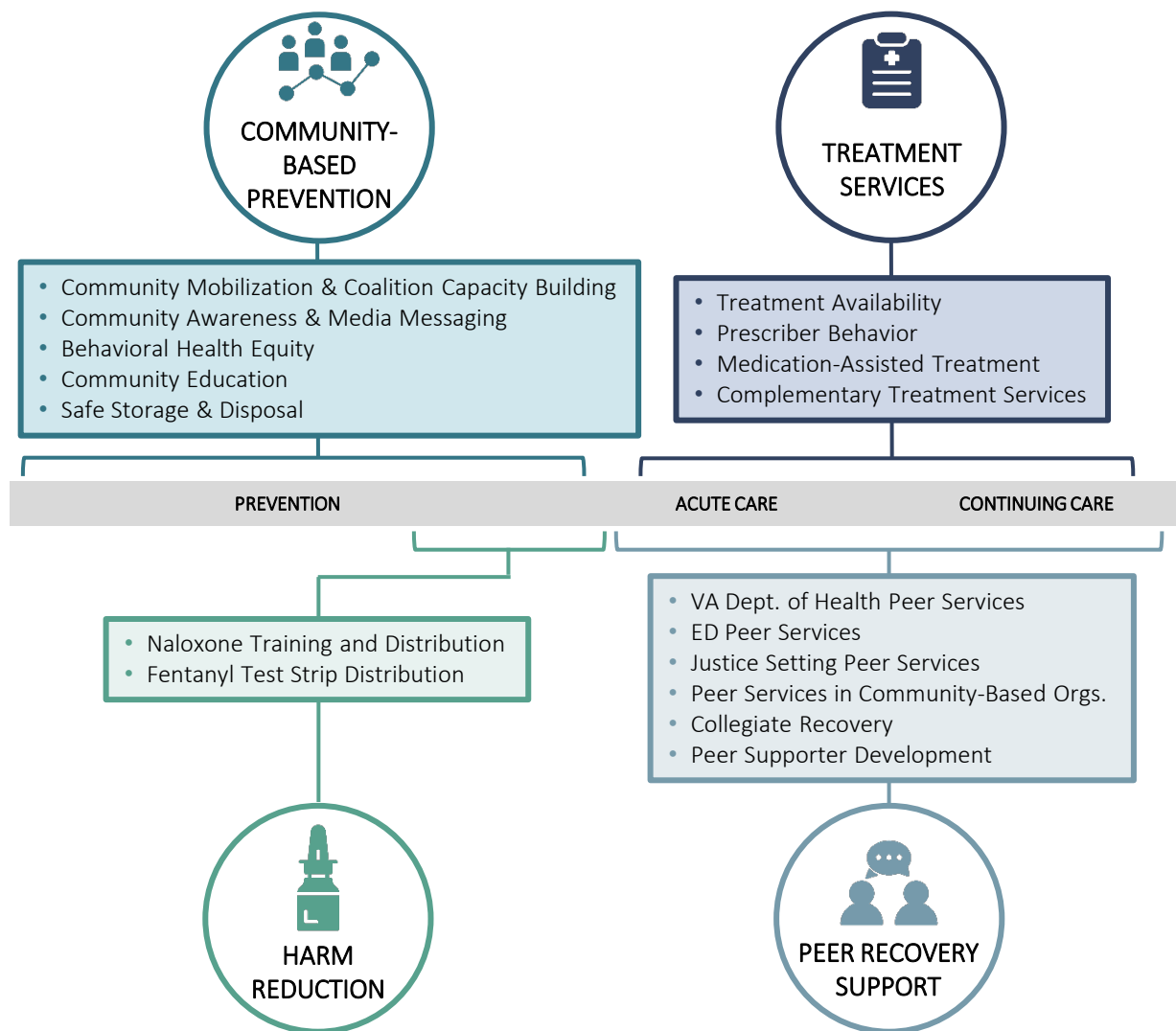


# Virginia State Opioid Response Grant 2021-22 Annual Report: Executive Summary

## About the State Opioid Response Grant

The State Opioid Response (SOR) grant is distributed by the Substance Abuse and Mental Health Services Administration to the Virginia Department of Behavioral Health and Developmental Services (DBHDS). Since 2018, the grant has been distributed to 40 Community Services Boards (CSBs) and other grant partners to address opioid and stimulant use across Virginia. OMNI Institute works with DBHDS as an evaluation partner and created this report to highlight results from the fourth year of the SOR grant (October 2021 through September 2022).

As shown in the visual below, DBHDS supports several state and local initiatives across the continuum of care to respond to needs and challenges related to opioid and stimulant use disorders and overdose deaths. This report is organized by the four core areas of the continuum of care which DBHDS is funding: community-based prevention, harm reduction, treatment services, and peer support services.





## Community Mobilization and Coalition Capacity Building

Coalitions remain an integral component of prevention efforts, leveraging collaborative partnerships to implement strategies and mobilize the community.



- 29** CSBs led from 1 to 5 SOR-funded coalitions.
- 44** SOR-funded coalitions were in place this grant year.
- 1,787** adults and youth participated in these coalitions.
- 23** was the median number of members per coalition, ranging from 9 to 611.

## Community Awareness and Media Messaging

CSBs and coalitions continue to diversify their methods for disseminating prevention messages to strategically reach their communities.



Public Broadcast & Display targeted

**13.1 million**

2,145,743 youth  
10,985,746 adults



Social Media/Websites reached

**2.87 million**

645,814 youth  
2,225,555 adults



Community Events reached

**258,726**

63,879 youth  
194,847 adults



Print Materials provided to

**2.36 million**

327,899 youth  
2,029,647 adults

\*Numbers above include duplicate individuals targeted by more than one media messaging campaign. Numbers reported by CSBs for media campaigns often include entire targeted catchment area populations.

Public Broadcast & Display	Social Media/Websites	Community Events	Print
<ul style="list-style-type: none"> <li>• PSAs</li> <li>• Billboards</li> <li>• Posters &amp; signs</li> <li>• Ads (radio, TV, targeted online, streaming)</li> <li>• Newspaper</li> <li>• Interviews (radio &amp; TV)</li> <li>• Podcasts</li> </ul>	<ul style="list-style-type: none"> <li>• Newsletters</li> <li>• Website visits</li> <li>• Social Media</li> <li>• Blogs</li> </ul>	<ul style="list-style-type: none"> <li>• Events &amp; Fairs (in person &amp; virtual)</li> <li>• Tabling</li> <li>• Presentations &amp; Townhalls</li> <li>• Lock &amp; Talk Presentations</li> </ul>	<ul style="list-style-type: none"> <li>• Mailers</li> <li>• Brochures</li> <li>• Flyers</li> <li>• Promotional Items</li> <li>• Resource Guides</li> <li>• Permanent Drug Dropbox Maps</li> <li>• Wellness Kits &amp; Bags</li> </ul>

## Community Educational Opportunities

This fiscal year, CSBs increased their community reach through various curriculum-based trainings and other educational opportunities.

### Curriculum-Based Trainings



provided to  
**9,657**  
individuals

### Prescriber and Patient Education



provided to  
**2,004**  
individuals

### Youth-Specific Education








provided to  
**1,430**  
individuals



## Safe Storage and Disposal

CSBs reduce community access to opioids by offering individuals safe storage items for use in the home as well as community disposal options to discard unused or expired medications. Over 58,500 supply reduction items were distributed to communities across Virginia through community events and partnerships.

				
<b>Drug Deactivation Packets</b>	<b>Prescription Drug Lockboxes</b>	<b>Smart Pill Bottles</b>	<b>Permanent Drug Drop Boxes</b>	<b>Drug Take Back Events</b>
42,149	8,962	7,464	1.6 million	12,000
distributed across	distributed across	distributed across	individuals with access across	or more individuals participated across
36	18	18	10	19
SOR-funded CSBs.	SOR-funded CSBs.	SOR-funded CSBs.	SOR-funded CSBs.	SOR-funded CSBs.

### LETHAL MEANS SAFETY TO PREVENT SUICIDE

CSBs utilize SOR funding to implement Lock and Talk strategies focused on suicide prevention that promote safe storage of lethal means and encourage individuals to discuss mental health.

 Of the 40 CSBs implementing Lock and Talk strategies, 19 utilized SOR funding to increase their impact.



13,369

Prescription Drug Lock Boxes Distributed



2,374

Cable Locks Distributed



2,070

Trigger Locks Distributed



46,357

Information Dissemination Impressions

## Behavioral Health Equity

DBHDS mini-grants expanded the capacity of CSBs to better reach and engage marginalized groups with prevention messaging.



Focused outreach on varied populations such as adults with developmental disabilities, non-English speakers, refugee communities, rural communities, and those recently released from prison.



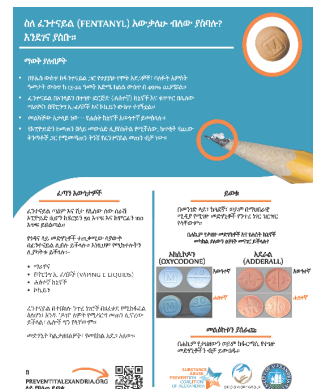
Conducted focus groups and listening sessions to better understand needs by hearing directly from those groups.



Educated the community on LGBTQ+ inclusiveness and created safe and affirming spaces to reach this population.



Reached Black and African American communities through media campaigns on behavioral health services developed in collaboration with community members.





Example of Alexandria CSB's opioid educational materials in Amharic.



## REVIVE! Training and Naloxone Distribution

REVIVE! is the statewide opioid overdose and naloxone education program for Virginia. REVIVE! training is offered to community members, health professionals, law enforcement, emergency medical services, and others interested in preventing and reducing opioid overdoses.

Since 2019, SOR funds have enabled nearly 19,000 individuals to gain the skills and knowledge to reverse an opioid overdose and save a life.

	Year 1	Year 2	Year 3	Year 4	Total
 Trainings held:	71	249	508	742	1,570
 People trained:	1,140	3,115	6,117	8,381	18,753

The number of REVIVE! trainings and people trained has increased each year of the SOR grant.



## Community Naloxone Distribution

Naloxone is a medication used to rapidly reverse a life-threatening opioid overdose. Anyone who has received a short training on the use of naloxone can carry or administer it to an individual experiencing an overdose. **More than 53,000 naloxone kits have been distributed during the four years of the SOR grant.** Kits were distributed to a variety of partners, including local health departments, CSBs, harm reduction sites, and law enforcement agencies.

## Fentanyl Test Strips

In 2021, SAMHSA authorized the use of SOR funds to purchase fentanyl test strips, which can be used to test drugs for the possible presence of fentanyl and prevent fentanyl overdoses.

Together with distribution of naloxone, fentanyl test strips are an important harm reduction strategy that is poised to grow in future years of the SOR grant and prevent fatal opioid overdoses.

16,778

fentanyl test strips **purchased by CSBs** in the last six months of the grant year.

9,478

fentanyl test strips **distributed by CSBs** in the last six months of the grant year.



### Fentanyl Test Strips with REVIVE! Trainings

“We partnered with Virginia Beach Peer Recovery to provide naloxone and fentanyl strips to participants who attended the in-person REVIVE! trainings. BHWPS is very excited about partnering with Peer Recovery to provide naloxone and fentanyl strips. Peer Recovery staff will now be present at all REVIVE! trainings to provide this service on a continual basis.”  
– Virginia Beach Department of Health



**7,865** individuals received SOR-funded treatment services in year 4.

## Medication-Assisted Treatment (MAT) and Complementary Services

SOR funding provides a wide array of services for thousands of clients each quarter. Throughout the fourth year of the grant, there was continued growth in the number of people receiving SOR-funded services, shown below by the number of people receiving these selected services each quarter.

### MAT Services

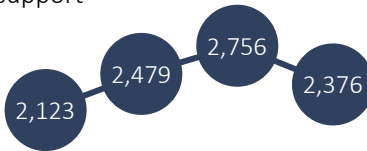
Prescription of medications such as buprenorphine for individuals with an OUD



Oct-Dec '21    Jan-Mar '22    Apr-Jun '22    Jul-Sep '22

### Counseling Services

Individual and group counseling, therapy, psychiatry, and crisis support



Oct-Dec '21    Jan-Mar '22    Apr-Jun '22    Jul-Sep '22

### Contingency Management

A therapeutic technique used in OUD and stimulant use disorder treatment to support adherence to treatment



Oct-Dec '21    Jan-Mar '22    Apr-Jun '22    Jul-Sep '22

## Justice-Based Services

Partnerships between CSBs and justice settings (local jails, recovery courts, and Department of Corrections [DOC] facilities) have been steadily developing over the course of the grant.

**18**

Recovery court, jail, or DOC facilities provided SOR-funded treatment services this year.

**146**

people received MAT services in a justice setting.

**403**

people received other treatment services in a justice setting. This includes counseling, case management, and other types of treatment services.



### On the "Fast Track" to Drug Court Graduation

"Since enrolling in drug court, [a female in the program] is now employed full-time, has her own transportation (does not need bus tickets she informed us), and is on the 'fast track' in drug court to graduate. She has obtained her own housing and now has a healthier support system in place."  
-Norfolk CSB

## Client Characteristics

The Government Performance and Results Act (GPRA) survey collects data from individuals receiving SOR-funded treatment services. **A total of 4,939 intake GPRA surveys were completed during the four years of the SOR grant, yielding the following information about participants.**



75% of those screened have co-occurring mental health and substance use disorders.



65% have experienced trauma at some point in their life.



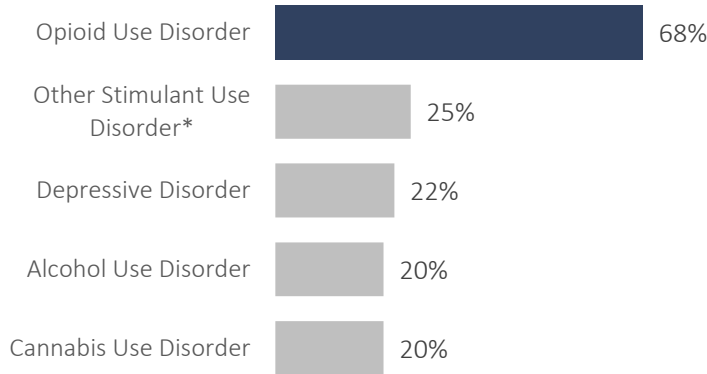
87% had been in treatment at least once before. 62% had been in treatment at least twice.



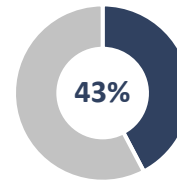
39% referred themselves to treatment and 29% were referred from a justice setting.



Opioid use disorders were the most frequently reported diagnoses.



\*Any stimulant use disorder besides cocaine-related disorders.

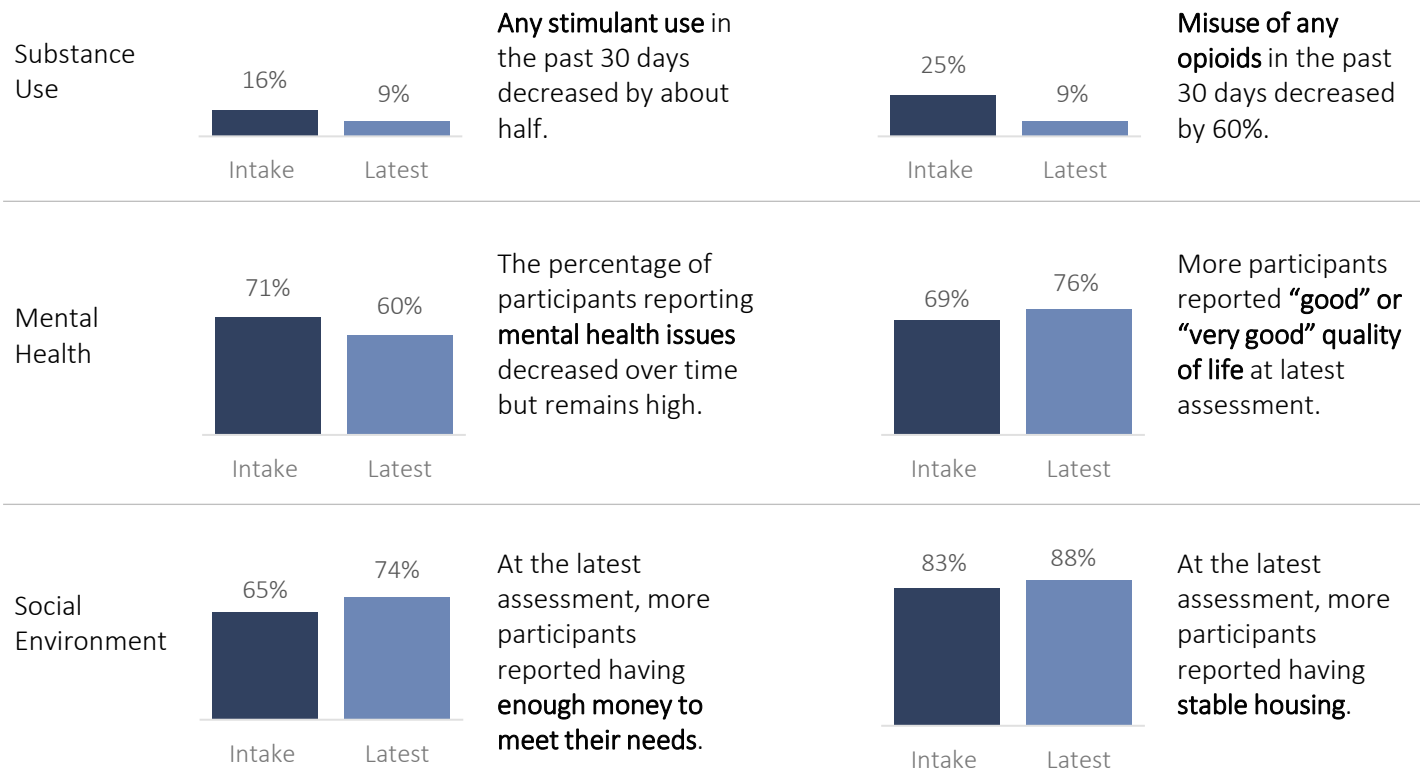


43% of participants (2,005 people) have **overdosed on drugs at least once** in their life.

**1,053** participants reported they have been **revived from an overdose** with naloxone.

## Client Outcomes

For all the following measures, there were statistically significant changes in the desirable direction from intake to latest available assessment. In addition to their statistical significance, these data show that **the SOR grant is meaningfully impacting the treatment and recovery journeys of the individuals served**. The data below reflect the 2,049 individuals from the three years of the grant who completed an intake and a second assessment.



Outcome domains can assess change for treatment participants on various aspects of health. Selected items from the GPRa assessment were grouped to create domains that represent outcome areas of everyday life: satisfaction and impacts of substance use. Analysis of these domains showed:



**Negative impacts of substance use on participants' lives decreased** significantly from intake to latest assessment.



**Life satisfaction increased** significantly from intake to latest assessment.



Peer supporters, also referred to as peers or Peer Recovery Specialists, provide recovery support based on their own lived experience of substance use and/or mental health disorder and recovery. SOR funding was provided in year 4 to a variety of agencies that are well positioned to provide recovery support services across Virginia that span the entirety of the continuum of care.

Across all partners and providers, year 4 of SOR funding provided recovery-focused support to

**30,633** individuals.

## Community-Based Organizations

**27,399**

individuals received SOR-funded recovery services through a community-based organization.

**88%**

of SOR-funded recovery services in year 4 were provided by peer supporters.

**125.5** (“5” is part-time positions)

organization-based peer supporters were funded by SOR in the last quarter of year 4 (July-September 2022).

**Peer supporters provided services to thousands of individuals in the organizations’ facilities and other settings, ensuring access to peer services in many formats and locations.**

*Average number served each quarter in the organizations’ facilities:*

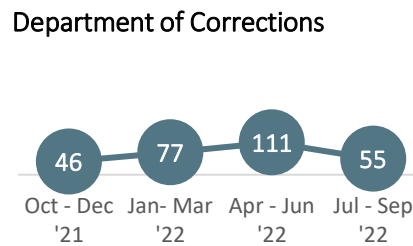
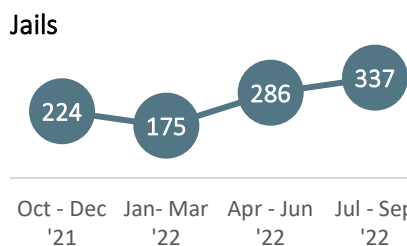
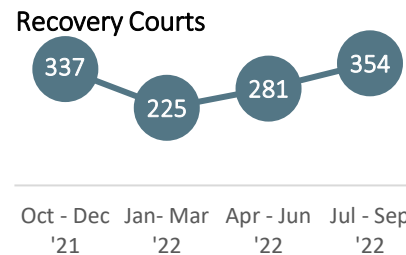
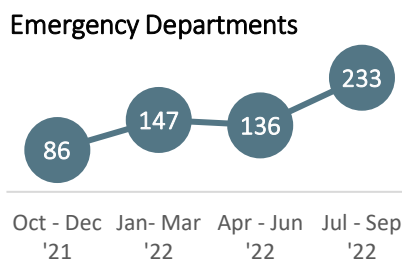
**Community outreach**  
3,458 individuals

**Warmline support**  
1,097 individuals

**Individual support**  
3,845 individuals

**Group support**  
3,655 individuals

*Number served each quarter in other settings:*



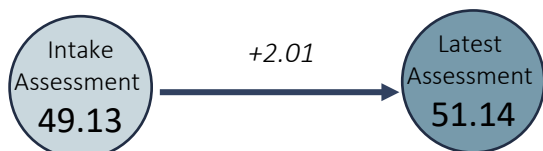
**Participants overwhelmingly agree that working with an organization-based peer supporter was helpful.**

**94%** of individuals working with a peer supporter found it **helpful with their recovery.**

**90%** of individuals working with a peer supporter found it **helpful in maintaining sobriety.**

In year 4, the BARC-10 (Brief Assessment of Recovery Capital) was implemented in multiple settings to better understand the impact of recovery and peer support services. Scores can range from 10 to 60. Scores of 47 or higher that are sustained over time indicate higher chances for long-term remission from substance use disorders.

**Individuals engaged in treatment and recovery services at a community-based organization showed significantly increased recovery capital from intake to latest assessment.**



Recovery capital domains on the BARC-10 that showed the largest increase in scores:

- Life Satisfaction**
- Fulfilling Activities**

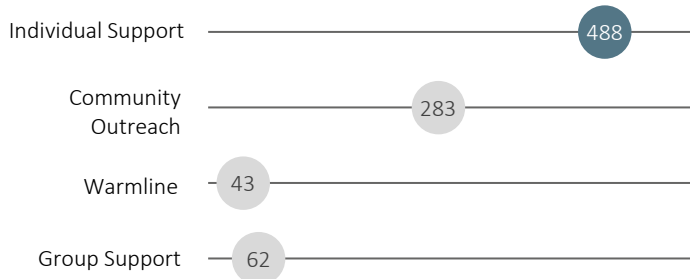


## Virginia Department of Health (VDH)

Throughout the year, **2,121 individuals** received SOR-funded peer support from six peers at five VDH sites.

Individual support was the most common service provided from July to September 2022, the quarter with the highest number of individuals served.

Number of individuals served across VDH sites, July - Sept 2022:



Individuals engaged in VDH-based peer recovery support also completed the BARC-10 assessment. **These participants also saw a statistically significant increase in total score between intake and their latest assessment.**



## Virginia Department of Corrections (DOC)

Through the SOR-funded DOC Peer Recovery Specialist (PRS) Initiative:

**20** PRS facilitated

**36** ongoing groups

**259** participants served across Virginia

The vast majority of DOC PRS group participants found the support helpful.

**97%** reported that working with a peer supporter was **helpful with recovery**.

**92%** reported that working with a peer supporter was **helpful with maintaining sobriety**.

## Collegiate Recovery

SOR-funded collegiate recovery programs (CRP) provided services to students and the surrounding communities. In total, the seven programs supported:



**212**

Student Members



**1,179**

Recovery-Focused  
One-on-Ones



**1,000**

Recovery Meetings



**205**

Campus Events

SOR-funded CRPs received consultation and technical assistance from the lead program, Rams in Recovery at Virginia Commonwealth University.

In total, Rams in Recovery provided **over 1,000 hours** of TA and consultation that supported:

- CRP staff training and capacity
- Financial support of CRPs
- Engagement of university administration

**“Our consultation experience has been exceptional.** Tom Bannard has made himself available to us in every way he possibly can, be it adding an extra meeting a month when we needed it, to visiting us in person, to co-facilitating our Recovery Ally trainings as we worked on presenting the trainings ourselves without his assistance.” - CRP Lead