

# Naloxone Hero Project

Please fill this form out quarterly based on the due dates listed in your milestones. In Quarter 4, you will fill out this form twice--once with data from your 4th quarter, and once with data from the entire year. Please contact [jspence@arorp.org](mailto:jspence@arorp.org) with any questions or concerns.

Email \*

srose3@uca.edu

What is your organization's name? \*

University of Central Arkansas

What date are you submitting your report on? \*

MM DD YYYY

11 / 29 / 2023

Which quarterly report are you submitting? \*

- 1st Quarterly Report
- 2nd Quarterly Report
- 3rd Quarterly Report
- 4th Quarterly Report
- Annual Report

How many naloxone trainings has your organization hosted so far? \*

5 for the quarter

How many total individuals has your organization trained through ARORP funding? \*

229

How many men have you trained through ARORP funding? \*

125

How many women have you trained through ARORP funding? \*

104

How many people have you trained through ARORP funding who do not identify as male or female (selecting "other" for gender)? \*

0

How many African American people have you trained through ARORP funding? \*

32

How many Caucasian people have you trained through ARORP funding? \*

177

How many Hispanic people have you trained through ARORP funding? \*

15

How many people have you trained who marked "other" for their race/ethnicity? \*

10

If you marked "other," please specify.

.....

How many people aged 0-17 years have you trained through ARORP funding? \*

0

How many people aged 18-25 years have you trained through ARORP funding? \*

116

How many people aged 26-45 years have you trained through ARORP funding? \*

32


How many people aged 46-64 years have you trained through ARORP funding? \*


55


How many people aged 65+ years have you trained through ARORP funding? \*

4

Please upload your data tracking sheet. \*

 Narcan report No...

 November 2023 (...)

 October 2023\_na...

(Optional) Please upload any photos you have of trainings.

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