

## **Community Voice: Rural Perspectives on Opioid Abatement Funding**

This report reflects the insights, experiences, and priorities of stakeholders from rural Oklahoma counties who participated in a community assessment regarding the opioid crisis. Respondents included community members, healthcare providers, peer recovery specialists, law enforcement, and individuals with lived experience. The data highlights both progress made through opioid abatement funding and areas still requiring attention.

### **Geographic Reach of Responses**

Responses were collected from Caddo, Grady, Haskell, Leflore, Tillman, Greer, Kiowa, Comanche, Beckham, and Washita.

### **Perceptions of Community Response Effectiveness**

Most respondents felt their community's response is only somewhat effective or less, indicating a strong need for more coordinated, visible, and adequately resourced efforts.

### **Key Challenges Identified**

Based on community input, these challenges are shown from the most commonly mentioned to the least, highlighting where rural voices see the greatest barriers:

- Limited treatment options locally
- Lack of transportation
- Stigma toward people with substance use disorders
- Lack of sustainable funding
- Limited recovery housing options
- Workforce shortage in healthcare/behavioral health
- Lack of peer support services
- Limited coordination between agencies

### **Underserved Populations**

Participants consistently pointed out that certain populations are not adequately reached by existing services (listed in order of most frequently identified):

- Rural residents without transportation
- Youth
- People in the criminal justice system
- Pregnant or parenting women
- Tribal or Indigenous communities

## Community Priorities for Future Work

When asked where they would like to see more work, respondents prioritized (listed in order by how many times mentioned):

- Recovery housing development
- Reducing stigma and increasing community awareness
- Early intervention for at-risk youth
- Increasing treatment options locally
- Employment and job training for people in recovery
- Family support services
- Prevention and education
- Transportation services

## What Communities Would Do With New Funding

If additional funding were made available, rural communities would focus on:

- Launching residential treatment programs and expanding recovery housing
- Providing early education and prevention services, particularly in schools
- Outreach and connection services to increase community knowledge of available resources
- Addressing homelessness linked to substance use
- Improving transportation systems to access care and treatment

## Final Observations from Respondents

Several stakeholders shared direct insights such as:

“SUD Programs have a massively wide river to cross. There are so many holes in the service net, and very little help to fill the gaps.”

“Even when transportation is available, it’s unreliable — people get left behind.”

These quotes reflect both the urgency and complexity of the opioid crisis in rural Oklahoma. They also reinforce the need for sustained investment, localized solutions, and inclusive planning that center community voices.

## Conclusion

This assessment confirms that while opioid abatement funding is making an impact, rural communities still face major gaps in treatment access, housing, stigma reduction, transportation, and service coordination. As OKARR and local partners continue this critical work, this feedback will guide our priorities, programming, and advocacy.

OKARR remains committed to ensuring that opioid abatement funds lead to measurable, community-led change — especially in Oklahoma’s most underserved and rural areas.

To learn more about this community assessment and how it is being used for strategic planning efforts in a county near you, please email [okarr@okarr.org](mailto:okarr@okarr.org).