

Ford County ROSC FY27 Community Survey

The purpose of this survey is to measure public opinion on issues related to recovery. The information collected will be used to identify areas for improvement in our community. Your responses are confidential so please answer the questions honestly and to the best of your ability. Thank you for completing this survey.

Key Definitions.

Substance use disorder: Substance use disorder (SUD) is a complex condition in which there is uncontrolled use of a substance despite harmful consequences

Recovery: The process of improved physical, psychological, and social well-being and health after having suffered from a substance use disorder.

Harm Reduction: Policies, programs and practices that aim to reduce the harms associated with the use of alcohol or other drugs.

Narcan®: A lifesaving medication that reverses the effects of an opioid overdose.

Medication Assisted Recovery (MAR): The use of medications to treat substance use disorders e.g., methadone or buprenorphine to treat opioid use disorder.

1. People who use drugs deserve respect.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

2. People with a mental illness deserve respect.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

3. Medication Assisted Recovery-MAR (which is the use of medications to treat substance use disorders e.g., methadone or buprenorphine to treat opioid use disorder) is an effective treatment for substance use disorders.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

- 4. It is difficult to find healthcare providers who offer Medication Assisted Recovery-MAR (which is the use of medications to treat substance use disorders e.g., methadone or buprenorphine to treat opioid use disorder) in my community.**
 1. Strongly Disagree
 2. Disagree
 3. Neither agree nor Disagree/Neutral
 4. Agree
 5. Strongly Agree

- 5. Access to naloxone (which is a harm reduction service that utilizes a life-saving medication to reverse opioid overdoses) reduces the risks caused by drug use.**
 1. Strongly Disagree
 2. Disagree
 3. Neither agree nor Disagree/Neutral
 4. Agree
 5. Strongly Agree

- 6. Access to Syringe Services Programs (which is a harm reduction service that provides sterile syringes, safe disposal of syringes and injection equipment, linkage to treatment, and other supportive services to people who use drugs) reduces the risks caused by drug use.**
 1. Strongly Disagree
 2. Disagree
 3. Neither agree nor Disagree/Neutral
 4. Agree
 5. Strongly Agree

- 7. It is difficult to find harm reduction services in my community.**
 1. Strongly Disagree
 2. Disagree
 3. Neither agree nor Disagree/Neutral
 4. Agree
 5. Strongly Agree

- 8. It is difficult to find mental health treatment services in my community.**
 1. Strongly Disagree
 2. Disagree
 3. Neither agree nor Disagree/Neutral
 4. Agree
 5. Strongly Agree

- 9. It is difficult to find substance-use treatment services in my community.**
 1. Strongly Disagree
 2. Disagree
 3. Neither agree nor Disagree/Neutral
 4. Agree
 5. Strongly Agree

10. We should increase government funding on treatment options for mental health challenges.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

11. We should increase government funding on treatment options for substance use disorders.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

12. Everyone in my community can get help for mental health regardless of income level, insurance status, race, ethnicity, primary language, disabilities, gender identity, sexual orientation, or citizenship status.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

13. Everyone in my community can get help for substance use regardless of income level, insurance status, race, ethnicity, primary language, disabilities, gender identity, sexual orientation, or citizenship status.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

14. I know how to administer Narcan® (naloxone) to reverse an opioid overdose.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

15. There is a stigma (negative judgement or shame) in my community about people who have a substance use disorder.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

16. People struggle with substance use because they are weak or lack self-control.

1. Strongly Disagree
2. Disagree
3. Neither agree nor Disagree/Neutral
4. Agree
5. Strongly Agree

17. Which of the following trainings or presentations would you be most interested in attending? (Select one)

1. Supporting a Loved One in Recovery
2. Understanding Recovery and Reducing Stigma
3. Naloxone/Narcan Training
4. Voices of Recovery: Hearing from People with Lived Experience
5. Other (please specify)

18. Have you heard of Ford County Recovery Oriented Systems of Care (ROSC) Council?

1. Yes, I have heard of Ford County ROSC
2. No, I have not heard of Ford County ROSC

19. If yes, how did you hear about us? (Select all that apply)

1. Facebook
2. YouTube
3. Community flyers
 - i. Which location?
4. Community events
 - i. Which events?
5. Word of mouth
6. Drug Court
7. Other

20. What is your city/town and zip code?

21. What is your age?

1. Under 18
2. 18-24
3. 25-34
4. 35-44
5. 45-54
6. 55-64
7. 65 and over

22. What is your income level?

1. Prefer not to say
2. Under \$24,999
3. \$25,000-\$49,999
4. \$50,000-\$99,999
5. \$100,000-and over

23. What is your ethnicity?

1. Hispanic or Latino
2. Non-Hispanic

24. What is your race?

1. African American/Black
2. Asian
3. Caucasian/White
4. Native American
5. Pacific Islander
6. Two or more races

25. What is your gender?

1. Male
2. Female
3. Transgender Male
4. Transgender Female
5. Non-binary
6. Prefer not to say

26. What is your primary language?

1. English
2. Spanish
3. Mandarin
4. French
5. Arabic
6. Other (specify)

If you would like to put your name for a gift card drawing, please fill out the information below. Otherwise, the following information is **NOT** required. Please note that names/addresses will only be used for gift card drawing purposes. Thank you!

27. Name (First/Last)

28. Address where gift card can be mailed to