcare organizations that were expanding into both employment and recovery, or established partnerships that were expanding their service base to specific populations, such as women, individuals who had a history of incarceration, or veterans.

> *"We were aware of each other, but primarily functioning in different counties. This provided a really good opportunity to connect ourselves more closely with a county that we're entering with a bigger footprint as we speak. That was really an interesting opportunity to expand what we understood to be as partnerships. We absolutely could not do this without the engagement of all the people that gave us letters." (Implementation Grantee)*

> *"The focus of this grant was to hire a consultant, which we did, to meet with the various organizations that we already had relationships with to find out what they were doing, what they might want to do, then meet with people who were in active addiction, in recovery, in that continuum to see what was lacking in our area." (Planning Grantee)*

Partner Alignment

Grantees emphasized the importance of strong partnerships to achieving the goals of their projects. They indicated that having the right partners who were committed to the same cause improved the experience and outcomes for all involved. Regarding the right partners, many grantees further noted that nontraditional or new partners were integral to their projects. Overall, grantees described success not only in identifying and engaging the partners necessary for their projects, but also achieving a collective vision for the goals of their projects.

> *"Joining different organizations' initiatives, if there's a barrier you come up with, someone in that group will tell you which way to go to get that problem solved for the client." (Implementation Grantee)*

> *"I have to give a whole lot of credit to my colleague who is the person who is responsible for actually pulling together the advisory group that we have and doing all the trainings because it really says a lot about her personal relationships with them and her being one of them, somebody who lives and works out there in the field with them to actually be able to pull it all together." (Planning Grantee)*

Business or Employer Partners

Many grantees described prior experience working with nonprofit organizations, healthcare organizations, recovery-oriented organizations, and local government. Partnerships with businesses or employers, however, were often new for grantees and generated varying levels of success. Grantees indicated that widespread staffing challenges motivated some employers to partner as they were desperate to hire and willing to consider individuals in recovery, a population which they had not previously considered. Moreover, employers were reportedly more open to hiring an individual in recovery once their workplace had received training on substance use disorder recovery and/or when a prospective employee was receiving support. Despite increased consideration among some employers, grantees faced persistent challenges stemming from stigma and hiring policies.

> *"We are a resource and a hub to connect employers to the resources to become recovery friendly workplaces so that they can advertise that they are so it's easy for a person in the job market to go out and say, 'This is a company where they'll understand my background. I don't have to come in shamefully and try to hide things.'" (Implementation Grantee)*

While several grantees identified the policies of business or employer partners as barriers to success, they described that some partners were willing to make exceptions to a hiring rule. In these instances, a partner would allow an individual in recovery with a prior conviction to be hired as long as they received support from an INSPIRE-funded program. Grantees suggested that this success tended to result in additional successes. They noted that this could not only lead to changes in organizational policy within business or employer partners, but also state policies that may limit employment opportunities for individuals in recovery.

> *"Our biggest struggle is our employer partners, getting them to understand, especially . . . out in our more rural areas, about trying to get the stigma around hiring someone who is in recovery. There's just a stigma that comes with that and trying to help that. These employer partners have been partners for years but now we're asking them to do something different, something is a little outside their comfort zone, trying to help them understand." (Implementation Grantee)*

Grant Performance and Successes

- What specific outputs and outcomes were grantee projects designed to achieve?
- What are the current outputs and outcomes for the grants?
- What are early successes of INSPIRE grants, and what factors have contributed to these successes?
- Which referral pathways have grantees found to be most successful in supporting people recovering from SUD to engage or reengage in the workforce?

The outputs, outcomes, and successes of grantee projects were evaluated through an analysis of grant portfolio data provided by ARC, the web-based survey, and virtual focus groups. This section presents key findings from those strategies.

ARC has established performance measures, including outputs and outcomes, for funded projects.[5] Grantees worked with their ARC project coordinators to finalize the ARC performance measure(s) for their INSPIRE projects, including required performance measures and optional performance measures. Outputs were generally defined by the number of businesses, workers/trainees, students, etc. *served*, while outcomes were generally defined by the number of businesses, workers/trainees, students, etc. experiencing *improvements*. For the INSPIRE Initiative, planning grantees were at a minimum expected to report on plans/reports developed (output). Implementation grantees were at a minimum expected to report on businesses served (output) and experiencing improvements (outcome) and either workers/trainees served (output) and experiencing improvements (outcome) or students served (output) and experiencing improvements (outcome). Projected output and outcome performance measures for all grantee projects were included in the grant portfolio data. Achieved output and outcome performance measures were collected through the survey for grantee projects that were open at the time of the survey (November-December 2022), while achieved output and outcome performance measures were extracted from the grant portfolio data for projects that were closed at the time of the survey.

Grantee projects were designed to achieve a variety of output and outcome performance measures as defined by ARC (Exhibit 14).[5] These ARC performance measures reflected a range of beneficiaries, such as businesses, communities, organizations, participants, students, and workers or trainees. Across grant types, projected outputs with the greatest reach included serving: 3,261 businesses; 33 communities; 57 organizations; 235 participants; 835 patients; 640 students; and 4,586 workers/trainees. Associated projected outcomes included realizing improvements for: 726 businesses; 31 communities; 27 organizations; 768 participants; 60 patients; 461 students; and 2,786 workers/trainees.

Exhibit 14. Projected ARC Performance Measures by Grant Type for Grantee Projects

Outputs/Outcomes	Planning (n=16)	Implementation (n=34)	Total (n=50)
Businesses created (outcome)	0	8	8
Businesses improved (outcome)	24	702	726
Businesses served (output)	186	3,075	3,261
Communities improved (outcome)	21	10	31
Communities served (output)	21	12	33
Housing units construction/rehab	0	1	1
Jobs created (outcome)	0	25	25
Organizations improved (outcome)	7	20	27
Organizations served (output)	7	50	57
Participants improved (outcome)	0	768	768
Participants served (output)	0	835	835
Patients improved (outcome)	0	60	60
Patients served (output)	0	235	235
Plans/reports developed (output)	19	5	24
Programs implemented (outcome)	0	4	4
Students improved (outcome)	0	461	461
Students served (output)	0	640	640
Workers/trainees improved (outcome)	0	2,786	2,786
Workers/trainees served (output)	0	4,586	4,586

Evaluation strategy: Grant portfolio data analysis

Grantees with closed projects and open projects at the time of the survey had addressed multiple output and outcome performance measures as defined by ARC (Exhibit 15).[5] Achieved outputs included serving: 525 businesses; 31 communities; 85 organizations; 639 participants; 0 patients; 261 students; and 1,542 workers/trainees. Associated achieved outcomes included realizing improvements for: 384 businesses; 25 communities; 85 organizations; 442 participants; 0 patients; 112 students; and 1,081 workers/trainees. Notably, when considering early grant impacts, the point at which grantees were in the trajectory of their performance period was taken into account. A total of 5 grantee projects were closed according to ARC at the time of the survey. As noted in the evaluation methods (Appendix A), these grantees were not asked to report on achieved ARC performance measures because they had already done so at the close of their grant. As such, their final achieved ARC performance measures were extracted from their grant closeout summaries. Overall, the mean number of months for the performance period for planning grants was 14.4, with a median of 13 months. The mean number of months for implementation grants was slightly longer at 15.8 months, with a median of 19 months. These calculations were based on the effective date for grants included in the grant portfolio data.

Exhibit 15. Achieved ARC Performance Measures by Grant Type for Grantee Projects

Outputs/Outcomes	Planning Achieved To Date	Implementation Achieved To Date	Total Achieved To Date	Total Projected	Percent of Projected Achieved [a]
Businesses created	0	0	0	8	0.0%
Businesses improved	0	384	384	726	52.9%
Businesses served	0	525	525	3,261	16.1%
Communities improved [b]	18	7	25	31	80.6%
Communities served [b]	23	8	31	33	93.9%
Housing units constructed or rehabilitated	0	0	0	1	0.0%
Jobs created	0	90	90	25	360.0%
Organizations improved [b]	10	75	85	27	314.8%
Organizations served [b]	10	75	85	57	149.1%
Participants improved	0	442	442	60	736.7%
Participants served	0	639	639	235	271.9%
Patients improved	0	0	0	768	0.0%
Patients served	0	0	0	835	0.0%
Plans/reports developed [b]	15	6	21	24	87.5%
Programs implemented	0	3	3	4	75.0%
Students improved	0	112	112	461	24.3%
Students served	0	261	261	640	40.8%
Workers/trainees improved	0	1,081	1,081	2,786	38.8%
Workers/trainees served	0	1,542	1,542	4,586	33.6%

Evaluation strategies: Grant portfolio data analysis and web-based survey of grantees

[a] Only grantees with open projects at the time of the survey were asked to report on achieved ARC performance measures. Final achieved performance measures for 5 planning grantees that had closed projects at the time of the survey were extracted from their grant closeout summaries available through ARC.

[b] Indicates an ARC performance measure for which at least one grantee with a closed project reported achieved counts through their grant closeout summaries.

For purposes of estimating progress on projected impacts, Exhibit 15 also presents the total number for projected ARC performance measures as well as the percentage of projected performance measures achieved by grantees with closed and open projects at the time of the survey (November-December 2022). Of the 19 ARC performance measures identified for grantee projects, 4 outputs and outcomes had 0% achieved at the time of the survey and 10 outputs and outcomes had some, but not the projected total. For 5 outputs and outcomes, grantee projects surpassed the projected total. Of note, grantees may have not reported on each of their projected performance measures through the survey or may have had a count of "0" to report at the time of the survey. The number of grantees with any performance measures that were projected and reported on can be found in Exhibit 16.

Exhibit 16. Number of Grantees with Projected ARC Performance Measures and Reported on ARC Performance Measures

Outputs/Outcomes	Planning (n=16)		Implementation (n=34)		Total (n=50)	
	Grantees with any Projected	Grantees with any Reported on	Grantees with any Projected	Grantees with any Reported on	Grantees with any Projected	Grantees with any Reported on
Businesses created	0	0	2	0	2	0
Businesses improved	2	0	30	23	32	23
Businesses served	2	0	30	24	32	24
Communities improved	4	4	2	2	6	6
Communities served	4	4	2	2	6	6
Housing units construction/rehab	0	0	1	0	1	0
Jobs created	0	0	4	4	4	4
Organizations improved	1	1	1	1	2	2
Organizations served	1	1	1	1	2	2
Participants improved	0	0	9	8	9	8
Participants served	0	0	9	8	9	8
Patients improved	0	0	1	0	1	0
Patients served	0	0	1	0	1	0
Plans/reports developed	14	11	3	2	17	13
Programs implemented	0	0	2	1	2	1
Students improved	0	0	8	6	8	6
Students served	0	0	8	7	8	7
Workers/trainees improved	0	0	29	23	29	23
Workers/trainees served	0	0	29	24	29	24

Evaluation strategies: Grant portfolio data analysis and web-based survey of grantees

Grantees experienced early successes that expanded beyond the achievement of performance measures. They shared successes, and the factors that they felt contributed to them, through the survey and focus groups. These qualitative data were analyzed in combination to generate a comprehensive understanding of early successes. Three major areas of success were identified: establishing and expanding a partner network (n=79 references); securing community and organizational support (n=19 references); and providing comprehensive services (n=31 references). These areas of success are described below, with the exception of establishing and

expanding a partner network. Given the focus on partners, partner networks are described in the section on partnerships.

Organizational and Community Support

Nearly all grantees identified support from either within their organization or the communities that they served as integral to achieving project goals. They likewise highlighted successes in garnering this support, both among new and established partners. As organizations weathered challenges associated with the COVID-19 pandemic and staffing, support from within their organizations to redesign grant management systems, reallocate staff, or access new sources of matching funds were essential to success. Additionally, community support was considered critical. Grantees relied on deep relationships with supportive organizations that they had cultivated over decades to help achieve project goals. At the same time, they identified sources of community support that had not been previously utilized, such as local government officials and local businesses. Grantees shared that they often found stigma to be lower than expected, and that the community and businesses were ready to be active partners. These previously untapped supports became a significant resource for grantees.

> *"One success that we've seen is the community has woken, if you will, to what we're trying to do in that space. We have more community involvement and buy-in with regards to families of those folks . . . who are incarcerated. We've got more buy-in now with community, as far as employers who are willing to take those individuals into those workspaces, as part of our . . . program." (Implementation Grantee)*

> *"I think when we went in we thought it would just be focusing on these folks that are the employers, but what has come out of this in a positive light is the having conversations with civic groups and other folks that are the voters and the decision makers and everything in our town, in our county. Hearing their conversations afterward and . . . having this momentum of conversation out there of with this is the right thing to do. I think it's a pretty easy sell too, from a social work side I think it's, 'This is giving folks an opportunity, a chance.'" (Implementation Grantee)*

Comprehensive Services

Grantees repeatedly indicated that they could not achieve their project goals without providing comprehensive services for individuals in recovery. Accordingly, they elaborated on their efforts to ensure successful delivery of these services. Transportation, health care, mental health care, recovery support, food and clothing, housing, and childcare were all described as essential wraparound services that supported individuals in recovery in entering or returning to the workforce. When these services were available, accessible, and affordable, grantees reported that their participants had a higher chance of success. When they were not, grantees struggled to retain participants and achieve their employment goals. Grantees forged new partnerships, leveraged community support, and became creative when developing strategies to provide

comprehensive services. For example, a grantee reported hiring their own participants to drive agency cars in order to provide transportation that would enable participants to work.

> *"A success for us is training. It's been very rewarding to see the amount of individuals who are in recovery, who are looking for new careers, new training opportunities, enrolling into the community colleges. That's been very rewarding for the career advisors, my staff, and me, to see their interest in long-term goals that they have for themselves." (Implementation Grantee)*

> *"The number of referrals that we're getting from our agency partners is more than we expected, over the 100 mark I mentioned, and about 30 of them are receiving support services including training dollars, we have about 10 who are in school right now upskilling themselves to become nurses, medical assistants, truck drivers, welders, to name a few. That's huge and also just the individual ability to provide clothing, boots, equipment for individuals who might not otherwise be able to get those things to get to work. Mileage is huge, transportation is huge." (Implementation Grantee)*

In addition to general areas of success, implementation grantees in focus groups specifically described referral sources for their INSPIRE-funded programs (n=22 references) that they have found to be successful. Successful referral pathways reflected not only traditional partners, but also innovative collaborations. Recovery-oriented organizations, workforce boards, law enforcement, jails, probation/parole, drug court programs, employers, and local government were among the partners described. Many grantees engaged Certified Recovery Specialists or Peer Recovery Specialists (CRS/PRS), either by hiring them into their workforce programs or by working with individuals in recovery to successfully complete their training as CRS/PRS. One challenge, however, that multiple grantees encountered reflected the philosophical differences among potential referral pathways. For example, an organization that did not employ harm reduction strategies hesitated to partner with an organization that did, while a 12-step program was less likely to engage partners that provided Medication-Assisted Treatment (MAT). In order to best develop, use, and expand referral pathways, grantees identified several areas for improvement and noted their intention to adapt their strategies to improve success in the future.

> *"Some of the providers that we have, or some of our folks that may have been with us on our consortium that provided other avenues of recovery, be it the 12-step or all-or-nothing type idea behind that, are having more difficulty working with us now that this recovery peer support piece is front and center. What we've noticed is we've had to go back in and have some more conversations because they're less likely to— They're wanting this one pathway to recovery and so therefore they have been limiting some of our referrals because of that and so we're having to have some of those— I understand that they would do their own thing and we have to go back there and massage some of those things." (Implementation Grantee)*

Challenges and Costs

- What challenges have grantees faced and how have they addressed them?
- What types of unanticipated costs have grantees encountered in implementing their INSPIRE grants?
- What impacts has the pandemic had on INSPIRE grantees' ability to serve their communities/beneficiaries?

Grantee challenges and unanticipated costs were evaluated through the web-based survey and virtual focus groups. This section presents key findings from those strategies.

Grantees commonly reported that they had faced challenges when implementing their INSPIRE projects, with a relatively small number (n=8 of 47 survey responses) indicating that they had not faced any challenges at the time of the survey. While multiple challenges were identified across grantees, the 2 most commonly reported challenges included difficulty hiring, training, or retaining staff (n=20 of 47 survey responses) and stigma associated with substance use disorder or its treatment (n=16 of 47 survey responses). Grantees reported employing various strategies in an attempt to address challenges that they encountered (Exhibit 17). The 3 most commonly reported strategies included: identified or engaged new organizational or business partners (n=20 of 38 survey responses); expanded community outreach efforts (n=19 of 38 survey responses); and expanded partner recruitment and/or retention efforts (n=17 of 38 survey responses). In contrast to challenges, a total of 25 grantees reported that they had not encountered any unanticipated costs at the time of the survey. Among grantees reporting costs, multiple types of unanticipated costs were identified. The 3 most commonly identified types included: staffing (n=10 of 46 survey responses; n=9 of 30 implementation; n=1 of 16 planning); participant recruitment or retention (n=7 of 46 survey responses; n=7 of 30 implementation; n=0 of 16 planning); and communications or marketing (n=7 of 46 survey responses; n=7 of 30 implementation; n=0 of 16 planning).

Exhibit 17. Strategies to Address Challenges to Grant Implementation	
Mechanism	Total (n=38)
Identified or engaged new organizational/business partners	20
Expanded community outreach efforts	19
Expanded partner recruitment and/or retention efforts	17
Hired new project staff	12
Delivered training or education to project staff	11
Developed strategies to improve organizational communication or coordination	11
Expanded participant recruitment and/or retention efforts	11
Changed project timelines	9
Obtained additional financial resources	7
Changed project budget	6
Delivered training or education to organizational leadership or management	5
Changed project goals and/or activities	4
Changed, or tried to change, organizational policy	3
Obtained additional infrastructure (e.g., space or equipment)	3
Changed, or tried to change, local, state, or federal policy	3
My organization has not attempted to address the challenge(s) to date.	2
Other approach(es)	1

Evaluation strategy: Web-based survey of grantees

In addition to overall challenges and unanticipated costs, grantees reflected on specific impacts of the COVID-19 pandemic. In responses to the survey, they identified multiple ways in which the pandemic impacted their ability to serve their communities or beneficiaries. Although some grantees reported no impact (n=15 of 47 survey responses), the 3 most commonly identified impacts included: modification of in-person services/events/activities (n=16 of 47 survey responses; n=13 of 31 implementation; n=3 of 16 planning); greater focus on virtual services/events/activities (n=15 of 47 survey responses; n=8 of 31 implementation; n=7 of 16 planning); and difficulty recruiting, engaging, or retaining participants (n=14 of 47 survey responses; n=10 of 31 implementation; n=4 of 16 planning). Similarly, grantees identified other aspects of their projects that had been impacted by the pandemic. The 3 most commonly reported aspects included: project timelines (n=18 of 47 survey responses); projected outputs and/or outcomes (n=11 of 47 survey responses); and planned project activities (n=9 of 47 survey responses). Notably, a total of 22 grantees reported that no other aspects of their projects had been impacted by the pandemic.

Through the survey and focus groups, grantees expanded on challenges that they had experienced. These qualitative data were analyzed in combination to generate a comprehensive understanding of grantee challenges. Six major types of challenges were identified: stigma (n=64 references); staffing (n=32 references); partnerships (n=29 references); COVID-19 pandemic (n=21 references); external policies (n=19 references), and ARCnet (n=6

references). Each of these challenges is described below, with the exception of partnerships. Partnerships as a challenge is described in the section on partnerships.

Stigma

Stigma associated with substance use disorder was a powerful theme among grantees. It was often cited as the root of the challenges that they experienced and impacted their achievement of project goals. Grantees described business partners with whom it was difficult to partner, communities that were hesitant to offer support, and policies that limited the scope of project success. Participants in their programs also reportedly experienced stigma when attempting to apply for jobs or secure housing with a criminal conviction related to substance use. When their participants experienced stigma, grantees indicated that such experiences often validated the importance of their work in developing a recovery ecosystem. Overcoming stigma or making progress in alleviating its effects were likewise often reported as the greatest examples of success. Grantees relied on their partnerships with businesses to encourage them to hire individuals in recovery. Additionally, workforce shortages often made employers more open to hiring individuals in recovery, which was highlighted as an unanticipated positive outcome of recent workforce shortages. Grantees similarly relied on their partnerships with recovery-oriented organizations to provide peer support to individuals in recovery, which in turn enabled their partnerships with businesses to succeed. More broadly, grantees described efforts to educate communities about being recovery-friendly, with an aim of increasing the likelihood that individuals could maintain long-term recovery.

> *"I think what's important to note, what I've heard also from partners that went through the first round, was that this is really about changing culture for a lot of us. A one-and-done isn't enough. My solution to that was, everyone that I worked with, I said, 'I want you all now to apply for an INSPIRE grant to address those barriers.' Really, because so much of this has been changing stigma for us and language— Seriously, I could go through almost the same grant now. We trained, we built capacity. We could go through a very similar grant in the next three years and we would still be able to reach additional performance measures. As we are just launching this, really, right? This is the first go-around. There is so much work to be done." (Implementation Grantee)*

> *"Stigma is . . . still pretty prevalent . . . I wouldn't say we run into active resistance, more reticence and a wariness about when we come into a new community. We were able to overcome that, I think, fairly effectively, just by being completely open and honest and going before town councils before we even came into town and not trying to ram something down anybody's throats. We ended up being very well received and even the people who historically would have been a hard no, at least weren't a no, they were just, 'Maybe.' I'll take a maybe any day." (Implementation Grantee)*

Staffing

Grantees described challenges with recruiting and retaining qualified staff. They indicated that these challenges have resulted in long staff vacancies, rapid staff turnover, and increased

workload for remaining staff that may not have been assigned to an INSPIRE project. Some grantees attributed these challenges to the COVID-19 pandemic, while others noted a combination of causes. Grantees have responded by hiring less qualified staff and training them, retraining existing staff, and reducing services. Some grantees also increased salaries in order to recruit or retain staff, which was an unanticipated cost.

> *"For us . . . it has been staffing. We live in an area where there's a huge medical system, two medical systems, and a hiring bonus of anywhere from $5,000 to $15,000 plastered on signs right next to our building, things like that. Things there's no way we can compete with. We had some staff that left careers and went to different careers because of hiring bonuses and things that were being offered in transportation versus being a therapist . . . The medical systems are so strong in our community and can pay so much. We just can't compete." (Implementation Grantee)*

> *"That was a big issue for us when we first started the ARC grant. We had a goal to hire within 60 to 90 days and we set up lots of interviews and I had commented at that time, I couldn't believe that people would actually just not show up. Accept an interview and then not show up. That happened. We had four or five interviews scheduled and ended up interviewing one person and then that person turned the job down. We had to start over again. That set us back in our goals. . . . I think that it has a lot to do with being able to hire in the needs that we had for peer recovery support specialists. . . . You could feel the pressure, I think." (Implementation Grantee)*

External Policies

Grantees identified several policies outside of their organizations that impacted their ability to achieve project goals. These included policies of employers with whom they hoped to work, policies of insurance companies used by employers, and state or local laws.

> *"There is this thing called C-Screen which employers actually use to rank themselves in terms of client safety or whatever. It has on there things about not employing people in recovery, not employing people with a history. . . . We're finding that the stigma is so systematized and so internalized by individuals in a way that it's not necessarily for people recovering from, I don't know, a broken leg. The word recovery, people assume it's people who are recovering from something that they really do internally feel is just a failure of will. We don't want those people. We realized, there's nowhere to refer them to if people aren't opening their hiring practices and in fact utilizing tools that shut down their hiring practices to people with these histories." (Implementation Grantee)*

> *"These employers, as long as they can pass the criminal part for the insurance things, they're in dire demand and pay a higher rate because they're willing to work. . . . 'You have a group of people that is trained, that has been through your program, that is graduating or graduated that is ready to go to work. They'll be there on time, they're going to go to work, they're not going to call in absent, and they're going to do their jobs because they deserve a second chance.' . . . They can go to work for some large corporation that does not have policies in place because it's not the corporation's fault, it's the insurance company's fault. How can we lessen that rope on that*

to get these people that second chance they are in need of and they deserve?" (Implementation Grantee)

COVID-19 Pandemic

Grantees reported a range of challenges associated with the COVID-19 pandemic, such as personal infection resulting in lost work, workforce impacts on staff recruitment and retention, and moving to virtual operations. The impact of the pandemic on staffing was particularly significant. When they needed to move to virtual operations, some grantees noted that they actually secured more participation from partners due to virtual meetings or saving on travel costs. Some grantees, however, reported that they will have difficulty meeting their required matching funds because they were anticipating in-kind meeting expenses, time, and travel as part of their match requirement.

> *"I think also in line with COVID, and I don't know if we can blame COVID or not but COVID gets blamed for everything. When we did our in-kind match, we were really hoping for more face-to-face meetings because that's where in-kind— You can document that mileage and that travel back and forth. People really don't want face-to-face meetings. For our advisory committee, we have an active advisory committee that gives us feedback and suggestions on how we're doing things, so that's a challenge to document that in-kind. We're doing pretty good but we have a long way to go by the end to show that match." (Implementation Grantee)*

> *"COVID. That was a big challenge, clearly, for, I'm sure, everybody, but part of my early heavy lifting had to do with renovations and stuff like that and cost of materials going really high and budgetary constraints and having to rethink some things, not to mention just the standard operational interruptions that COVID can provide. Honestly, I've had to wait on some of our other funding partners to pick up the pace a little bit because I've partnered a lot of this with ARC INSPIRE but I also have some [source] funding that supplements it. INSPIRE has been Johnny-on-the-spot. I'm still waiting a little bit on some of the [source] to catch up to them." (Implementation Grantee)*

ARCnet

Grantees experienced challenges working with ARC's current system for grant reporting— ARCnet. These challenges were described in various contexts, such as application processes, reporting on outcomes and outputs, and barriers in general. Overall, the challenges largely centered on the limited functionality of ARCnet. Despite these challenges, grantees also appreciated the support provided by ARC for reporting and noted strong collaboration between ARC and grantees.

> *Implementation Grantee: "At some point I'd like to complain about ARCnet. (Laughs.)"*

> *Implementation Grantee: "Amen, amen, amen. (Laughter.) It froze up on me . . ."*

> *Implementation Grantee: "Let me unmute to say, 'Yes. Agreed.' (Laughter.) Oh my gosh."*

Data Collection and Reporting

- What data are they collecting? What data collection tools are they using?
- Other than outputs and outcomes identified for the project, are there other outputs and outcomes that the grantee feels would be important to capture?
- What capacity do grantees have to collect and report on outputs and outcomes up to three years after grant close?

Grantee data and data collection tools, measures, and capacity for data collection and reporting were evaluated through the web-based survey and virtual focus groups. This section presents key findings from those strategies.

Grantees collected various data as part of their INSPIRE projects, including data that extended beyond outputs and outcomes designated for the INSPIRE Initiative. According to survey findings, approximately half of grantees (n=26 of 42 survey responses) were collecting data on performance measures identified by ARC and data on additional measures identified by their organization. This was consistent across implementation (n=19 of 30 survey responses) and planning grantees (n=7 of 12 survey responses). Approximately one-third of grantees reported collecting only data on performance measures identified by ARC (n=16 of 42 survey responses).

Grantees described additional measures that they were using to assess the impact of their projects, ranging from services provided to job placement and retention. These measures were combined across grantees where possible and summarized (Exhibit 18). While these were reported as additional measures by grantees, some measures potentially could have been reported using existing ARC performance measures.[5] For example, the number of employers creating or modifying policies potentially could have been reported using the outcome performance measure "businesses improved." Grantees, however, may have chosen to not track and report on the associated ARC performance measures or may have defined the measures differently from ARC.

Exhibit 18. Summary of Additional Measures Identified by Grantees
Number of individuals/businesses who enrolled in or received training/education/programming/internships/certifications
Number of trainings provided
Number of participants in an activity/event
Number or percentage of individuals obtaining jobs or entering the workforce
Number of individuals maintaining jobs or length of employment
Number or percentage of individuals receiving or accessing services/resources/treatment
Number of services/products provided or amount of funds provided for services
Number of recovery/transitional beds created
Number of documents received or distributed
Number of individuals maintaining recovery or length of recovery
Number of employers creating or modifying policies

Evaluation strategy: Web-based survey of grantees

Grantees subsequently elaborated on data elements that they were collecting, or planned to collect, during focus groups. While a variety of data elements were again highlighted, emphasis was placed on job placement and retention data. Grantees noted the importance of collecting data on short-term job placement as well as long-term job retention. For many grantees, these data were considered a core measure of success. Despite their importance, grantees did not always find an accurate method of reporting these data to ARC. Overall, grantees were excited about the outputs and outcomes of their projects and eager to report on measures beyond those defined by ARC.

> *"I like the way that the ARC management is set up. It captures the base data that all of us would likely be capturing. I would think retention might be one additional to add." (Implementation Grantee)*

> *"We want to find a way to make sure that ARC knows that there have been some unexpected or unintended outcomes that are above and beyond what they were initially looking at." (Implementation Grantee)*

Grantees were using multiple tools to collect data for their projects. The 3 most commonly identified tools included (Exhibit 19): data collection/reporting tool for project staff (n=29 of 42 survey responses; n=24 of 30 implementation; n=5 of 12 planning); survey of businesses (n=19 of 42 survey responses; n=12 of 30 implementation; n=7 of 12 planning); and survey of participants (n=15 of 42 survey responses; n=8 of 30 implementation; n=7 of 12 planning). Grantees expanded on their methods and tools during focus groups, providing additional insight into the types of tools and platforms for data collection used. Surveys, questionnaires, or other assessments (n=16 references), spreadsheets (n=8 references), meetings, interviews, or other "check-ins" (n=6 references), and dedicated software (n=5 references) were among those more commonly described.

Exhibit 19. Data Collection Tools by Grant Type			
Tool	Planning (n=12)	Implementation (n=30)	Total (n=42)
Project staff data collection/reporting tool	5	24	29
Survey of businesses	7	12	19
Survey of participants	7	8	15
Survey of workers/trainees	4	10	14
Interviews/focus groups with businesses	6	8	14
Interviews/focus groups with workers/trainees	5	8	13
Interviews/focus groups with organizations	5	7	12
Survey of community members	5	5	10
Survey of organizations	4	6	10
Interviews/focus groups with participants	3	6	9
Interviews/focus groups with community members	5	3	8
Analysis of third-party data (e.g., analysis of US Census data or other federal agency data)	3	3	6
Survey of patients	2	2	4
Other tool(s)	2	2	4
Interviews/focus groups with patients	1	1	2
Research-based or validated tool(s)	1	1	2

Evaluation strategy: Web-based survey of grantees

Additionally, grantees identified tools that they would use to continue to collect data on outputs and outcomes for up to 3 years after the closure of their INSPIRE grant (Exhibit 20). These tools were similar to those commonly used at the time of the survey. After grant closure, the most commonly identified data collection tools that grantees would use included: a data collection/reporting tool for project staff (n=31 of 44 survey responses; n=24 of 31 implementation; n=7 of 13 planning); survey of participants (n=22 of 44 survey responses; n=13 of 31 implementation; n=9 of 13 planning); survey of businesses (n=20 of 44 survey responses; n=14 of 31 implementation; n=6 of 13 planning); and survey of workers/trainees (n=20 of 44 survey responses; n=16 of 31 implementation; n=4 of 13 planning).

Exhibit 20. Data Collection Tools by Grant Type After Grant Closure			
Tool	Planning (n=13)	Implementation (n=31)	Total (n=44)
Project staff data collection/reporting tool	7	24	31
Survey of participants	9	13	22
Survey of businesses	6	14	20
Survey of workers/trainees	4	16	20
Survey of organizations	4	13	17
Interviews/focus groups with participants	4	8	12
Interviews/focus groups with organizations	6	5	11
Interviews/focus groups with workers/trainees	5	6	11
Survey of community members	4	5	9
Analysis of third-party data (e.g., analysis of US Census data or other federal agency data)	4	4	8
Interviews/focus groups with community members	5	2	7
Interviews/focus groups with businesses	4	3	7
Survey of patients	2	2	4
Interviews/focus groups with patients	2	1	3
Research-based or validated tool(s)	2	1	3
Other tool(s)	1	2	3

Evaluation strategy: Web-based survey of grantees

Grantees estimated their capacity to collect and report on outputs and outcomes to ARC during 2 time periods—until grant closure and up to 3 years after grant closure. Nearly all grantees reported moderate (n=22 of 42 survey responses; n=16 of 30 implementation; n=5 of 12 planning) or high capacity (n=20 of 42 survey responses; n=13 of 30 implementation; n=7 of 12 planning) to collect and report outputs and outcomes to ARC through the end of their INSPIRE grant. Notably, no grantees reported a lack of capacity to collect and report on outputs and outcomes. After the project period, estimated capacity appeared to decline somewhat. Specifically, most grantees reported moderate (n=25 of 43 survey responses; n=18 of 30 implementation; n=7 of 13 planning) or low capacity (n=12 of 43 survey responses; n=8 of 30 implementation; n=4 of 13 planning) to collect and report on outputs and outcomes up to 3 years after grant closure.

Although most grantees reported moderate or high capacity for data collection and reporting during their project period, they identified resources that would increase their capacity to collect and report outputs and outcomes until grant closure (Exhibit 21). While some grantees reported no need for resources, the 3 most commonly identified resources included: staff (n=20 of 42 survey responses); funding (n=19 of 42 survey responses); education or training (n=13 of 42 survey responses); and time (n=13 of 42 survey responses).

Exhibit 21. Resources to Increase Grantee Capacity for Data Collection and Reporting			
Resource	Planning (n=13)	Implementation (n=29)	Total (n=42)
Staff	6	14	20
Funding	5	14	19
Education or training	3	10	13
Time	3	10	13
My organization does not need any resources.	3	8	11
Technical assistance	3	4	7
Materials	1	3	4
Equipment	1	2	3
Other resource(s)	1	0	1
Space	0	0	0

Evaluation strategy: Web-based survey of grantees

Sustainability Plans

- What are grantees' plans to sustain the work of their projects after their INSPIRE grant closes?

Grantee plans for sustainability were evaluated through the web-based survey and virtual focus groups. This section presents key findings from those strategies.

Grantees were generally working toward sustainability for their INSPIRE projects. According to survey findings, approximately half of grantees had a plan to sustain the work of their projects after grant closure (n=26 of 44 survey responses; n=18 of 31 implementation=18; n=8 of 13 planning). Most of the remaining grantees reported not yet having a plan, but intentions to create a plan before grant closure (n=15 of 44 survey responses; n=10 of 31 implementation; n=5 of 13 planning). A total of 3 grantees, all implementation grantees, reported not having a sustainability plan or intentions to create one before grant closure.

Grantees described their sustainability plans through the survey and focus groups. These qualitative data were analyzed in combination to generate a comprehensive understanding of their plans to sustain the work of their projects. Overall, sustainability plans focused on securing additional funding (n=34 references), building on successes in expanding the recovery ecosystem (n=59 references), and leveraging partnerships (n=8 references). Each of these plans is described below.

Funding

Grantees reported planning for mechanisms to fund their activities after grant closure. Mechanisms commonly identified included funding from ARC, grant funding from sources other than ARC, and funding generated through self-sustaining models. A number of grantees described a diverse funding strategy, including grants, contracts, and donations. A small number of grantees also reported that services would cease if additional funding was not secured.

ARC funding. Many planning grantees identified moving toward an INSPIRE implementation grant as their sustainability plan. Additionally, several grantees, both planning and implementation, were considering other ARC funds to sustain their projects, particularly Partnerships for Opportunity and Workforce and Economic Revitalization (POWER) Initiative grants.

> *"Our intention is to go ahead and file for another grant. Obviously, we'd like to continue to maintain . . . This has been really successful for us. We also have MOUs in place with other providers that we contract with through the OTP portion of things. That kind of helps to assist that program, but it doesn't necessarily cover all costs. We also are going to be implementing some peer billing, which will offset a little bit, but it's not going to cover the majority of what the ARC grant covers. We have some plans for sustainability, but ideally, we are going to need to*

reapply for the ARC grant coming up on the next cycle to be able to maintain what we're doing. (Implementation Grantee)

Other grant funding. Many grantees broadly acknowledged that their services relied on grant funding. They also noted that funding from partners was integral to their sustainability plan, especially in providing matching funds, which they had some confidence would continue after grant closure.

> *"[Grantee organization] is a soft-money enterprise, so if there's another grant, then we can keep doing the work, is the simple answer." (Planning Grantee)*

Self-sustaining model. Some implementation grantees identified social enterprise models as their sustainability plan. These included plans for developing products, delivering a service, or starting a small business venture that employed participants from the program. These grantees began their projects with consideration of a long-term model that had the potential to be self-sustaining after grant closure.

> *"The peer recovery support specialists are integral to sustainability. We're talking with our behavioral health partner about placing peer recovery support specialists in long-term recovery as employees of that behavioral health center so that there can be sustainability there. They can bill for the services and would be their clients that would be served. That's really the only way that we can ensure some sustainability other than other types of grant funding." (Implementation Grantee)*

Expanding the Recovery Ecosystem

Grantees described varying types of success in expanding the recovery ecosystem in their service area. While most acknowledged that there is much work to be done in developing and sustaining recovery ecosystems, grantees generally reported making progress towards this goal. Some grantees were able to expand the services that they were offering to more individuals, while others were able to expand or change the services that they offered, such as a treatment program offering employment services or a training program reaching employers in addition to prospective employees. Additional grantees were able to engage new partners in order to have a more comprehensive and robust recovery ecosystem that addressed the social, economic, health, and recovery needs of the people that they served.

> *"One of the successes, one of our deliverables is actually to support the establishment of a recovery-oriented community . . . that did not exist previously. [Person] actually funded someone part time to help get the 501(c)(3) status and the board and get all that stood up. . . . Once it was established, he handed it off to a permanent executive director and so that's been really cool. We had an open house . . . when it kicked off." (Implementation Grantee)*

Partnerships

Many grantees indicated that the sustainability of their work would depend on continued investments of time, funding, and other resources from their partners. Some grantees had

confidence that their partners would continue the work after the funding ceased based on changed attitudes and practices that resulted from training and/or program participation.

> *"Partnerships have been key all the way, 100 percent. Collective impact, without it you can't do it." (Implementation Grantee)*

Conclusions

The Appalachian Regional Commission (ARC) launched the INvestments Supporting Partnerships In Recovery Ecosystems (INSPIRE) Initiative in response to the substance use disorder crisis in the Appalachian Region.[1] On behalf of ARC, the Center for Rural Health Research and the Addiction Science Center at East Tennessee State University evaluated the accessibility of the application process, implementation successes and challenges, and preliminary grant impacts, with a focus on the first 2 cohorts of grantees.

Evaluation findings suggested that while many potential grantees may have prematurely exited the application process, grantees overall had positive experiences in applying for INSPIRE funds. While many features of the application process were described as helpful, the most commonly identified barrier, and suggestion for improvement, reflected the requirement for cost sharing or matching. Given that this evaluation was limited to primary data collection among grantees that were awarded INSPIRE grants, future evaluation activities that include organizations that have not received grants could advance understanding of the accessibility of the application process.

A total of 50 grants were awarded during the first 2 rounds of funding, including 16 planning grants and 34 implementation grants. Collectively, grantee projects focused on 197 counties across the Appalachian Region, most of which were economically classified as transitional, at-risk, or distressed.[2] Evaluation findings suggested that grantee projects were multi-faceted, reflecting a range of partners, activities, and beneficiaries. Considering only ARC performance measures designated for the INSPIRE Initiative, projected impacts for grantee projects included: developing over 20 plans/reports; serving over 3,200 and realizing improvements for over 700 businesses; serving over 600 and realizing improvements for over 400 students; and serving over 4,500 and realizing improvements for over 2,700 workers/trainees.[5]

Grantees overall made progress in achieving projected ARC performance measures and, in some cases, exceeded projected outputs and outcomes. Consistent with the INSPIRE Initiative, grantees shared successes in establishing and expanding partner networks, securing project support, and providing comprehensive services to individuals in recovery. Given the timing and methods of this evaluation, findings may ultimately underestimate the impacts and successes of grantee projects at and beyond grant closure. Future evaluation activities that incorporate outputs and outcomes from closed projects, both from these and later cohorts, could be important when estimating the regional impacts of the INSPIRE Initiative.

Alongside early successes, grantees faced challenges when implementing their projects. While several challenges were identified, stigma associated with substance use disorder and staffing difficulties were among the most common. They also identified impacts of the COVID-19 pandemic, including on their ability to serve their communities or beneficiaries. Encouragingly, grantees reported various strategies to address challenges, such as engaging new partners and expanding community outreach efforts.

Lastly, grantees generally were working toward sustainability. Most grantees reported having a plan, or intentions to create a plan, to sustain the work of their projects. Sustainability plans focused on securing additional funding (including funding from ARC), building on successes in expanding the recovery ecosystem, and leveraging partnerships. Ultimately, the creation and implementation of robust sustainability plans could support the achievement of long-term impacts from grantee projects across the Appalachian Region.

Recommendations

This section presents a set of 19 recommendations aimed at strengthening the INvestments Supporting Partnerships In Recovery Ecosystems (INSPIRE) Initiative of the Appalachian Regional Commission (ARC). The recommendations, organized into 3 areas, were designed to capitalize on strengths and address potential opportunities for improvement identified through the evaluation.

Improving the Accessibility of the Application Process for the INSPIRE Initiative

1. Consider opportunities to enhance training for reviewers of INSPIRE applications.

Findings from the analysis of de-identified application scores for rounds 1 and 2 of INSPIRE funding revealed heterogeneity in scoring among reviewers. *To promote consistency in scoring among reviewers, ARC could consider opportunities to further clarify the scoring rubric, revise existing training materials, or provide additional training opportunities.* For example, it may be beneficial to review the scoring rubric to identify areas where more detailed guidance could be offered (e.g., expand descriptions of what constitutes minimal versus adequate). Similarly, it could be helpful to share examples of application sections that are appropriately scored with reviewers. *Such efforts may be particularly important for the budget and budget narrative section due to the greater variation in scores observed for that category.* Given some differences identified in the scoring rubric available in the training materials as compared to the Requests for Proposals (RFPs), *ARC could also consider completing a close comparison of the sets of guidance* prior to release to ensure consistency.

2. Increase technical assistance or resources available during the application process, particularly for sections that could be more challenging for applicants.

As part of the survey, respondents provided suggestions for improving the application process, including providing additional examples, templates, and/or appendices and providing state-specific substance use disorder or workforce resources. *ARC could consider identifying opportunities to expand guidance or resources available to assist applicants in preparing their applications, including in context of the RFPs, pre-application workshops, and ARC website featuring information for the INSPIRE Initiative.* Additional findings from the analysis of de-identified application scores for rounds 1 and 2 of INSPIRE funding suggested that two categories where applicants could benefit from additional support include the budget and budget narrative as well as projected outputs and outcomes. *ARC could consider expanding the description of these sections in the RFPs, increasing coverage of these sections in the pre-application workshops, or providing additional resources to clarify expectations for these sections (e.g., templates or examples).* Further, ARC could consider reviewing the relative weighting (i.e., number of points assigned) of each category for each grant type. It could be beneficial to ensure that the sections that are more heavily weighted not only reflect expected application content and importance for funding decisions, but that ample resources are provided to applicants through the RFPs and related materials (e.g., ARC website) given their impact on funding status.

3. Consider opportunities to improve the overall usability of the INSPIRE Requests for Proposals (RFPs) for applicants.

Findings from the RFP review combined with findings from the survey highlighted opportunities to potentially strengthen the RFPs. Given variation in the expectations and criteria for planning

and implementation grants, *ARC could consider releasing separate RFPs for each grant type.* To further support the submission of complete and responsive applications, *ARC could also consider offering a fillable grant application form* tailored to the requirements of each grant type. Ensuring that forms are easy to navigate and understandable to diverse audiences would be valuable. Utilizing fillable forms may have an added advantage of increasing consistency in the structure and content of submitted applications, making the review process easier for both reviewers and ARC staff.

4. Expand technical assistance or resources to support fulfillment of the application requirement for cost sharing or matching.

Findings from focus groups revealed that the *requirement for cost sharing or matching, and related calculations, was the most commonly reported barrier among grantees* when completing the application process. Providing a tool to help calculate funding/matching funds was likewise the most commonly identified suggestion for improving the application process according to survey findings. ARC could consider expanding the instructions for this requirement in the RFPs, increasing coverage of this requirement in the pre-application workshops, or providing additional resources to support applicants in identifying the economic designations for their county(ies) and calculating the match rate. Given that the budget and budget narrative was similarly identified as a category where additional support could be beneficial, ARC could consider offering a pre-application workshop concentrated on creating a budget and calculating the match rate. Additionally, *ARC could consider developing a web-based tool where applicants could enter counties and the match rate would be calculated for them*. While different in scope, the Rural Health Grants Eligibility Analyzer (https://data.hrsa.gov/tools/rural-health) could serve as an example of such a tool.[11] A tool could have potential benefits for ARC staff and applicants, such as reducing the amount of technical assistance provided by ARC project coordinators and empowering potential applicants that may be less experienced with cost sharing or matching.

5. Continue to provide and promote pre-application workshops for applicants.

Findings from the survey indicated that *most grantees that attended found the pre-application workshop at least somewhat helpful*. *ARC should continue to provide and promote pre-application workshops to applicants*, including in the context of RFPs and related materials (e.g., ARC website). While grantees often reported attendance, findings from an analysis of organizational participation in the application process suggested that approximately 48 Letters of Intent (LOI) (out of 170 total) were submitted by organizations that did not attend the pre-application workshop. This finding may reflect various factors that influence attendance. From a promotional standpoint, potential factors could include whether organizations are both aware of the opportunity in advance and available to attend, especially if only 1 live session is held for a given round of funding.

6. Ensure that outreach efforts reach Appalachian counties without INSPIRE funding that have evidence of high need.

A total of 197 Appalachian counties, representing nearly 47% of counties in the Appalachian Region, were supported by INSPIRE funding (based on rounds 1 and 2). *ARC could consider targeted outreach to counties without INSPIRE funding that have evidence of need for strengthened recovery ecosystems.* Such need could be demonstrated by relevant county-level measures (e.g., higher drug overdose mortality). Additionally, NORC at the University of Chicago, East Tennessee State University, and the Fletcher Group, Inc., in collaboration with a technical expert panel, developed the Recovery Ecosystem Index Mapping Tool (https://rei.norc.org/).[10] This online tool incorporates an index that measures the strength of county-level substance use disorder recovery ecosystems. *A total of 36 Appalachian counties without INSPIRE funding (based on rounds 1 and 2) were specifically identified as having "weak" recovery ecosystems* according to their index score. When considered in conjunction with additional measures of need, many of these counties may benefit from targeted outreach efforts.

7. Consider opportunities to expand outreach and engagement efforts to organizations that participate in the pre-application workshop or submit a Letter of Intent (LOI).

Findings from an analysis of organizational participation in the application process suggested that *many organizations prematurely exited the process*. While it is unclear what drives organizations to prematurely exit, *ARC could consider incorporating follow-up outreach and engagement efforts for organizations that express interest in applying in a given round*, whether by attending the pre-application workshop or submitting an LOI. Given the role of state program managers in the application process, they may be positioned to complete or support such efforts. The States Offices of Rural Health and state rural health associations in the 13 Appalachian states may be additional partners to consider engaging in these efforts. To better understand how participation in a pre-application workshop relates to application submission, *ARC could also consider expanding the information requested from participants when registering for and/or attending a pre-application workshop.* This could include making "organization" a required field and asking whether the organization anticipates serving as a primary applicant organization or a partner organization. These changes could facilitate more accurate and efficient tracking of organizational participation in the application process for each round.

8. Consider opportunities to expand outreach and engagement efforts to organizations without a well-established relationship with ARC.

Findings from the survey and focus groups demonstrated the contribution of an established relationship with, or connection to, ARC in learning about the INSPIRE Initiative. Organizations without such a relationship or connection, however, may represent a deep pool of potential applicants. *ARC could consider identifying new partners at the national, regional, state, or local*

levels to aid in reaching organizations that have minimal or no connection to ARC, yet missions or services consistent with the INSPIRE Initiative. Such partners could provide access to networks of organizations through which to share information about INSPIRE funding. State Offices of Rural Health, state rural health associations, anti-drug coalitions, Chambers of Commerce, and others engaged in workforce development could be among the partners to consider.

9. Continue to leverage ARC's website and *In The Region* newsletter as platforms for communicating about the INSPIRE Initiative.

Findings from the survey indicated that the *ARC website was the most commonly identified outreach method for learning about the INSPIRE funding opportunity* by grantees. *ARC should continue to leverage the ARC website as a platform for sharing application information and resources.* ARC could likewise consider opportunities to optimize the usability of the website to ensure that applicants cannot only efficiently access materials, but also easily share materials with relevant partners. Additional findings from analyses of outreach methods for rounds 1 and 2 suggested that *newsletters had a wider reach than press releases.* Accordingly, *ARC should continue to leverage newsletters as a platform for communicating* about INSPIRE funding.

10. Consider opportunities to include organizations without INSPIRE funding in the examination of the accessibility of the INSPIRE application process.

In the context of this evaluation, primary data collection was limited to organizations that successfully applied for and were awarded INSPIRE funding. This approach excludes the perspectives and experiences of organizations that did not receive funding. *ARC could consider opportunities to include organizations that were not funded through the INSPIRE Initiative (e.g., organizations that are eligible, but did not begin the application process, organizations that prematurely exited the process, and organizations that applied, but were not funded) when examining the accessibility of the application process.* Gathering information directly from those organizations could inform strategies to not only effectively reach and encourage eligible organizations to apply, but also support them in designing and submitting competitive applications.

Improving the Implementation of the INSPIRE Initiative

11. Consider the implications of the scale of cost sharing or matching required for INSPIRE projects.

Findings from focus groups suggested that *some grantees anticipated struggling to fulfill the cost sharing or matching required for their projects*. While this was often attributed to the COVID-19 pandemic, this struggle may not be unique to grantees that participated in this evaluation. *ARC could consider exploring the implications of the scale of cost sharing or matching that is required*, both for current grantees and applicants. From an accessibility perspective, the scale of the match rate may deter applicants due to concerns about demonstrating the needed matching share and, if funded, fulfilling this requirement. Consideration could be given to integrating flexibility in determining the match rate for a given project, mechanisms to modify a match rate post-award if warranted, and potential advantages and disadvantages of reducing the maximum match rate.

12. Provide training or resources to assist grantees in reducing stigma associated with substance use disorder.

Findings from the survey and focus groups revealed that *stigma associated with substance use disorder was a major challenge* for grantees. While grantees described efforts to overcome stigma, *ARC could consider providing training or resources on effective stigma reduction strategies.* Evidence-based or evidence-informed strategies specifically shown to reduce stigma among organizations and populations (e.g., businesses/employers) with which grantees commonly partner could be particularly advantageous. These strategies could also support grantees in reaching their project goals by minimizing the allocation of time and resources to develop and implement new, possibly untested, strategies.

13. Explore opportunities to assist grantees in delivering effective training to participants and partners.

Findings from the survey and focus groups highlighted *training as a common project activity*. To maximize the impact of INSPIRE funding, it could be beneficial to ensure that grantees have adequate resources to develop or identify high-quality, effective trainings for their projects. *ARC could consider conducting an environmental scan to identify best practices, toolkits, or other resources that may support grantees in delivering high-quality trainings*. This could include materials on training in general (e.g., best practices for adult learning) or materials tailored to specific topics and audiences (e.g., workplace policies and businesses/employers).

14. Explore the implications of increasing the maximum length of the performance period.

Findings from focus groups suggested that *some grantees experienced unexpected delays or extended timelines for accomplishing project milestones*. The current performance period can be up to 18 months for planning grants and 36 months for implementation grants. *ARC could*

consider exploring the implications of increasing the maximum length of the performance period. Alternatively, ARC could consider ensuring that grantees are aware of the potential to request a no-cost extension, if permitted by ARC. Extensions may support grantees in achieving their projected impacts, whether by increasing time allotted to accomplishing activities during project design or responding to unanticipated delays during project implementation.

15. Create platforms to support communication and collaboration among grantees.

Findings from focus groups revealed that *grantees were eager to connect with each other*. *ARC could consider identifying and implementing platforms to support communication and collaboration among grantees.* This could include virtual platforms, in-person gatherings, learning communities, or a combination. Such platforms could provide valuable opportunities for peer learning, resource sharing, and networking.

Improving the Ability to Document the Effectiveness of the INSPIRE Initiative

16. Provide supplemental training or technical assistance on reporting requirements to new and current grantees.

Efforts to gather information available in reports housed in ARC's existing reporting system (ARCnet) revealed *potential opportunities to improve the completeness and timeliness of reporting* among grantees. For example, some grantees lacked reports, while others did not have recent reports despite common expectations for interim reporting. Survey findings further indicated that *education or training was identified by some grantees as a resource that could increase capacity for data collection and reporting*. ARC could consider providing supplemental training or technical assistance to support new and current grantees in fulfilling reporting requirements. Recognizing the existing roles and responsibilities of ARC project coordinators, this could involve an additional staff member dedicated to supporting grantees in accurate and timely reporting. Awareness of the availability of such support may encourage organizations concerned about satisfying federal reporting requirements to apply. *ARC could similarly consider narrowing the information collected, or encouraging more structured responses, in reports to increase consistency across grantees.* Ultimately, steps taken to improve the completeness and timeliness of reporting could yield a stronger foundation from which to evaluate the INSPIRE Initiative over time.

17. Consider opportunities to enhance guidance on performance and other measures for new and current grantees.

Findings from the survey and focus groups suggested that *grantees often collected data on measures that extended beyond performance measures identified by ARC*. In some cases, these measures appeared to align with ARC performance measures. *ARC could consider expanding the description of each measure in the guide for project performance measures*, including highlighting additional data elements that could be captured using a given measure.[5] Additionally, grantees work with their ARC project coordinator to establish and monitor ARC performance measures for their projects. This could provide an opportune setting to discuss all data elements of interest to a given grantee and determine how those may, or may not, align with ARC performance measures. For those that do not align with ARC performance measures, it could be beneficial to encourage grantees to thoroughly document how they define those data elements, including units of measurement and time periods of interest.

18. Consider opportunities to support grantees in designing or identifying high-quality tools and processes for data collection.

Findings from the survey and focus groups suggested that *grantees used various tools to collect data for their projects*, though few specifically reported using research-based or validated tools. The quality of outputs and outcomes reported to ARC could in part reflect the quality of tools and other processes used by grantees to collect those data elements. *ARC could explore*

opportunities to support grantees in designing or identifying high-quality tools and processes for data collection. Such support could be useful not only at the onset of grants, but also toward closure. Survey findings suggested that estimated capacity for data collection and reporting may decline for some grantees after grant closure. In an effort to at least maintain grantee capacity over time, it could be beneficial to encourage grantees to consider data collection tools and processes that could be sustainable without INSPIRE funding.

19. Gather feedback to enhance the usability of the reporting system from recent or current grantees.

Findings from focus groups revealed that *grantees often faced challenges when working with ARC's existing reporting system (ARCnet).* ARC is in the process of replacing ARCnet with a new system. This could offer a unique opportunity to implement a system that not only meets the needs of ARC, but also those of grantees. *ARC could consider gathering detailed feedback from recent or current grantees on their experiences with ARCnet and recommendations for improvement*. In addition to offering additional technical assistance on reporting to grantees, increasing the usability of the system for grantees could further facilitate high-quality reporting.

Appendices

- Appendix A. Evaluation Methods and Limitations
- Appendix B. Data Sources, Indicators, and Notes for County Profile Analysis
- Appendix C. County-Level Comparisons for County Profile Analysis
- Appendix D. Data Collection Instrument Example

Appendix A. Evaluation Methods and Limitations

A summary of the methods used for the evaluation of the INvestments Supporting Partnerships In Recovery Ecosystems (INSPIRE) Initiative is presented below. It is organized by evaluation strategy. The evaluation methods are limited to those that contributed to key findings and/or recommendations for the Appalachian Regional Commission (ARC), as presented in this final report. The project was deemed non-human subjects research by the Institutional Review Board at East Tennessee State University (ETSU).

Application Accessibility Analysis

Purpose. The purpose of the application accessibility analysis was three-fold: 1) describe the reach of select marketing/outreach methods used by ARC; 2) explore how the Requests for Proposals (RFPs; now referred to as Notice of Solicitations of Applications [NOSAs] by ARC) may encourage or discourage potential grantees from applying; and 3) identify the points at which potential grantees chose to enter and exit the application process. Similarly, this analysis consisted of 3 elements, all of which leveraged secondary data sources. These elements included: 1) a review of select marketing/outreach methods; 2) a review of RFPs; and 3) an analysis of organizational participation in the application process.

Methods. The methods are summarized by each element of the application accessibility analysis.

Review of marketing/outreach materials. ARC provided communications information and reach for rounds 1 and 2 of funding. The reach of press releases (n=2), newsletters (n=2), and social media posts (n=4) for round 1 and round 2 of funding was reviewed. This included the number sent, opened, and clicked for press releases and newsletters, as well as the reach of social media posts (i.e., reach for Facebook, impressions for LinkedIn and Twitter). A series of figures were created using Excel[12] to summarize and visualize outreach efforts.

Review of Requests for Proposals (RFPs). ARC provided access to the RFPs released in 2020, 2021, and 2022 for the INSPIRE Initiative. These RFPs were reviewed to assess their accessibility to organizations that may be the most capable and deserving of INSPIRE funding. A thorough review of each RFP informed the development of a coding frame, which was reviewed by ARC. Each RFP was independently coded by 2 analysts using the coding frame in Excel.[12] Coding disagreements were resolved through consensus. Themes were collaboratively identified and defined. Additionally, a web-based calculator[13] was used to estimate the reading level of each RFP according to the SMOG Index Readability Test.[9]

Analysis of organizational participation. ARC provided a list of participants who attended and registered for the pre-application workshops, Letters of Intent (LOIs) submitted by potential applicants, and an Excel file dataset containing information on grantees that applied for and received implementation or planning grants in rounds 1 and 2. These documents were reviewed to generate a list of organizations that registered for the pre-application workshop,

organizations that attended the workshop, organizations that submitted an LOI, organizations that submitted an application, and organizations that were funded. Based on guidance from ARC, workshop participants who were identified as ARC staff or state program managers were removed. Organizations with more than 1 representative who registered for or attended the workshop for a given round were only counted once to the extent possible.

Limitations. Some limitations should be considered when interpreting findings from the application accessibility analysis. First, for the marketing/outreach methods, this review included neither formal statistical comparisons nor a qualitative analysis of the content of the newsletters, press releases, or social media posts. The available data also did not account for the same individuals reacting to social media posts across platforms and only reflected rounds 1 and 2 of funding. Second, for the RFPs, this review only included 3 documents, which could limit conclusions across documents. Multiple factors can impact accessibility. Potential strengths and difficulties of the RFPs identified by the evaluation team may have less impact as compared to broader contributors to overall accessibility, such as readability, document design, and layout. Grantee or applicant perspectives were also not considered. Inferences were based on the grant-related experience and working knowledge of the evaluation team. Lastly, for organizational participation, there was a major limitation regarding data integrity. It was not always possible to track whether a registered participant for a pre-application workshop was affiliated with an organization that submitted an application. Participants did not always include their organization or abbreviated it during registration. It could be that participants were a partner of a potential applicant, rather than a separate potential applicant. Therefore, the number of organizations that attended a pre-application workshop, but did not submit an LOI was likely over-represented. Similarly, the number of organizations that did not attend a pre-application workshop was likely over-represented. Further, this analysis only considered organizational participation during rounds 1 and 2 of funding.

Application Score Analysis

Purpose. The purpose of the application score analysis was to identify trends in application scores. Specifically, this analysis sought to identify areas with significant differences in scores between applications that were funded and applications that were not funded during rounds 1 and 2, and to identify areas where there may be opportunities to provide additional support to applicants.

Data sources and indicators. Application scores were provided by ARC in de-identified datasets: round 1 application scores (combined); round 2 implementation application scores; and round 2 planning application scores. The data provided were at the reviewer level, with each application receiving 2-4 scores. Both applications and reviewers were de-identified in the datasets. Analyses focused on category and total scores by grant type and funding round, which were extracted from the RFPs for rounds 1 and 2. In round 1, the scoring criteria (categories

and maximum point values) were the same for implementation and planning grants. In round 2, implementation and planning grant scoring criteria differed from each other and round 1.

Data analyses. The application score analysis included several parts: 1) funding status by grant type and funding round; 2) a comparison of scores within categories by funding status; and 3) an analysis of variation in scores by reviewers. Part 1 included descriptive counts of applications by grant type and funding round. Part 2 included comparisons of category and total scores by application funding status using descriptive and bivariate statistics. Multivariate logistic regressions were also conducted for funding round 1 to estimate associations between category scores and funding status, while controlling for other category scores. Based on guidance from ARC that funding decisions were made using an average score, these analyses were conducted at the application level using averaged scores across reviewers. Part 3 assessed variation in reviewer scores. Minimum and maximum scores for each application and each score category were identified. The point "spread" was calculated by subtracting the minimum from the maximum reviewer score for each application. For each score category and overall scores, the minimum, maximum, and mean point "spread" at the application level were calculated as well as the mean percent "spread," which was calculated from the mean point spread divided by the maximum number of points available for each score category and overall. Analyses were conducted using Stata.[14]

Limitations. Given that the application score analysis reflected application and reviewer level scores, a few limitations should be noted. Sample sizes were small in some instances, which limited statistical comparisons. Additionally, there were some outlier application and reviewer scores; however, based on guidance from ARC, these scores were included in the analysis. These scores may have reduced average scores and increased the variation in scores observed across reviewers. Lastly, this analysis only reflected application scores from rounds 1 and 2 of funding.

County Profile Analysis

Purpose. The purpose of the county profile analysis was two-fold: 1) describe counties with INSPIRE funding; and 2) compare the characteristics of counties with and without INSPIRE funding within the Appalachian Region.

Data sources and indicators. In collaboration with ARC, a comprehensive set of county-level characteristics were identified that reflected economic, demographic, health status and health care, and geographic indicators. Maps provided by ARC indicating counties with INSPIRE funding were used to identify counties across the Appalachian Region with and without INSPIRE funding. A master data file containing the county-level indicators for all counties in the Appalachian Region was developed for analytic purposes. Details on data sources, indicators, and notes can be found in Appendix B.

Data analyses. Descriptive statistics were applied to each indicator for counties with INSPIRE funding, counties without INSPIRE funding, and all Appalachian counties (i.e., both counties with and without INSPIRE funding). Bivariate analyses (e.g., t-tests, Fisher's Exact Tests, and chi-squared analyses) were conducted as appropriate to identify characteristics that differed between counties with and without INSPIRE funding. Additional stratified comparisons across counties with and without INSPIRE funding were conducted by Appalachian subregion to detect variation by population demographics (e.g., race and ethnicity). Further, a subset of counties in the Appalachian Region without INSPIRE funding were identified that have "weak" substance use disorder recovery ecosystems (scores of 4 or 5 out of 5) using the Recovery Ecosystem Index developed by NORC at the University of Chicago, ETSU, and the Fletcher Group, Inc., in collaboration with a technical expert panel.[10] All analyses were conducted using Stata.[14]

Limitations. Several limitations should be considered when interpreting the results of the county profile analysis. First, it was a descriptive and cross-sectional analysis. Second, while the most recently available data for each indicator was used, time periods for available data differed across indicators and did not all align with years of INSPIRE funding. Third, this analysis did not account for the scale or type of INSPIRE funding (including number of grants and whether grants were planning or implementation) within each county, but rather only the presence of any INSPIRE funding in a county. Even among counties with INSPIRE funding, there was likely heterogeneity in funding amounts as well as the type and intensity of INSPIRE-funded initiatives. Lastly, this analysis only reflected funding awarded during rounds 1 and 2.

Grant Portfolio Data Analysis

Purpose. The purpose of the grant portfolio data analysis was two-fold: 1) describe trends in the overall grant portfolio; and 2) describe the characteristics of grantees and their projects. Grant portfolio data referred collectively to multiple data sources available through ARC.

Methods. Grantee characteristics as well as projected output and outcome performance measures as defined by ARC[5] for grantee projects were obtained from an Excel file dataset provided by ARC. Descriptive analyses were conducted using Excel[12] to examine grantee characteristics and projected ARC performance measures overall, and where appropriate, by grant type.

Limitations. Several limitations should be considered when interpreting the results of the grant portfolio data analysis. The grant portfolio was limited to grantee projects that were funded during rounds 1 and 2. Similarly, projected output and outcome performance measures were limited to performance measures defined by ARC.[5] Grantees may have projected additional impacts using other measures that they identified for their projects. Lastly, the relatively small sample sizes limited statistical power and therefore statistical comparisons were limited.

Web-Based Survey of Grantees

Purpose. The purpose of the web-based survey was to collect qualitative and quantitative data from grantees on their application experiences, grant implementation and performance, and performance measurement. Specifically, the survey focused on organizational characteristics, experiences applying for INSPIRE funding, project characteristics, implementation experiences, partnerships, and project impacts (including ARC performance measures[5] and additional measures identified by grantees) and sustainability.

Data collection. In collaboration with ARC, the evaluation team developed and refined a web-based, cross-sectional survey instrument. The survey was designed to address multiple evaluation questions identified by ARC and consisted of structured and unstructured questions. Where appropriate, survey questions varied by grant type (i.e., planning or implementation) and grant status (i.e., open or closed). The survey was electronically administered using REDCap (Research Electronic Data Capture)[15,16] tools available at ETSU in November-December 2022. For each grantee, recruitment to participate in the survey generally included an initial notification email sent by ARC, up to 3 email invitations/reminders sent by the evaluation team, up to 2 telephone calls completed by the evaluation team, and up to 2 email reminders sent by ARC. As part of recruitment efforts, grantees received access to a short, web-based document that provided an overview of the survey. Grantees were instructed to complete the survey once (i.e., 1 survey per grantee organization), and participation was voluntary. Survey responses were received from a total of 49 of 50 grantees.

Data analyses. Given that grantees were allowed to skip survey questions at their discretion, responses for partially and fully completed surveys were included in analyses based on guidance from ARC. Quantitative and qualitative techniques were used to analyze data derived from structured and unstructured survey questions, respectively. For structured questions, descriptive statistics were conducted overall, and where appropriate, by grant type using Stata.[14] For purposes of estimating progress based on ARC performance measures, the percentage of projected outputs and outcomes that were achieved at the time of the survey was calculated.[5] The numerator for these calculations was the total achieved count for each performance measure. Only grantees with open projects at the time of the survey were asked to report on achieved performance measures through the survey because grantees with closed projects had already done so at the close of their grant. The total achieved count for each performance measure thus combined achieved performance measures reported through the survey for open projects with final achieved performance measures extracted from the grant portfolio data, specifically, grant closeout summaries, for closed projects. The denominator for these calculations was the total projected count for each performance measure as reported in the grant portfolio data. For unstructured questions, a multi-step coding process was applied to grantee responses with the support of a coding frame and qualitative data analysis software (NVivo).[17] The coding frame and process were reviewed by ARC prior to use. When focused on a similar evaluation question or topic, coded data derived from the survey were reviewed in

combination with coded data derived from the focus groups. Themes were subsequently identified and described.

Limitations. Some limitations should be considered when interpreting findings from the quantitative and qualitative analyses of data collected through the web-based survey of grantees. This survey was self-administered, with each grantee organization limited to 1 survey. Consistent with the use of self-reported data, recall and social desirability bias could have influenced grantee responses. Similarly, while a strong overall response rate was obtained, all survey responses were not fully completed. Additionally, this survey was cross-sectional by design and included grantees at different points in the trajectory of their projects. As noted previously, grantees with open projects at the time of the survey were asked to report on achieved ARC performance measures through the survey. Given that most projects were open, the findings, including those involving achieved ARC performance measures, may underestimate the overall impact of grantee projects at and beyond grant closure. Due to small sample sizes and variation in data elements by grant type, statistical comparisons were also not conducted. Lastly, the sample was limited to grantees that were awarded funding during rounds 1 and 2.

Virtual Focus Groups with Grantees

Purpose. The purpose of the virtual focus groups was to expand on the web-based survey by collecting in-depth, qualitative data from grantees on their application experiences, grant implementation and performance, and performance measurement.

Data collection. In collaboration with ARC, 2 focus group guides, 1 for planning grantees and 1 for implementation grantees, were developed and refined. The guides addressed multiple evaluation questions identified by ARC and were conceptually similar, yet tailored to each grant type as appropriate. Focus groups were convened with grantees by grant type (i.e., planning or implementation), with each grantee given the opportunity to have up to 2 personnel attend a focus group. Grantees were invited to participate in focus groups through a series of email- and telephone-based communications as applicable, including initial email notifications sent by ARC. Focus groups were conducted virtually using the appropriate guide, recorded, and transcribed for analytic purposes. A total of 11 focus groups were convened during December 2022-February 2023, including 5 focus groups with planning grantees and 6 focus groups with implementation grantees. Exhibit 22 summarizes grantee participation, both overall and by grant type. Participation was voluntary.

Exhibit 22. Grantee Participation in Virtual Focus Groups			
	Planning n	Implementation n	Total n
Grantee	13	20	33
Grantee Personnel	18	26	44

Data analyses. Qualitative data derived from the virtual focus groups were analyzed using methods similar to qualitative data derived from the web-based survey. A multi-step coding process was applied to grantee responses with the support of a coding frame and qualitative data analysis software (NVivo).[17] Data collected during an initial set of focus groups with grantees, grantee responses to relevant questions on the web-based survey, and the evaluation questions informed the development of the coding frame. The coding frame and process were reviewed by ARC prior to use. As noted previously, coded data from the focus groups were reviewed in combination with coded data derived from the survey when focused on a similar evaluation question or topic. Themes were identified and described, including selection of representative quotes from data derived from the focus groups.

Limitations. Several limitations should be considered when interpreting findings from the qualitative analysis of data collected through the virtual focus groups. Similar to data derived from the web-based survey, these data were self-reported and could have been impacted by associated biases. While the focus groups were facilitated by experienced members of the evaluation team using focus group guides, the potential for interviewer bias should be noted. Additionally, the sample was limited to grantees that were awarded funding during rounds 1 and 2. While over half of grantees were represented, the perspectives and experiences of all grantees from these rounds were not captured. Further, for various reasons (e.g., staff turnover), some grantee personnel who participated had no or limited experience with specific aspects of their projects (e.g., application process).

Appendix B. Data Sources, Indicators, and Notes for County Profile Analysis

In collaboration with ARC, a comprehensive set of county-level characteristics of interest were identified. Characteristics were divided into economic, demographic, health status and health care, and geographic indicators. Maps provided by ARC indicating counties with INSPIRE funding were used to identify counties across the Appalachian Region with and without INSPIRE funding. A master data file containing all county-level indicators for all counties in Appalachia was developed. Exhibit 23 presents details on the data sources, indicators, and notes.

Exhibit 23. Data and Measure Descriptions for County Profile Analysis		
Data Source and Year	Indicator	Description/Categories
Appalachian Regional Commission (ARC), 2022	Economic distress status[2]	Distressed At-Risk Transitional Competitive Attainment
	Appalachian subregion[18]	Central North Central Northern South Central Southern
	Collapsed Urban Influence Code scheme [a]	Large metros Small metros Nonmetro, adjacent to large metro Nonmetro, adjacent to small metro Rural
American Community Survey (ACS) 5-year estimates, 2016-2020[19]	Population size	
	Percent population by race	White Black Asian Other
	Percent population Hispanic or Latino	
	Percent of population working-aged adults	Ages 18-64
	Percent of households with cash assistance, Food Stamps/SNAP	
	Percent of population with at least a high school degree or equivalent	
	Percent of working-age adult population (ages 18-64) with a disability	Any disability Hearing difficulty Vision difficulty Cognitive difficulty Ambulatory difficulty Self-care difficulty

		Independent living difficulty
	Percent of households with any internet	
	Labor force participation rate	Ages 16+
Centers for Disease Control and Prevention (CDC) WONDER Underlying Causes of Death, years 2016-2020, age-adjusted, all ages[20]	All-cause mortality	Using International Classification of Disease, 10th revision (ICD-10) codes
	Overdose related deaths	ICD-10 codes: X40-X44, X60-X64, X85, and Y10-Y14
	Intentional self-harm	ICD-10 codes: U03 [b],X60-X84,Y87.0
Bureau of Labor Statistics (BLS), 2021[21]	Unemployment rate	
US Department of Agriculture (USDA) Economic Research Service (ERS) County Typology, 2015[22]	Percent farming employment	
	Percent injury-prone employment	Percent of employed population that is employed in manufacturing; construction; mining and natural resources; and trade, transportation and utilities
	Primary industry dependency	Farming Mining Manufacturing Federal/state government Recreation Nonspecialized
	Persistent poverty status	Binary; County classified as persistent poverty if 20% of more of its residents were poor as measured by the 1980, 1990, and 2000 decennial censuses and the American Community Survey 5-year estimates for 2007-2011 (definition from USDA ERS)
	Persistent related child poverty	Binary; Same as persistent poverty status but if 20% or more of related children under 18 years old were measured as poor in the same years and data
Inter-University Consortium for Political and Social Research (ICPSR), 2013 data (reflecting 2000-2010)[23]	Net migration rate per 100 people	Difference between the observed final population and expected population in 2010 per 100 individuals (defined by ICPSR)
USDA ERS, 2013	Urban Influence Codes (2013)[24]	1: In large metro area of 1+ million residents 2: In small metro area of less than 1 million residents 3: Micropolitan area adjacent to large metro area

		4: Noncore adjacent to large metro area 5: Micropolitan area adjacent to small metro area 6: Noncore adjacent to small metro area and contains a town of at least 2,500 residents 7: Noncore adjacent to small metro area and does not contain a town of at least 2,500 residents 8: Micropolitan area not adjacent to a metro area 9: Noncore adjacent to micro area and contains a town of at least 2,500 residents 10: Noncore adjacent to micro area and does not contain a town of at least 2,500 residents 11: Noncore not adjacent to metro or micro area and contains a town of at least 2,500 residents 12: Noncore not adjacent to metro or micro area and does not contain a town of at least 2,500 residents
Substance Abuse and Mental Health Services Administration (SAMHSA)[25,26]	Substance use treatment facilities per 100,000	Pulled from SAMHSA's Behavioral Health Treatment Services Locator on April 25, 2022
	Providers licensed to administer buprenorphine per 100,000	Same as above
	Mental health providers per 100,000	Same as above
NA.org[27] and SMARTrecovery.org[28]	Mutual aid group meetings per 100,000	Number of Narcotics Anonymous (NA) or Self-Management and Recovery Training (SMART) meetings per 100,000, as of May, 2022
Recovery Ecosystem Index Mapping Tool, 2022[10]	Recovery Ecosystem Index	Scale of 1 (strongest) to 5 (weakest)

a Urban Influence Code data are from the USDA; however, the collapsed category scheme is from ARC. ARC's condensed categories include 1: large metros (pop. 1 million + including USDA ERS code 1), 2: Small metros (pop. <1 million, including USDA ERS code 2), 3: Nonmetro, adjacent to large metros (including USDA ERS codes 3-4), 4: Nonmetro, adjacent to small metros (including USDA ERS codes 5-7), and 5: rural (nonmetro, nonadjacent to a metro including USDA ERS codes 8-12).

b U03 part of a classification and coding of deaths due to acts of terrorism, not part of the ICD-10 but used by National Center for Health Statistics (NCHS) starting in 2001.

Appendix C. County-Level Comparisons for County Profile Analysis

Characteristics of counties with and without INSPIRE funding as well as the characteristics of counties across the full Appalachian Region are presented in Exhibits 24-27. Depending on the variable type and cell size, these included t-tests, chi-squared analyses, and Fisher's exact analyses. Cells in the exhibits represent either the mean (SD) or number (%). Those populated with the latter include a percentage sign (%). The significance level is indicated with asterisks by the variable name.

Exhibit 24. Comparison of Economic Indicators for Appalachian Counties with and without INSPIRE Funding			
	Counties with INSPIRE funding (N=197)	Counties without INSPIRE funding (N=226)	All Appalachian counties (N=423)
Economic distress			
Distressed	36 (18%)	45 (20%)	81 (19%)
At-Risk	52 (26%)	43 (19%)	95 (22%)
Transitional	104 (53%)	127 (56%)	231 (55%)
Competitive	5 (3%)	7 (3%)	12 (3%)
Attainment	0 (0%)	4 (2%)	4 (1%)
Unemployment rate***	5.3 (1.5)	4.7 (1.5)	5.0 (1.5)
Labor force participation	53.5 (5.9)	53.7 (7.3)	53.6 (6.7)
Farming employment***	4.5 (4.2)	6.4 (5.8)	5.5 (5.2)
Injury-prone employment	33.3 (9.2)	32.3 (9.9)	32.8 (9.5)
Number of industry dependencies			
0	88 (45%)	96 (43%)	184 (44%)
1	95 (48%)	109 (49%)	204 (49%)
2	14 (7%)	18 (8%)	32 (8%)
Primary industry dependency**			
Farming-dependent	1 (1%)	12 (5%)	13 (3%)
Mining-dependent	23 (12%)	13 (6%)	36 (9%)
Manufacturing-dependent	50 (25%)	49 (22%)	99 (24%)
Federal/state government-dependent	15 (8%)	32 (14%)	47 (11%)
Recreation	20 (10%)	21 (9%)	41 (10%)
Nonspecialized	88 (45%)	96 (43%)	184 (44%)

Median household income***	46,578.9 (8687.6)	48,870.5 (10665.9)	47,795.7 (9843.4)
Persistent poverty	36 (18%)	37 (17%)	73 (17%)
Persistent related child poverty	59 (30%)	58 (26%)	117 (28%)
Households with cash assistance or food stamps/SNAP	16.8 (5.5)	15.7 (6.2)	16.2 (5.9)
Percent of families below Federal Poverty Level (FPL)	12.7 (4.9)	12.2 (5.0)	12.4 (5.0)
Percent population uninsured	8.4 (3.7)	8.8 (3.8)	8.6 (3.8)
Percent households with any internet	76.3 (6.3)	76.6 (6.8)	76.5 (6.6)

Significance level: *p<0.05, **p<0.01, ***p<0.001

Exhibit 25. Comparison of Demographic Indicators for Appalachian Counties with and without INSPIRE Funding			
	Counties with INSPIRE funding (N=197)	Counties without INSPIRE funding (N=226)	All Appalachian counties (N=423)
Net migration rate***	2.2 (8.4)	5.8 (10.5)	4.1 (9.7)
Population total	62,459 (10210)	59,565 (101165)	60,922 (101494)
Population race (%)			
White	88.1 (13.2)	90.1 (10.7)	89.1 (11.9)
Black*	7.8 (12.9)	5.5 (9.5)	6.6 (11.3)
Asian*	0.6 (0.9)	0.9 (1.5)	0.8 (1.3)
Other	3.5 (3.0)	3.6 (2.2)	3.5 (2.6)
Percent population Hispanic or Latino	3.1 (3.7)	3.5 (3.7)	3.3 (3.7)
Percent population working-age adults	59.3 (2.7)	59.5 (2.9)	59.4 (2.8)
Percent population 25+ with at least a high school degree (or equivalent)	85.2 (5.6)	84.4 (5.5)	84.7 (5.6)
Percent working-age population with any disability	17.0 (5.3)	16.7 (5.7)	16.9 (5.5)
Percent working-age population with hearing difficulty	3.6 (1.7)	3.7 (1.9)	3.6 (1.8)
Percent working-age population with vision difficulty	3.6 (1.8)	3.3 (1.9)	3.4 (1.9)
Percent working-age population with cognitive difficulty	7.3 (2.7)	7.1 (2.8)	7.2 (2.7)
Percent working-age population with ambulatory difficulty	9.0 (3.4)	9.0 (3.8)	9.0 (3.7)
Percent working-age population with self-care difficulty	3.0 (1.3)	2.8 (1.3)	2.9 (1.3)
Percent working-age population with independent living difficulty	6.3 (2.2)	6.1 (2.6)	6.2 (2.4)

Significance level: *p<0.05, **p<0.01, ***p<0.001

	Counties with INSPIRE funding (N=197)	Counties without INSPIRE funding (N=226)	All Appalachian counties (N=423)
Exhibit 26. Comparison of Health Status and Health Care Indicators for Appalachian Counties with and without INSPIRE Funding			
All-cause mortality rate	951.5 (143.7)	927.7 (147.5)	938.8 (146.1)
Overdose-related mortality rate*	36.6 (19.0)	32.3 (15.9)	34.4 (17.6)
Intentional self-harm mortality rate	19.3 (4.1)	19.8 (4.9)	19.6 (4.6)
Substance use treatment facilities per 100,000	8.5 (8.9)	9.7 (10.5)	9.1 (9.8)
Providers licensed to administer buprenorphine per 100,000	15.7 (16.8)	13.5 (15.8)	14.5 (16.3)
Mental health providers per 100,000	0.6 (1.2)	0.6 (1.3)	0.6 (1.2)
Mutual aid group meetings per 100,000 (NA/SMART)	8.1 (8.8)	7.2 (9.0)	7.6 (8.9)
Recovery Ecosystem Index			
1 (strongest)	28 (14%)	17 (8%)	45 (11%)
2	59 (30%)	76 (34%)	135 (32%)
3	71 360%)	97 (43%)	168 (40%)
4	31 (16%)	32 (14%)	63 (15%)
5 (weakest)	8 (4%)	4 (2%)	12 (3%)

Significance level: *p<0.05, **p<0.01, ***p<0.001

Exhibit 27. Comparison of Geographic Indicators for Appalachian Counties with and without INSPIRE Funding

	Counties with INSPIRE funding (N=197)	Counties without INSPIRE funding (N=226)	All Appalachian counties (N=423)
Appalachian subregion***			
Central	30 (15%)	52 (23%)	82 (19%)
North Central	27 (14%)	36 (16%)	63 (15%)
Northern	55 (28%)	31 (14%)	86 (20%)
South Central	33 (17%)	54 (24%)	87 (21%)
Southern	52 (26%)	53 (23%)	105 (25%)
Rurality (ARC Categories from Urban Influence Code) [a] ***			
1- Large metro	20 (10%)	17 (8%)	37 (9%)
2- Small metro	47 (24%)	68 (30%)	115 (27%)
3- Nonmetro, adjacent to large metro	30 (15%)	14 (6%)	44 (10%)
4- Nonmetro, adjacent to small metro	41 (21%)	76 (34%)	117 (28%)
5- Rural	59 (30%)	48 (22%)	107 (25%)

Significance level: *$p<0.05$, **$p<0.01$, ***$p<0.001$

[a] Urban influence code key: ARC's condensed categories include 1: large metros (pop. 1 million + including USDA ERS code 1), 2: Small metros (pop. <1 million, including USDA ERS code 2), 3: Nonmetro, adjacent to large metros (including USDA ERS codes 3-4), 4: Nonmetro, adjacent to small metros (including USDA ERS codes 5-7), and 5: rural (nonmetro, nonadjacent to a metro including USDA ERS codes 8-12). USDA ERS 2013 codes are as follows: 1: In large metro area of 1+ million residents. 2: In small metro area of less than 1 million residents. 3: Micropolitan area adjacent to large metro area. 4: Noncore adjacent to large metro area. 5: Micropolitan area adjacent to small metro area. 6: Noncore adjacent to small metro area and contains a town of at least 2,500 residents. 7: Noncore adjacent to small metro area and does not contain a town of at least 2,500 residents. 8: Micropolitan area not adjacent to a metro area. 9: Noncore adjacent to micro area and contains a town of at least 2,500 residents. 10: Noncore adjacent to micro area and does not contain a town of at least 2,500 residents. 11: Noncore not adjacent to metro or micro area and contains a town of at least 2,500 residents. 12: Noncore not adjacent to metro or micro area and does not contain a town of at least 2,500 residents.

Appendix D. Data Collection Instrument Example

Guide for Virtual Focus Groups with Implementation Grantees

<u>Introduction Question</u>

1. How did your organization learn about the INSPIRE Initiative?

<u>Transition Questions</u>

Now, we are going to ask about the process of applying for an INSPIRE grant.

2. Please tell us about your organization's experience applying for an INSPIRE grant?
    a. PROBE: Positive experiences? Negative experiences?
3. What were the biggest barriers your organization faced when applying for an INSPIRE grant?
4. How could ARC make the INSPIRE application more accessible to future applicants like your organization?
    a. PROBE: Any ideas to improve the marketing or outreach process for the INSPIRE initiative?

<u>Key Questions</u>

Next, we have some questions about the implementation and early impacts of your INSPIRE project.

5. Please tell us about the goals and key approaches of your INSPIRE project.
6. How does your organization determine community needs in the substance use disorder recovery-to-work ecosystem?
    a. How does your organization apply information on community needs to your INSPIRE project?
7. How has your organization incorporated partnerships into your INSPIRE project?
    a. Please tell us about your organization's experience with those partnerships.
        i. PROBE: Positive experiences? Negative experiences?
    b. How is your organization engaging business/employer partners in your INSPIRE project?
        i. PROBE: How, if at all, are they modifying their policies to support people in recovery?
8. What successes has your organization experienced when implementing your INSPIRE project?
    a. What factors contributed to the successes of your organization?
9. What challenges has your organization experienced when implementing your INSPIRE project?
    a. PROBE: How about challenges related to the COVID-19 pandemic?
    b. PROBE: How about unanticipated costs?
    c. Is your organization's current staffing meeting the needs of your INSPIRE project?

       i.   PROBE: Has staffing been an issue for any specific reason?

    d. How, if at all, has stigma around substance use disorder affected your organization's ability to implement any part of your INSPIRE project?

10. What referral pathway has your organization found to be most effective in supporting people in recovery to engage or re-engage in the workforce?
    a. Thinking about people in recovery who may be participating in your INSPIRE project, what skills, if any, are they missing that employers need, whether now or in the future?
11. What data are your organization collecting to assess the impact of your INSPIRE project?
    a. PROBE: How about data on outputs or outcomes other than performance measures identified by ARC?
12. How does your organization collect data on outputs and/or outcomes for your INSPIRE project?
13. For implementation grantees, required outputs and outcomes include businesses served and improved plus workers/trainees served and improved and/or students served and improved. What other outputs or outcomes do you feel are important to capture for implementation grants?

Ending Questions

Finally, we have a couple of questions related to the closure of INSPIRE grants.

14. How does your organization plan to sustain its work after your INSPIRE grant closes?
15. What capacity does your organization have to collect data on outputs and outcomes after your INSPIRE grant closes?
16. Based on your organization's experience, what advice would your organization give to an organization that is applying for or was recently awarded an INSPIRE grant?
17. What else would anyone like to share?

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