



**Community Behavior Assessment in Relation to Opioid Use Disorder and Opioid Related Overdoses
Baseline Survey of the Community**

The following survey will help the Lackawanna Opioid Coalition understand the type and amount of stigma currently residing in the attitudes and behaviors of members in our community. Your answers from this survey will be kept confidential. The answers will only be reported as a group and will indicate the type of training and education that will best reduce present stigma relating to opioid use disorder and overdoses amongst the community

A. Background

A.1 Please indicate the date of survey:

____ / ____ / ____
MM DD YYYY

A.2 Please indicate your age:

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75+

A.3 Please indicate your gender

- Male
- Female
- Non-binary/third gender
- Prefer to self-describe:
- Prefer not to answer

A.4 Please indicate your race:

- American Indian or Alaskan Native
- Asian/Pacific Islander
- Black/African American
- Hispanic
- White/Caucasian
- Other

A.5 Please indicate your highest completed level of education:

- Some High School
- High school or GED
- Some College
- Associate's Degree
- Bachelor's Degree
- Master's Degree
- Doctorate Degree

A.6 Please indicate if you currently have or previously had a substance use disorder:

Yes No

A.7 Please indicate if someone you know currently has or previously had a substance use disorder:

Yes No

A.8 Please indicate your occupation: [Click here to enter text.](#)

A.9 Please indicate your zip code of residence: [Click here to enter text.](#)

B. Glossary

Administer: to provide or apply¹

Medication Assisted Treatment (MAT): Treatment for opioid use disorder combining the use of medications (methadone, buprenorphine, or naltrexone) with counseling and behavioral therapies²

Naloxone: is a medication approved by the Food and Drug Administration (FDA) to prevent overdose by opioids such as heroin, morphine, and oxycodone. It blocks opioid receptor sites, reversing the toxic effects of the overdose³

Overdose: Injury to the body that happens when a drug is taken in excessive amounts. An overdose can be fatal or non-fatal⁴

Prescription Opioid: medications that can be used to treat moderate-to-severe pain and are often prescribed following surgery or injury, or for health conditions such as cancer⁵

Substance Use Disorder: disorder caused by the recurrent use of alcohol and/or drugs causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home⁶

Viable: capable of working, functioning, or developing adequately⁷

¹ <https://www.merriam-webster.com/dictionary/administer>

² <https://www.cdc.gov/drugoverdose/opioids/index.html>

³ <https://www.samhsa.gov/medication-assisted-treatment/treatment/naloxone>

⁴ <https://www.cdc.gov/drugoverdose/opioids/index.html>

⁵ <https://www.cdc.gov/drugoverdose/opioids/prescribed.html>

⁶ <https://www.samhsa.gov/disorders/substance-use>

⁷ <https://www.merriam-webster.com/dictionary/viable>

C. Attitudes in the Community

Please indicate the degree to which you agree with the following statements

Attitude	1 Strongly Disagree	2 Disagree	3 Uncertain	4 Agree	5 Strongly Agree
C.1 If a person is addicted to a prescription opioid they can stop using it if they really want to.					
C.2 An individual with a substance use disorder is irresponsible.					
C.3 Increasing access and utilization of naloxone is a good solution to the current opioid epidemic.					
C.4 Increasing access and utilization of naloxone provides individuals with a substance use disorder an excuse to continue use.					
C.5 Substance use disorder treatment isn't very effective					
C.6 Not everyone can become addicted to pain medications.					
C.7 An individual with a substance use disorder is selfish.					
C.8 I would not willingly live in the same neighborhood as an individual with a substance use disorder.					
C.9 I would willingly administer naloxone in an overdose situation.					
C.10 Naloxone should be administered to every individual who is experiencing an overdose.					
C.11 Substance use disorders only affect individuals with low incomes.					
C.12 An overdose related to prescription opioids is different than an overdose related to heroin.					
C.13 I can easily spot an individual in my community with a substance use disorder.					
C.14 A substance use disorder is not a real illness.					

Attitude	1 Strongly Disagree	2 Disagree	3 Uncertain	4 Agree	5 Strongly Agree
B.15 I would be embarrassed to tell people that someone close to me has a substance use disorder.					
C.16 Medication-assisted treatment (i.e. Methadone, Suboxone, Vivitrol) is a viable form of treatment for substance use disorder.					
C.17 If I thought my friend had a substance use disorder I would stay away from them.					
C.18 Individuals with a substance use disorder are likely to be dangerous.					
C.19 An individual with a substance use disorder should have the same right to a job as anyone else.					
C.20 It is important for individuals with a substance use disorder to be part of a supportive community.					
C.21 Substance use disorders only affect adults.					
C. 22 It is more important to spend money on treating conditions like diabetes and heart disease instead of substance use disorders.					
C.23 Abstinence based therapy is the only successful form of treatment for substance use disorders.					
C.24 Using words like 'addict', 'junkie', and 'abuser' are harmless. No one gets hurt.					
C.25 There should be a limit to how many times an individual can receive naloxone for an overdose.					
C.26 Individuals who receive rehabilitation or treatment will use or overdose again.					