**Edgar County**

**Recovery Oriented Systems of Care (ROSC)**

**Purpose**: Your input is invaluable in ensuring that individuals and families impacted by substance use have access to the support they need. Please answer honestly; all responses are confidential and will only be used to improve the resources available in our community. Thank you for helping make Edgar County a stronger, healthier place for everyone.

1. How do you typically receive information about local resources, events, or services in your community? (**Mark the top two answers**.)

**Social media**

**Word-of-mouth**

**Radio/Podcast**

**Newspaper**

**Flyers / Posters**

**Community Organizations or outreach**

**Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Do you currently live in a household with more than one family?

**Yes No Prefer not to answer**

1. Do you believe that all individuals in your community have access to the support they need for substance use recovery, regardless of factors such as 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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Are you aware of where to access support for the following services?

**Food assistance- Yes or No**

**Affordable Housing- Yes or No**

**Family support services- Yes or No**

**Domestic Violence Services- Yes or No**

**Services for survivors of Sexual assault or human trafficking- Yes or No**

**Legal Assistance- Yes or No**

**Physical Health services - Yes or No**

1. Do you feel you have stable employment?

**Yes No Prefer not to answer**

1. Do you access to reliable transportation?

**Yes No Prefer not to answer**

1. Do you believe that Job training and employment assistance would benefit you and your family?

**Yes No Prefer not to answer**

1. what type of therapy or support do you feel would be most helpful for someone working through substance use challenges”

**One-on-one (Individual) therapy**

**Group therapy or support groups**

**Virtual/online therapy or support**

**I don’t know**

**Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_**

1. In your opinion, what are the most important supports for someone new in recovery? (**Rank from 1-6 with 1 being the most important.)**

**\_\_\_ Access to stable housing**

**\_\_\_Peer or group support**

**\_\_\_Employment Opportunities**

**\_\_\_Professional counseling or therapy**

**\_\_\_Reliable transportation**

**\_\_\_ I don’t know**

**\_\_\_ Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Would you like to get involved with the Edgar County Recovery Oriented Systems of Care (ROSC) Council? A ROSC is a coordinated network of community-based services and supports that is person-centered and builds on the strengths and resilience of individuals, families, and communities to experience recovery and improved health, wellness

**Yes No I don’t know**

1. If you answered Yes, to Question 10, please provide your contact information below so we can follow up with you:

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Are you aware of where to find recovery support resources in your community? (e.g. 12 step meetings, Celebrate Recovery, support groups, peer-to-peer support, ROSC)

**Yes No I prefer not to answer**

|  |
| --- |
| **If yes, please specify** |

1. People who use drugs deserve respect.

**1-Strongly Disagree**

**2-Disagree**

**3-Neither agree nor Disagree/Neutral**

**4-Agree**

**5-Strongly Agree**

1. People with a mental illness deserve respect.

**1-Strongly Disagree**

**2-Disagree**

**3-Neither agree nor Disagree/Neutral**

**4-Agree**

**5-Strongly Agree**

1. Medication Assisted Recovery-MAR is an effective treatment for substance use disorders.

(MAR is the use of medications to treat substance use disorders e.g., methadone or buprenorphine to treat opioid use disorder)

**1-Strongly Disagree**

**2-Disagree**

**3-Neither agree nor Disagree/Neutral**

**4-Agree**

**5-Strongly Agree**

1. 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**

1. Harm reduction services like Narcan and syringe service programs reduce the risks of drug use.

**1-Strongly Disagree**

**2-Disagree**

**3-Neither agree nor Disagree/Neutral**

**4-Agree**

**5-Strongly Agree**

1. It is difficult to find harm reduction services like Narcan and syringe service programs in my community.

**1-Strongly Disagree**

**2-Disagree**

**3-Neither agree nor Disagree/Neutral**

**4-Agree**

**5-Strongly Agree**

1. It is difficult to find mental health and substance use treatment services in my community.

**1-Strongly Disagree**

**2-Disagree**

**3-Neither agree nor Disagree/Neutral**

**4-Agree**

**5-Strongly Agree**

1. We should increase government funding on treatment options for mental health and substance use disorders.

**1-Strongly Disagree**

**2-Disagree**

**3-Neither agree nor Disagree/Neutral**

**4-Agree**

**5-Strongly Agree**

1. 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**

1. 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**

**Demographic Information:**

**Location:**

* County:
* Zip Code:

|  |  |
| --- | --- |
| **Age:**   * Under 18 * 18-24 * 25-34 * 35-44 * 45-54 * 55-64 * 65 and over   **Income level:**   * Prefer not to say * Under $24,999 * $25,000-$49,999 * $50,000-$99,999 * $100,000-and over   **Gender:**   * Prefer not to self-identify * Male * Female * Gender Fluid * Nonbinary   **Comments or Questions:** | **Ethnicity:**   * Hispanic or Latino * Non-Hispanic   **Race:**   * African American/Black * Asian * Caucasian/White * Native American * Pacific Islander * Two or more races   **Primary Language:**   * English * Spanish * Mandarin * French * Arabic * Other (specify) |