

# UVA Leads Statewide, University-Based Coalition to Battle the Opioid Crisis

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school of medicine



The University of Virginia School of Medicine is leading a statewide effort to battle the opioid crisis and reduce the number of Virginians dying from it.

Opioids are the leading cause of accidental death in Virginia, where the rate of opioid-connected deaths has increased nearly five-fold since **2010**. More than 1,240 people statewide died of overdoses involving opioids in **2017**, according to the National Institute on Drug Abuse.

In response, UVA is spearheading a five-university consortium that will support the Virginia Department of Behavioral Health and Developmental Services and local community services boards

(CSBs). **David L. Driscoll, PhD, MPH**, the assistant dean of research and the director of the Office of Research at the UVA School of Medicine, is heading up the coalition. Participating universities include UVA, George Mason University, Old Dominion University, Virginia State University and Virginia Tech.

The university-based collaborative, known as the Virginia Higher Education Opioid Consortium (VHEOC), will bring together expertise in diverse areas, ranging from substance misuse, abuse and addiction to economics. “Virginia’s universities recognize that they have a role to play in helping communities across Virginia to build awareness for, and support prevention and treatment of, substance-use disorders including opioid addiction,” Driscoll said. “Given scarce resources, it is imperative that we work together to provide this support in an integrated and proactive manner. Our strategy is to intended to bolster the capacity of regional health and mental health systems by supporting the efforts of CSBs to deliver quality community services.”



The Virginia Higher Education Opioid Consortium is taking a collaborative approach to battling Virginia’s opioid crisis.

### **Empowering Community Action Against Opioid Abuse**

Community services boards are responsible for delivering community-based behavioral health services to every city and county in the state. By supporting CSBs, the VHEOC will empower local health agencies and leaders to determine the best approaches to prevent, treat and manage opioid-use disorders in their communities.

With resources and funding from the Substance Abuse and Mental Health Services Administration through the Department of Behavioral Health and Developmental Services, the VHEOC will leverage the capabilities and capacities of institutional members to assist the community services boards by providing comprehensive services in areas such as prevention, treatment and data collection and analysis.

Administrators from UVA will oversee the process, and a VHEOC support committee comprised of representatives from each university will facilitate development of proposals in response to requests from CSBs. The CSBs will select the proposals that best fit their needs, and UVA will administer the funds.

VHEOC also plans to hold regular meetings across the state to discuss the work and share lessons learned.

### **The Power of Collaboration**

The collaborative project is funded by \$2.5 million from the U.S. Department of Health and Human Services’ Substance Abuse and Mental Health Services Administration. The initial grant is for two

years, but the researchers are hopeful that their efforts will ultimately lead to a permanent resource for the commonwealth and its residents.

While Driscoll is leading the effort, he emphasizes the collaborative nature of the project. By leveraging the collective expertise of Virginia's largest public universities, they can accomplish far more together than they could individually, he believes. "We see a role for our institutions, working either independently or as part of team, in supporting state and local partners," Driscoll said. "We can provide expertise in data analytics, neuroscience, addiction medicine, economics and comparative effectiveness, workforce development, grant writing, program evaluation and community engagement, just to name a few."

The new model could have far-reaching usefulness that extends beyond the opioid epidemic, Driscoll said. "I think this has a real opportunity not only to help maximize the potential impact of opioid-response programs but also to develop a new collaborative model by which our public universities can support state programs related to other public health outcomes of concern."

For a list of contacts at the participating institutions, visit the [UVA Health Newsroom](#).

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