WILL/GRUNDY R.O.S.C. COMMUNITY SURVEY RESULTS

WWW.HLMRECOVERY.COM

HEARTLIFE MINISTRIES

RECOVERY 180

CONTENTS

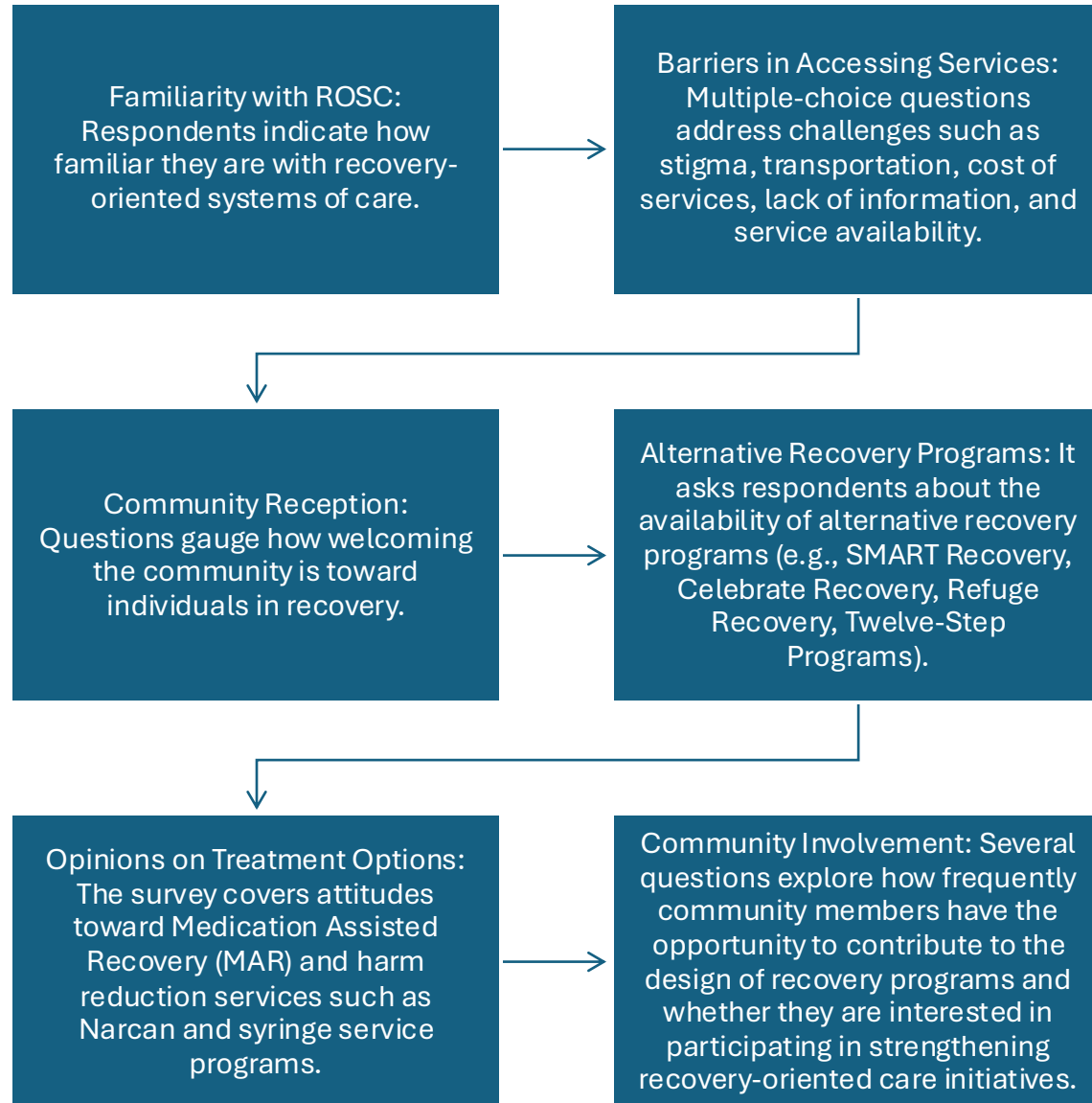**Background Info**

Survey Respondent Info

Results & Analysis

Background on this survey

This survey is designed to gather comprehensive feedback on the current state of recovery-oriented services in the Will/Grundy community.

Also to pinpoint challenges such as access barriers and stigma and explore ways to improve participation and available resources.

Finally, collected information will help inform strategies to enhance recovery services and support systems in the Will/Grundy community

Survey Focus Area

Familiarity with ROSC: Respondents indicate how familiar they are with recovery-oriented systems of care.

Barriers in Accessing Services: Multiple-choice questions address challenges such as stigma, transportation, cost of services, lack of information, and service availability.

Community Reception: Questions gauge how welcoming the community is toward individuals in recovery.

Alternative Recovery Programs: It asks respondents about the availability of alternative recovery programs (e.g., SMART Recovery, Celebrate Recovery, Refuge Recovery, Twelve-Step Programs).

Opinions on Treatment Options: The survey covers attitudes toward Medication Assisted Recovery (MAR) and harm reduction services such as Narcan and syringe service programs.

Community Involvement: Several questions explore how frequently community members have the opportunity to contribute to the design of recovery programs and whether they are interested in participating in strengthening recovery-oriented care initiatives.

Summary of key findings

Summary of findings

Knowledge of ROSC

Familiarity Levels Vary:

Some respondents are **not familiar at all** while others are **somewhat** or **very familiar** with recovery-oriented systems of care (ROSC)

Barriers to Accessing Services
➢**Transportation**
➢**Cost of Services**
➢**Lack of Information**
➢**Stigma**
➢**Service Availability**

Specific Notes:
In some responses, only **lack of information** or a subset of these barriers was selected, indicating differences in perceived challenges by participates

Continue.........

Community Reception Toward Individuals in Recovery

Perceptions Differ:
- Some communities are described as **very welcoming** while others are **neutral**, or even **not welcoming**.

Involvement Opportunities:
- Many respondents noted that community members have **rare or occasional opportunities** to contribute to the design of recovery programs.

Alternative Recovery Programs & Treatment Approaches

Alternative Program Access:
- Opinions on the availability of alternative recovery programs (e.g., SMART Recovery, Celebrate Recovery, Refuge Recovery, etc.) were mixed—responses ranged from **agreeing** to **disagreeing** or being **neutral**.

Medication Assisted Recovery (MAR):
- There is a general **agreement** that MAR is an effective treatment for substance use disorders, though there is variation regarding the difficulty in finding healthcare providers offering MAR.

Harm Reduction Services:
- Many respondents agreed that harm reduction services (like Narcan and syringe service programs) reduce risks, yet there were mixed views on the ease of finding these services in the community.

Continue.........

Attitudes Toward People in Recovery

→ **Respect for Individuals:**

- Participants largely **strongly agree** that people who use drugs and people with mental illnesses deserve respect.

→ **Government Funding and Equity in Access:**

- There is strong support for **increasing government funding** for mental health and substance use disorder treatment options.

→ - Opinions vary on whether everyone in the community can get help regardless of income, insurance status, or demographic factors; many responses are **neutral** or show some **disagreement** on full equity.

Additional Comments and Resource Needs

Key Additional Suggestions/Needs Include:

More Education: Increased community education about available recovery services.

Enhanced Transportation: Additional transportation for accessing recovery services.

Expanded Treatment Options: Requests for more rehab facilities, better housing solutions, or additional community support like "livingrooms" and peer support.

Personal Perspectives: Some respondents mentioned lack of direct experience with individuals in recovery, impacting their ability to comment on the effectiveness of current systems.

Summary Table of Key Categories and Findings

Category	Key Findings
Knowledge of ROSC	Ranges from not familiar to very familiar
Barriers to Access	Transportation, cost, lack of information, stigma, service availability
Community Reception	Varied responses: very welcoming to not welcoming; limited involvement opportunities
Alternative Recovery Programs & MAR	Mixed perceptions on program availability; MAR seen as effective but provider availability varies
Attitudes & Respect	Strong agreement on respect for people in recovery; support for more government funding
Additional Needs	More education, improved transportation, additional recovery facilities and community supports

This **overview** reflects the diversity in opinions and experiences across the surveyed communities, highlighting both strengths (e.g., respect for individuals and support for funding) and challenges (e.g., inconsistent access to services and community involvement).

Common characteristic define by most participants across segments:

Common characteristic define by most participants across segments:

Strong Pro-Recovery Attitudes & Values

High Respect for People in Recovery:
- A vast majority of responses show that respondents either **strongly agree** or **agree** that people who use drugs and those with a mental illness deserve respect.

Advocacy for Improved Recovery Services:
- Many feel strongly that there should be **increased government funding** on treatment and support services.
- Respondents gave high importance to alternative recovery programs beyond traditional Twelve-Step models.

Belief in the Efficacy of Medication Assisted Recovery (MAR) and Harm Reduction:
- There is widespread acknowledgment that MAR is an effective treatment, and that harm reduction services (e.g., Narcan, syringe programs) effectively reduce drug-related risks.

Engagement & Community Involvement

Willingness to Participate:
- A large share of respondents expressed a **strong interest** or at least openness ("Yes" or "Unsure") in participating in initiatives to strengthen recovery-oriented care.

Desire for Community Input:
- Several responses indicate that respondents care if community members are given **opportunities to contribute** to the design of recovery programs—even if that participation is occasional or rare in current practice.

Continue..........

Demographic & Geographic Clusters

While responses came from a diverse group, several trends are noticeable:

Characteristic	Common Responses
Location	Many respondents are from **Will County** and adjacent counties (e.g., Grundy, Cook, Westchester)
Age Range	A wide span is represented (from **young adults (18-24)** to **older adults (65+)**), though a noticeable cluster appears in the **25-64** age range.
Income Level	A range is observed (from "Prefer not to say" up through **$25,000-$49,999** and higher), with many respondents in the lower to moderate income tiers.
Ethnicity & Race	A mix of **Non-Hispanic Caucasian/White**, **African American/Black**, and **Hispanic or Latino** respondents; several noted their primary language is **English** (with some exceptions, e.g., Spanish).
Familiarity with ROSC	While views on recovery are strong, familiarity with recovery-oriented systems of care (ROSC) varies from **Very familiar** to **Somewhat familiar**. This suggests room for greater participate education and engagement.

Recognition of Barriers

Commonly Cited Barriers:

- **Transportation**
- **Cost of Services**
- **Lack of Information**
- **Stigma**
- **Limited:Service Availability**

These barriers point to customer segments that are not only aware of challenges in accessing recovery services but are passionate about addressing them

Continue........

Conclusion:

Our most valuable participant segments are those **advocates for recovery-oriented care** who:

Share strong pro-recovery values, advocating for respect and better funding/support.

Are **willing to contribute** to community initiatives, even when current engagement opportunities are inconsistent.

Recognize specific barriers (such as transportation, cost, and misinformation) and are eager to see more accessible, alternative recovery programs.
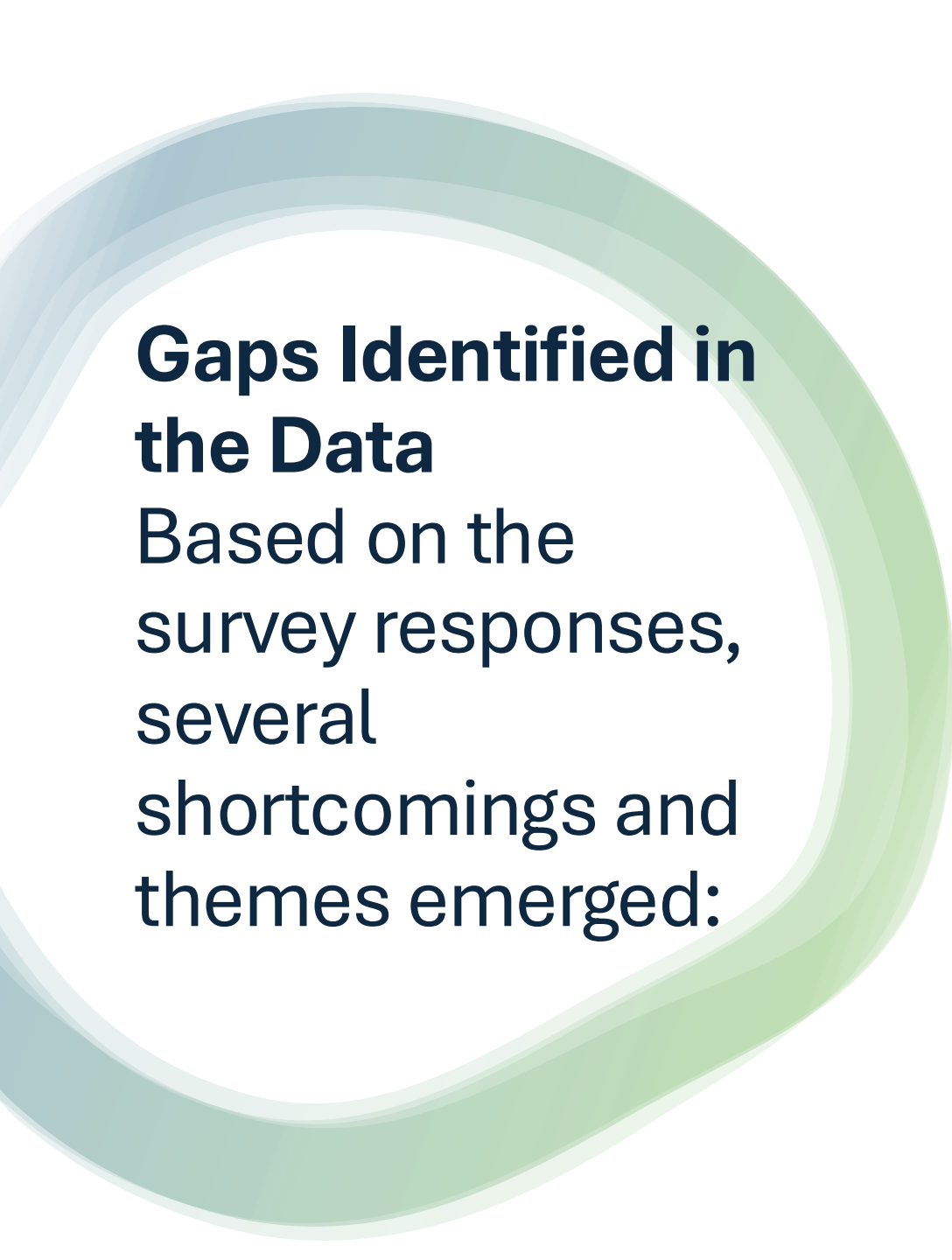
Generally come from a **diverse demographic background**, with a noticeable concentration in regional areas like Will County and similar jurisdictions.

These insights help shape strategies focusing on further **educational outreach**, **service expansion**, and **community engagement opportunities** tailored to these passionate and invested participant segments.

This analysis begins by summarizing the gaps identified in the survey data, followed by proposed solutions aimed at addressing these issues

Gaps Identified in the Data

Based on the survey responses, several shortcomings and themes emerged:

- **Lack of Information:**
  Many respondents mentioned that individuals in recovery face challenges due to a lack of information about available services and programs.

- **Transportation Barriers:**
  Multiple responses indicate that transportation is a significant barrier for accessing recovery services in the community.

- **Cost of Services:**
  The high cost of treatment and recovery support services was frequently cited as a barrier.

- **Service Availability:**
  Respondents noted that recovery programs and mental health/substance use treatment facilities are often insufficient in their communities.

- **Stigma:**
  Social stigma can prevent individuals in recovery from seeking support or help.

- **Limited Community Contribution:**
  The survey showed that opportunities for community members to contribute to the design of recovery programs are infrequent or rarely available.

- **Missing or Vague Additional Resource Needs:**
  Several respondents answered "Unsure," "Not sure," or left the field blank when asked for additional resources, suggesting an information gap on what specific services are most needed.

Proposed Solutions to Address These Gaps
The following solutions have been identified to bridge the gaps in the data and ultimately improve recovery-oriented systems of care:

Gap	Proposed Solution
Lack of Information	- **Develop a centralized information hub:** Create an online portal or app that lists all recovery-related services. - **Enhanced outreach campaigns:** Use community workshops, social media, and local news to increase awareness.
Transportation Barriers	- **Transportation support programs:** Implement shuttle or ride-share services specific to recovery appointments. - **Mobile recovery services:** Develop mobile clinics that can provide on-site care and counseling.
Cost of Services	- **Subsidized treatment programs:** Increase funding or introduce voucher systems to help cover treatment costs. - **Sliding scale fee systems:** Implement payment models where fees are adjusted based on income.
Service Availability	- **Expand recovery centers:** Invest in building additional facilities for mental health and substance use treatment. - **Increase government funding:** Advocate for enhanced financial support to expand services.
Stigma	- **Public awareness campaigns:** Launch initiatives that educate the community on the realities of recovery and reduce stigma. - **Professional training:** Offer sensitivity and stigma-reduction training for service providers and community leaders.
Limited Community Contribution Opportunities	- **Structured community engagement:** Establish regular forums, advisory boards, or town-hall meetings for community input. - **Enhanced participatory design:** Involve individuals with lived experiences in planning recovery programs.
Unclear Additional Resource Needs	- **Conduct follow-up studies:** Implement more detailed surveys or focus groups to pinpoint specific additional needs. - **Pilot new programs:** Test programs (e.g., mentorship or specialized rehabilitation) on a small scale and evaluate their impact before a wider rollout.

Key Takeaways

Increase
- Increase communication and transparency: Greater visibility of available services can help mitigate the impact of the information gap.

Improve
- Improve access and affordability: Addressing transportation and cost issues can make recovery services more accessible.

Expand
- Expand services and reduce stigma: Additional facilities and targeted public education may help remove barriers and encourage participation.

Engage
- Engage community members: Creating mechanisms for community contribution can ensure that services align with the actual needs of the target population.

Follow
- Follow-up research: Clarifying uncertainties and gaps in responses through additional research can help fine-tune these solutions.

These **proposed actions** are aimed at enhancing recovery-oriented systems by addressing the key barriers identified in the survey data.

This is a summary of the main similarities and differences in the participants' responses.

Similarities

Consensus on Respect

- **Most respondents agreed or strongly agreed** that people who use drugs and those with mental illness deserve respect. This appears to be one of the few points with widespread agreement.

Common Barriers Identified

- Several respondents mentioned barriers such as **transportation, cost of services, lack of information, stigma, and service availability** when accessing recovery services. Even though not every participant chose every barrier, these themes consistently reoccurred.

Views on Recovery Programs' Alternatives

- A number of participants acknowledged the availability of alternative recovery programs (e.g., SMART Recovery, Celebrate Recovery, Refuge Recovery, etc.) to the traditional Twelve-Step Programs, although levels of agreement varied.

Government Funding Support

- Many respondents showed support (ranging from agree to strongly agree) for increasing government funding for treatment options for both mental health and substance use disorders.

Differences

Familiarity with Recovery Systems (ROSC)
- **Varied familiarity levels:**
  - Some respondents reported being **"Not familiar at all"** with recovery-oriented systems of care, while others mentioned being **"Somewhat familiar"** or **"Very familiar."**

Perception of Community Welcoming
- **Mixed responses:**
  - Answers ranged from **"Very welcoming"** to **"Somewhat welcoming," "Neutral,"** and in some cases even **"Not welcoming."**

Opportunities to Contribute
- **Frequency of involvement differed:**
  - Some noted that community members have opportunities **"Regularly"** or **"Occasionally"** to contribute to recovery program design, whereas others observed that such opportunities occur **"Rarely"** or even **"Never."**

Opinions on Medication Assisted Recovery (MAR)
- **Divergent views on its effectiveness and availability:**
  - While several respondents agreed or strongly agreed that MAR is effective, others were neutral or had varied opinions on how easy it is to find healthcare providers offering MAR in their community.

Availability and Accessibility of Services
- **Discrepancies in perceptions:**
  - Some participants mentioned that service availability (e.g., harm reduction services and mental health treatment) was not an issue, while others found it **difficult to find** these services, highlighting local differences or personal experiences.

Additional Resources and Program Suggestions
- **Wide range of suggestions:**
  - Participants offered diverse recommendations—from **cost transparency and accessible inpatient programs** to **community education, mentorship, and non-traditional ways of disseminating information**—showing different priorities based on personal or community needs.

Conclusion:
While there is a broad **common ground** among respondents regarding the **importance of respectful treatment** and recognition of **barriers such as cost and lack of information**, there is noticeable **variation in familiarity with recovery systems, perceptions of community support, and opinions about the availability and effectiveness of specific services**.

This suggests that while some issues in recovery-oriented systems of care are widely recognized, experiences and perspectives can differ significantly based on personal background and local community context.

Aspect	Similarities	Differences
Familiarity with ROSC	Common topic across responses	Levels ranged from Not familiar to Somewhat/Very familiar
Barriers to Access	Common themes: transportation, cost, lack of info, stigma	Some list only one or two barriers; emphasis varies by personal experience
Community Welcoming	Recovery communities are generally seen as welcoming	Responses varied: Very welcoming, Somewhat welcoming, Neutral, Not welcoming
Participation in Program Design	Many note some opportunity	Frequency responses differ: Regularly, Occasionally, Rarely, Never
Respect for Affected Individuals	Broad agreement on respect for drug users and mentally ill	Minor variations in intensity (Agree vs. Strongly Agree)
Effectiveness of MAR	Discussion of MAR appears in nearly every response	Opinions range from agreement to neutrality, with varied perception of provider availability
Additional Resources	Desire for improved recovery services shared	Specific suggestions differ widely across respondents

This is a summary of the demographic and psychographic patterns identified within the participants poll based on survey responses.

Demographic Trends

Age Distribution:
- Respondents range from **18-24** up to **65 and over**.
- Many responses come from the **35-44**, **45-54**, and **55-64** age brackets.

Income Levels:
- There is a wide income range—from **under $24,999** to **$100,000 or more**.

Gender Identity:
- Respondents include **male, female, gender fluid**, as well as some who prefer not to self-identify.

Race and Ethnicity:
- The majority of respondents are **Non-Hispanic**.
- Racial identification includes **Caucasian/White, African American/Black, Hispanic or Latino, Two or more races, and Native American**.

Geographic Location:
- Many respondents live in or are connected to counties such as **Will, Cook, Grundy**—with a focus in the Chicago region.

A summary table for key demographics:

Aspect	Observed Trend
Age Range	18-24, 35-44, 45-54, 55-64 up to 65+
Income Levels	Under $24,999 to $100,000 or more
Gender	Male, Female, Gender Fluid, and some prefer not to self-identify
Race/Ethnicity	Predominantly Non-Hispanic with groups including Caucasian/White, African American/Black, Hispanic or Latino, Two or more races, and Native American
Location	Concentrated in counties around Chicago (Will, Cook, Grundy)

Psychographic Trends

Beliefs and Attitudes about Recovery:

- **High Value on Respect:** Many respondents **strongly agree** that people who use drugs and those with mental illness deserve respect.
- **Treatment Efficacy:** There is strong support for **Medication Assisted Recovery (MAR)** as an effective treatment option.
- **Government Support:** A significant number of respondents strongly agree that there should be increased government funding for both mental health and substance use treatment services.

Perceptions of Barriers:

- Commonly noted barriers include **Transportation, Cost of Services, Lack of Information, Stigma, and Service Availability**.
- Some respondents highlight difficulties in finding healthcare providers or services, especially those related to MAR and harm reduction services.

Community Engagement and Involvement:

- There is a mix of responses regarding the level of opportunity to contribute to recovery programs, with many indicating that community involvement is **rare or occasional**.
- When asked about participating in initiatives, responses vary between **yes, unsure, or no**, indicating that while some are eager, others remain hesitant.

Familiarity with Recovery-Oriented Systems:
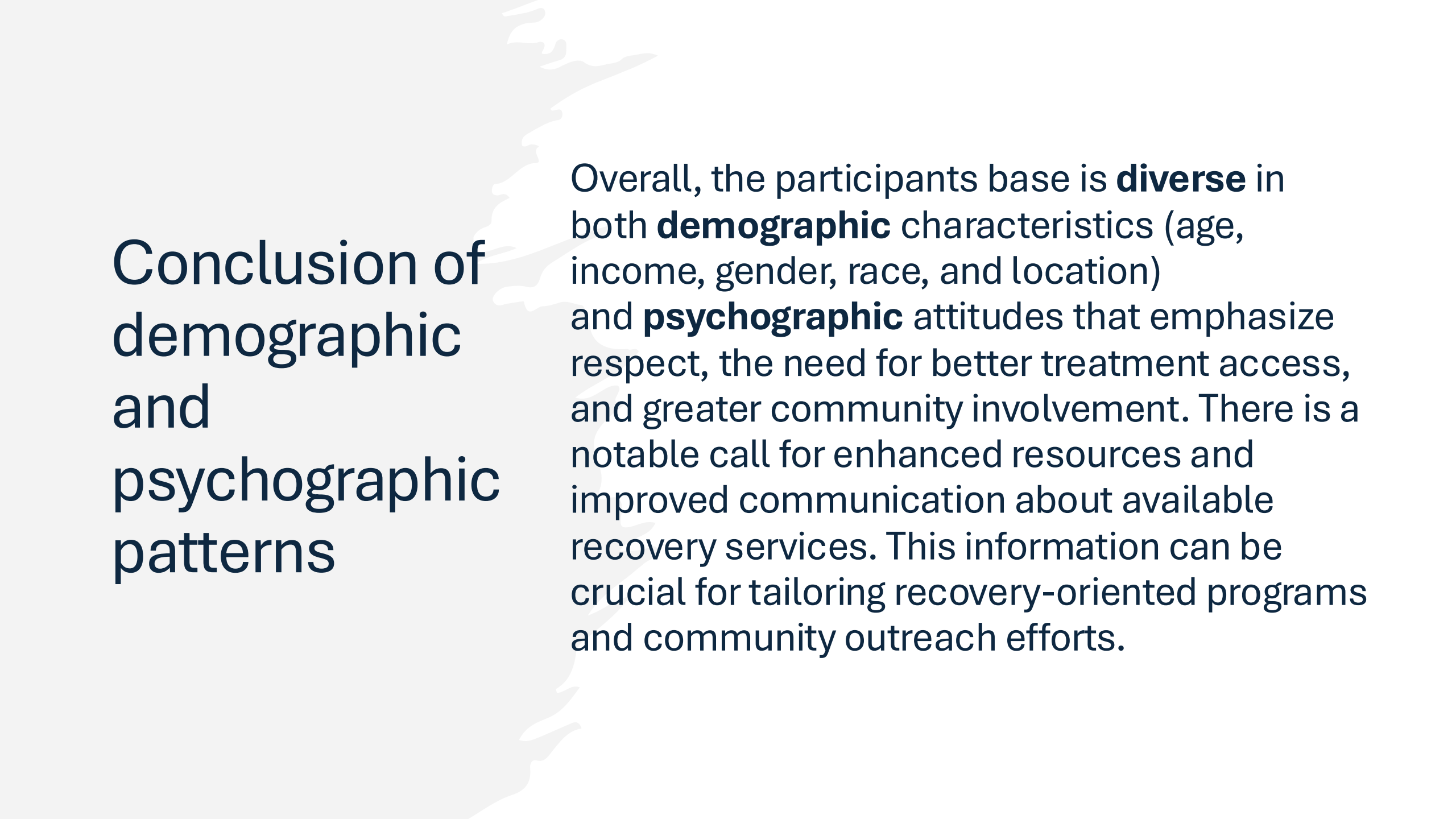
- Respondents show a range of familiarity—from **not familiar at all** to **very familiar**—suggesting diverse levels of awareness and understanding regarding recovery-oriented systems of care.

Additional Needs and Resource Requests:

- Several responses include requests for **transportation services, improved information sharing or referrals (especially for communities of color and LGBTQ groups), child-care**, and other support measures.

A summary table for psychographic aspects

Aspect	Observed Trend
Attitude to Recovery	Strong belief in respect for those in recovery; support for MAR as a treatment method
Policy and Funding Support	Many respondents advocate for increased government funding for mental health and substance use disorder treatment
Barriers	Perceived barriers include Transportation, Cost, Lack of Information, Stigma, and limited Service Availability
Community Engagement	Mixed willingness to participate in recovery initiatives; opportunities for involvement are perceived as limited
Familiarity with ROSC	Wide range—from not at all familiar to very familiar—indicating variable exposure and understanding of recovery-oriented systems of care (ROSC)
Additional Support Requests	Requests for more targeted resources such as transportation support, child-care, and tailored information (especially for underserved communities)

Conclusion of demographic and psychographic patterns

Overall, the participants base is **diverse** in both **demographic** characteristics (age, income, gender, race, and location) and **psychographic** attitudes that emphasize respect, the need for better treatment access, and greater community involvement. There is a notable call for enhanced resources and improved communication about available recovery services. This information can be crucial for tailoring recovery-oriented programs and community outreach efforts.

Final analysis that highlights the main conclusions derived from the overall participant responses..

Overall Conclusions

Community Involvement and Program Design

- **Opportunities for Contribution:**
  - There is a **mixed picture** regarding community participation in structuring and planning recovery programs.
  - Responses ranged from "regularly" to "rarely," indicating that many perceive that opportunities to contribute are either inconsistent or infrequent.

- **Willingness to Get Involved:**
  - While many respondents expressed interest in participating in community initiatives to strengthen recovery care, several also stated uncertainty or "unsure" responses.

Government Funding and Support

- **Strong Support for Increased Funding:**
  - A large portion of the participants "strongly agree" or "agree" that increased government funding for mental health and substance use treatment is needed.
  - This consensus suggests that many see financial support and policy initiatives as essential to improving recovery services.

Additional Resources and Recommendations

- **Resource Needs:**
  - Beyond the primary barriers, participants requested other resources such as better transportation options, more affordable mental health services, enhanced coordination of care (especially after hospital discharge), and targeted programs for underserved populations (e.g., people of color, LGBTQ communities).

- **Suggestions for Service Improvement:**
  - Some respondents specifically mentioned the need for more recovery homes, sober living options, and non–12-Step programs to offer a more comprehensive range of recovery supports.

Respect for People in Recovery and Mental Illness

- **Strong consensus** across responses that people who use drugs and those with mental illness deserve respect.

- Many participants "strongly agree" or "agree" with statements affirming respect for affected individuals, implying a generally supportive attitude in the community.

Barriers to Accessing Recovery Services

- **Commonly Cited Barriers:**
  - **Transportation:** Multiple respondents noted transportation issues as a barrier.
  - **Cost of Services:** Financial constraints were frequently mentioned.
  - **Lack of Information:** Respondents reported inadequate or fragmented information regarding available services.
  - **Stigma:** Though not universal, stigma was also identified as an obstacle in some responses.
  - **Service Availability:** Some participants mentioned that services (including specialized recovery programs) are limited or hard to locate.

Views on Recovery-Oriented Services and Program Alternatives

- **Alternative Recovery Programs:**
  - Many agree that recovery is not limited to traditional Twelve-Step Programs. Options like SMART Recovery, Celebrate Recovery, and Refuge Recovery are acknowledged as valid alternatives.

- **Effectiveness of Medication Assisted Recovery (MAR):**
  - A significant number of respondents either "strongly agree" or "agree" that MAR is effective for treating substance use disorders.
  - However, responses also varied regarding the **availability** of providers offering MAR – with some participants reporting that finding such services is challenging, while others do not see this as a barrier.

Conclusion:

The participant responses suggest that while the community is generally supportive—especially in terms of respect for those in recovery—there are significant practical barriers limiting access to care. Enhanced funding, better information dissemination, increased community engagement in program design, and expanded recovery options are seen as critical areas for improvement.

Area	Main Conclusions
Respect and Stigma	High respect for individuals with substance use and mental health challenges; stigma remains a minor barrier.
Barriers to Access	Transportation, cost, lack of information, and limited-service availability are frequently cited barriers.
Recovery Program Alternatives	Recognition of alternative recovery programs alongside traditional Twelve-Step methods; MAR is viewed as effective.
Community Involvement	Opportunities to participate in program design are sporadic; interest is present, though not all are certain.
Funding	Clear demand for increased government funding for mental health and substance use treatments.
Additional Resources	Calls for more targeted resources including transportation, affordable services, and specialized support programs.

Survey Data Slides

Q1 Which County do you live?
Multiple Choice
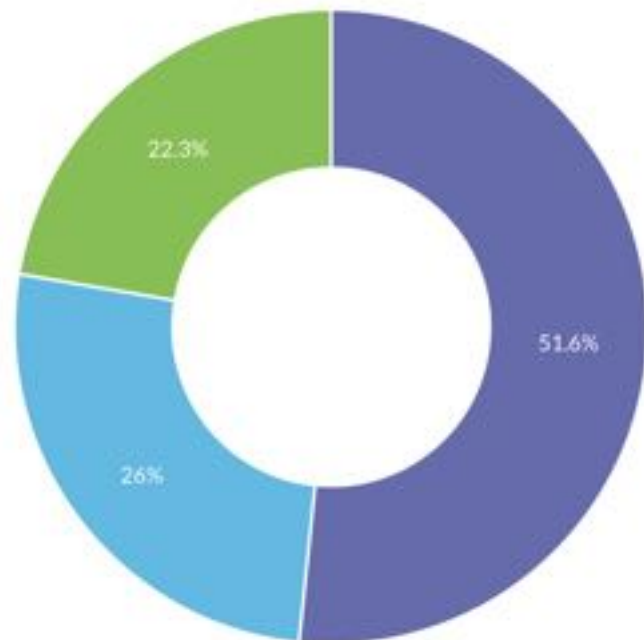
Choice		Total	
● Will County		111	
● Grundy County		56	
● Other		48	

51.6%

26%

22.3%

Unanswered
0

Answered
215

See all answers ›

Q2 How familiar are you with recovery-oriented systems of care (ROSC)?
Multiple Choice
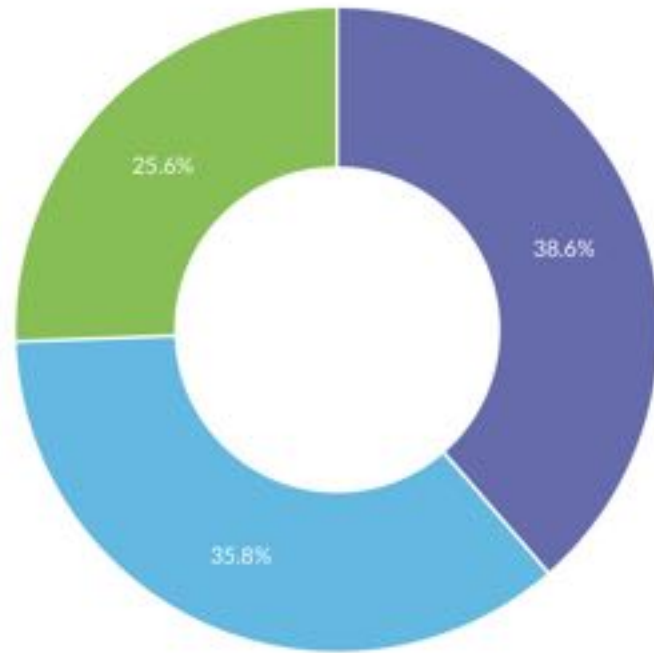
Choice		Total	
● Very familiar		83	
● Somewhat familiar		77	
● Not familiar at all		55	

38.6%
25.6%
35.8%

Unanswered
0

Answered
215

See all answers >

Q3 What barriers do individuals in recovery face when accessing services in your community? (Check all that apply)

Multiple Choice
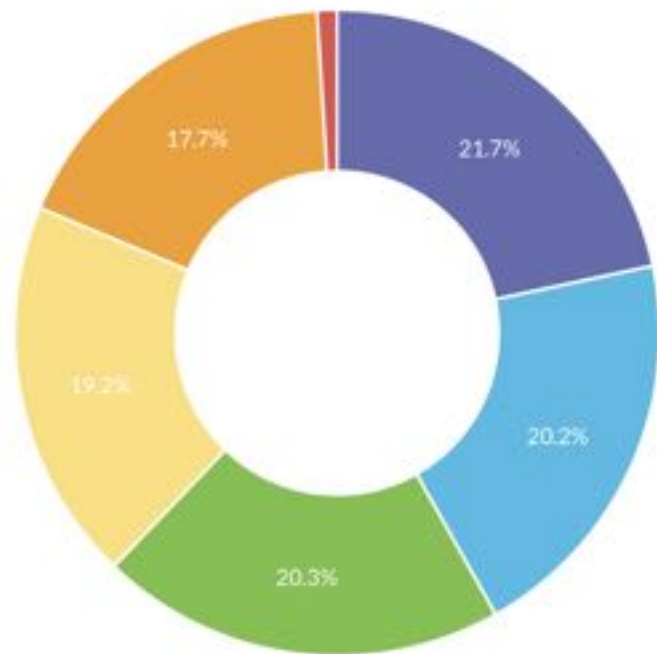
Choice		Total	
● Transportation		130	
● Cost of Services		121	
● Lack of Information		122	
● Stigma		115	
● Service Availability		106	
● __archived__		6	

Chart percentages: 21.7%, 20.2%, 20.3%, 19.2%, 17.7%

Unanswered
0

Answered
215

See all answers >

Q4 How welcoming is your community toward individuals in recovery?
Multiple Choice
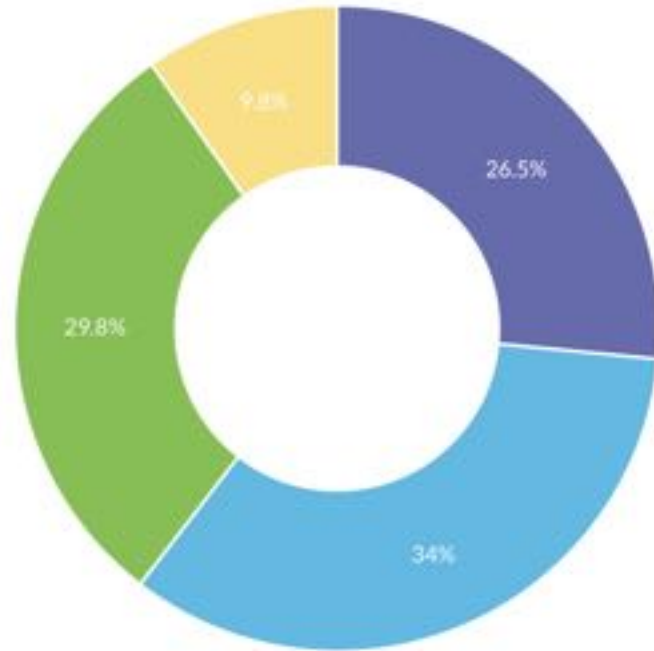
Choice	:	Total	:
● Very welcoming		57	
● Somewhat welcoming		73	
● Neutral		64	
● Not welcoming		21	

26.5%
34%
29.8%
9.8%

Unanswered
0

Answered
215

See all answers >

Q5 Individuals in recovery can find alternative recovery programs like SMART Recovery, Celebrate Recovery, Refuge Recovery, etc. in addition to Twelve-Step Programs.

Multiple Choice
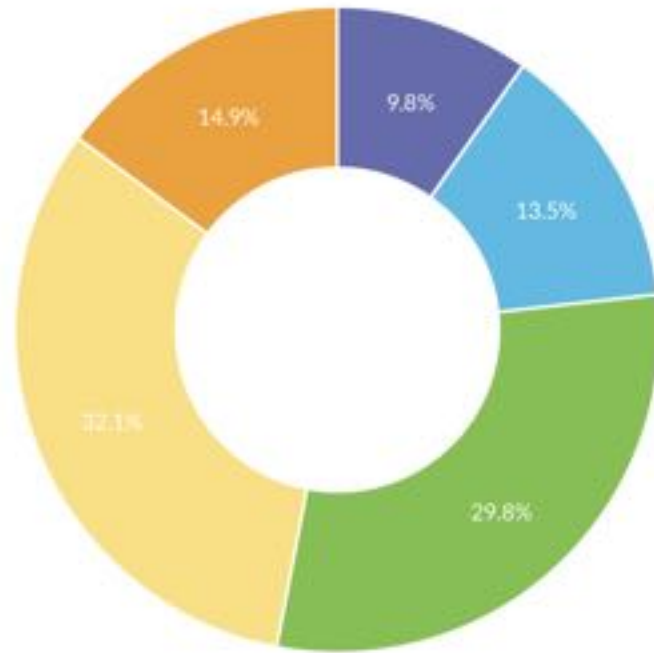
Choice	Total
Strongly Disagree	21
Disagree	29
Neither agree nor Disagree	64
Agree	69
Strongly Agree	32

Pie chart percentages: 9.8%, 13.5%, 29.8%, 32.1%, 14.9%

Unanswered
0

Answered
215

See all answers >

Q6 How often do community members have opportunities to contribute to the design of recovery programs?
Multiple Choice

25.6%

7.9%

32.6%

34%
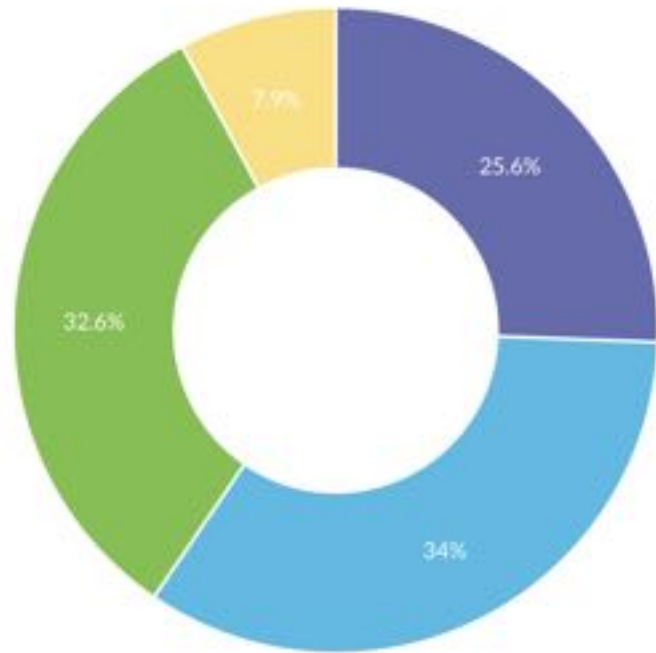
Choice		Total	
● Regularly		55	
● Occasionally		73	
● Rarely		70	
● Never		17	

Unanswered
0

Answered
215

See all answers >

Q7 Would you be interested in participating in initiatives to strengthen recovery-oriented care in your community?
Multiple Choice
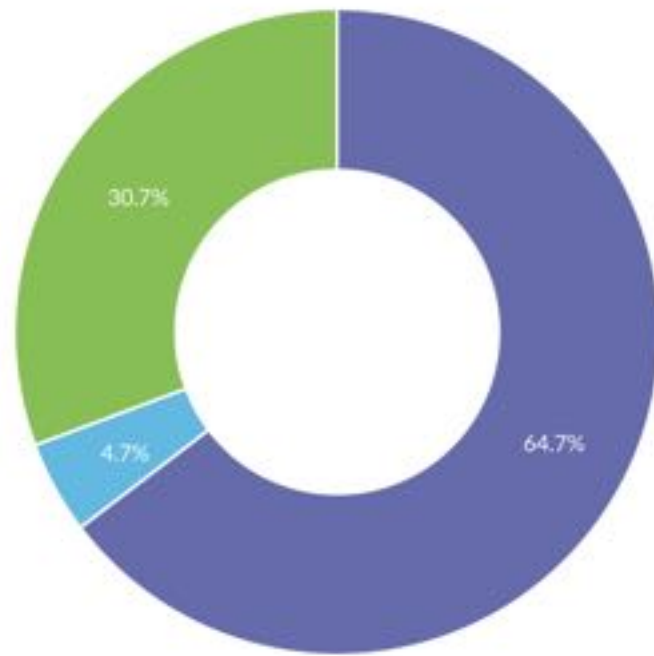
Choice		Total	
● Yes		139	
● No		10	
● Unsure		66	

64.7%

30.7%

4.7%

Unanswered
0

Answered
215

See all answers >

Q8 People who use drugs deserve respect.
Multiple Choice
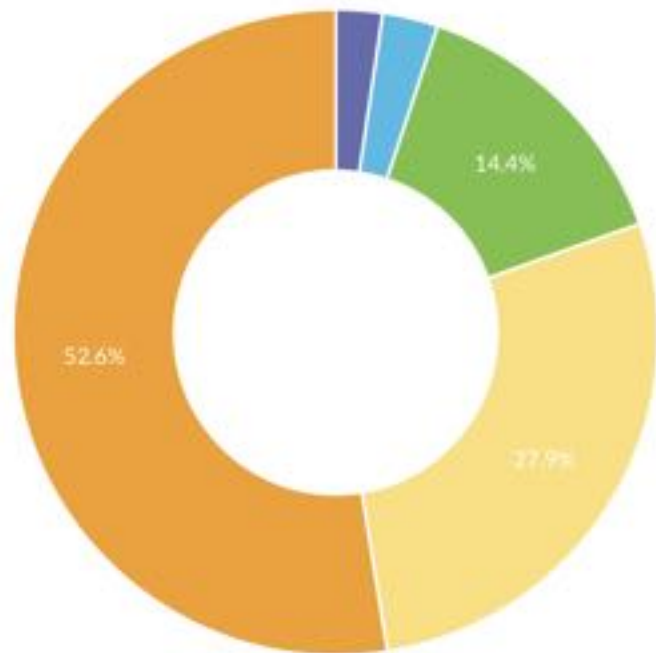
Choice		Total	
● Strongly Disagree		5	
● Disagree		6	
● Neither agree nor Disagree/Neutral		31	
● Agree		60	
● Strongly Agree		113	

14.4%

52.6%

27.7%

Unanswered
0

Answered
215

See all answers >

Q9 People with a mental illness deserve respect.
Multiple Choice
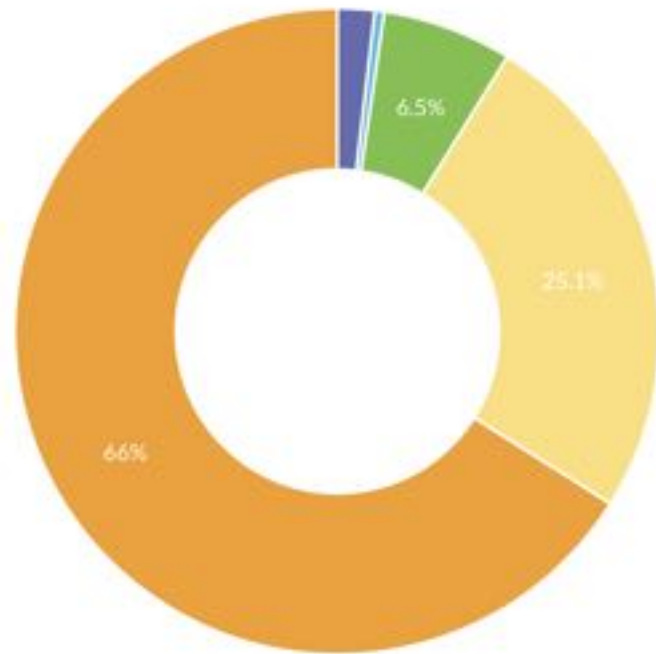
Choice	Total
● Strongly Disagree	4
● Disagree	1
● Neither agree nor Disagree/Neutral	14
● Agree	54
● Strongly Agree	142

Unanswered
0

Answered
215

See all answers >

Q10 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...

Multiple Choice
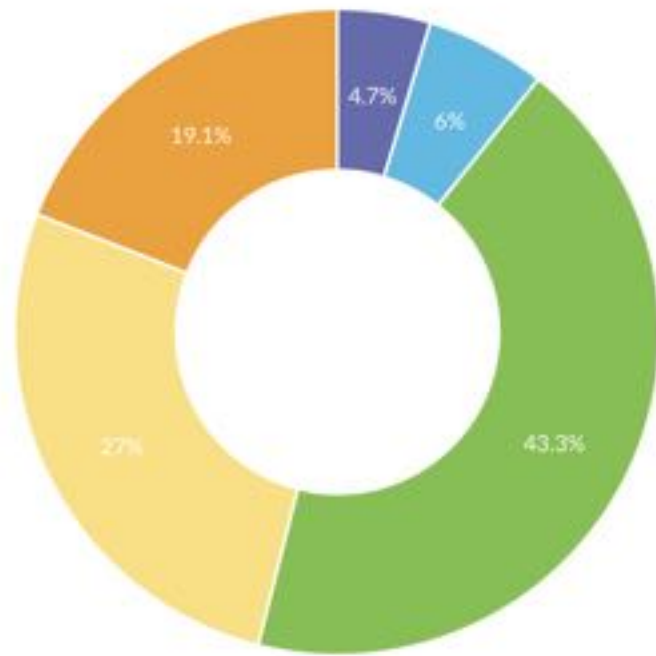
Choice		Total	
● Strongly Disagree		10	
● Disagree		13	
● Neither agree nor Disagree/Neutral		93	
● Agree		58	
● Strongly Agree		41	

Pie chart values: 4.7%, 6%, 43.3%, 27%, 19.1%

Unanswered	Answered		See all answers >
0	215		

Q11 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...

Multiple Choice
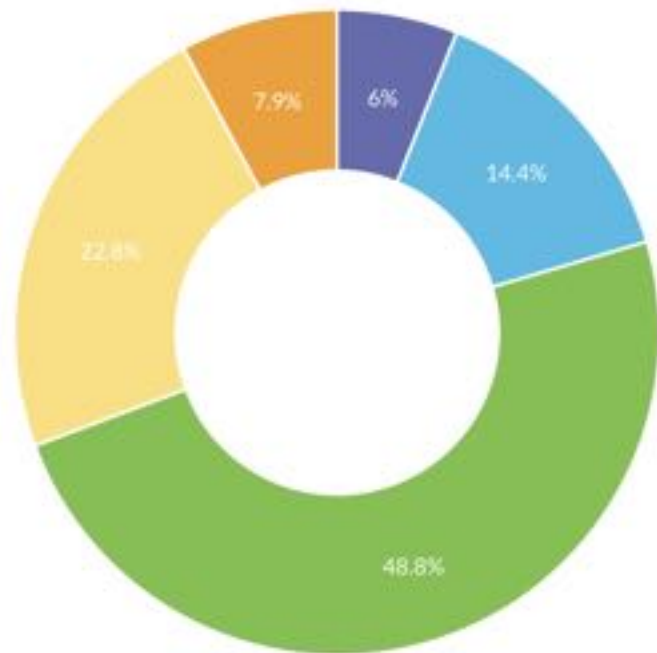
Choice	Total
Strongly Disagree	13
Disagree	31
Neither agree nor Disagree/Neutral	105
Agree	49
Strongly Agree	17

6%

14.4%

7.9%

22.8%

48.8%

Unanswered
0

Answered
215

See all answers >

Q12 Harm reduction services like Narcan and syringe service programs reduce the risks of drug use.
Multiple Choice
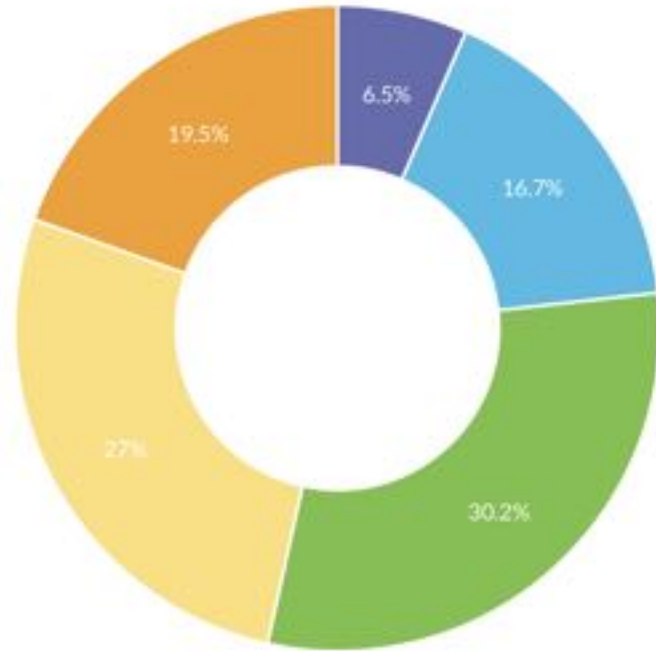
Choice		Total	
● Strongly Disagree		14	
● Disagree		36	
● Neither agree nor Disagree/Neutral		65	
● Agree		58	
● Strongly Agree		42	

6.5%
16.7%
19.5%
30.2%
27%

Unanswered	Answered	See all answers >
0	215	

Q13 It is difficult to find harm-reduction services like Narcan and syringe service programs in my community.

Multiple Choice
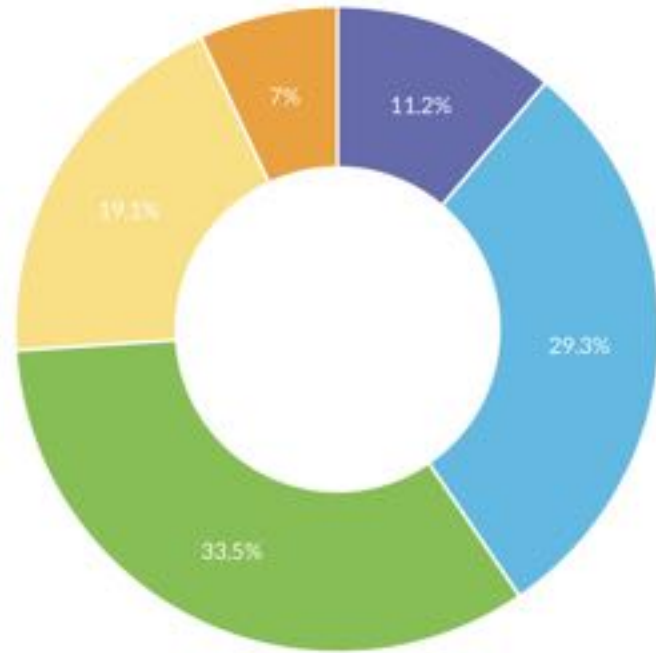
Choice		Total	
● Strongly Disagree		24	
● Disagree		63	
● Neither agree nor Disagree/Neutral		72	
● Agree		41	
● Strongly Agree		15	

Chart percentages: 11.2%, 29.3%, 33.5%, 19.1%, 7%

Unanswered
0

Answered
215

See all answers >

Q14 It is difficult to find mental health and substance use treatment services in my community.
Multiple Choice
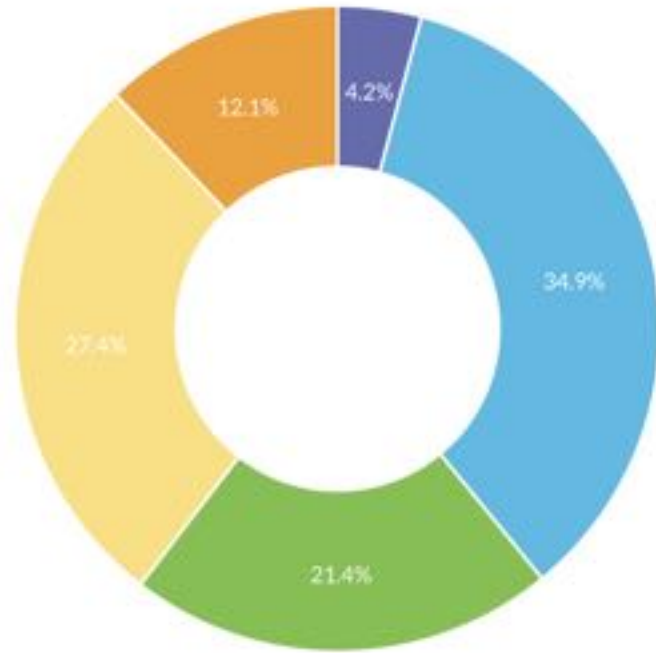
Choice		Total	
● Strongly Disagree		9	
● Disagree		75	
● Neither agree nor Disagree/Neutral		46	
● Agree		59	
● Strongly Agree		26	

Chart segments: 4.2%, 34.9%, 21.4%, 27.4%, 12.1%

Unanswered
0

Answered
215

See all answers >

Q15 We should increase government funding on treatment options for mental health and substance use disorders.

Multiple Choice
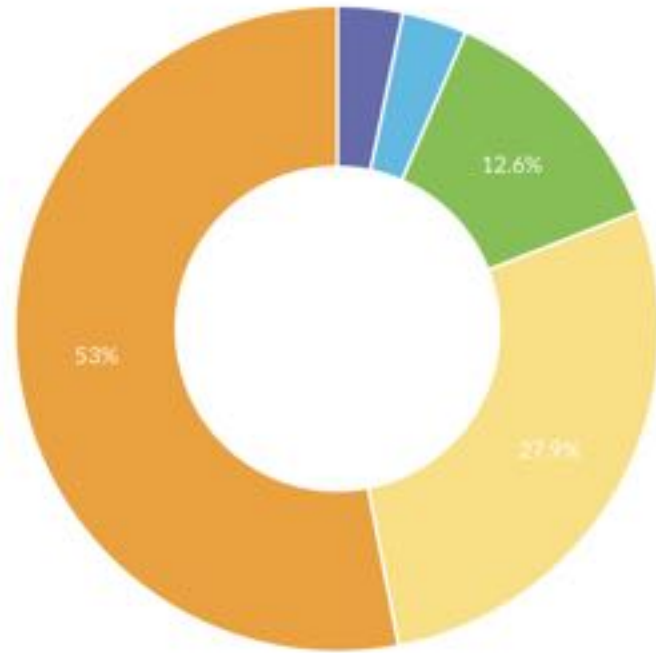
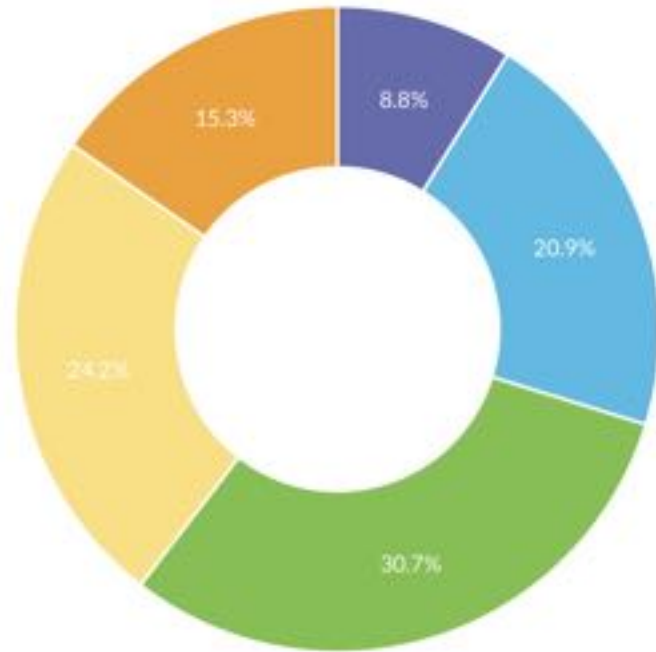| Choice	Total
Strongly Disagree	7
Disagree	7
Neither agree nor Disagree/Neutral	27
Agree	60
Strongly Agree	114

53%

12.6%

27.9%

Unanswered 0

Answered 215

See all answers >

Q17 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...

Multiple Choice
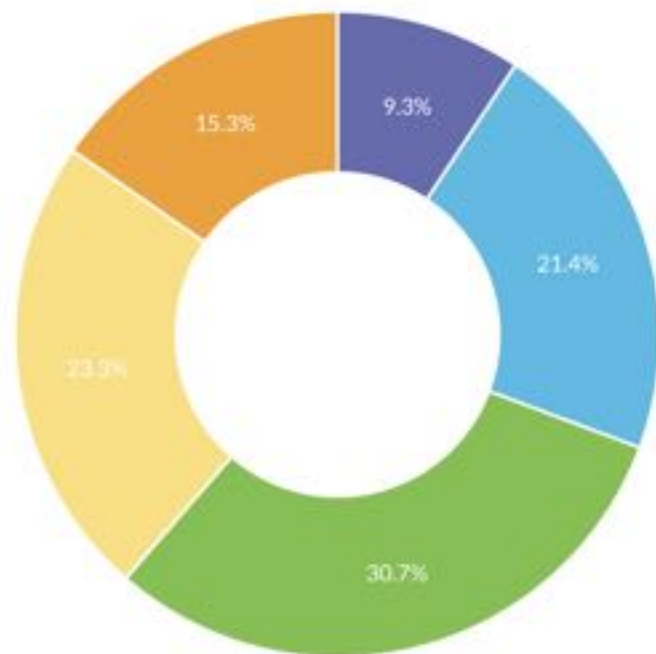
Choice	:	Total	:
● Strongly Disagree		19	
● Disagree		45	
● Neither agree nor Disagree/Neutral		66	
● Agree		52	
● Strongly Agree		33	

Pie chart segments: 8.8%, 20.9%, 30.7%, 24.2%, 15.3%

Unanswered
0

Answered
215

See all answers >

Q20 Age:
Multiple Choice
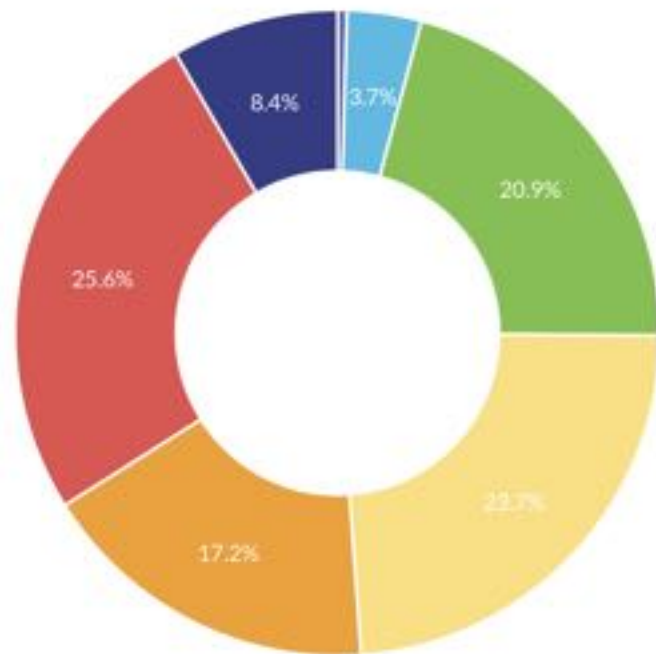
Choice	Total
● Under 18	1
● 18-24	8
● 25-34	45
● 35-44	51
● 45-54	37
● 55-64	55
● 65 and over	18

Pie chart percentages: 8.4%, 3.7%, 20.9%, 23.7%, 17.2%, 25.6%

Unanswered
0

Answered
215

See all answers ›

Q21   Income level:
Multiple Choice
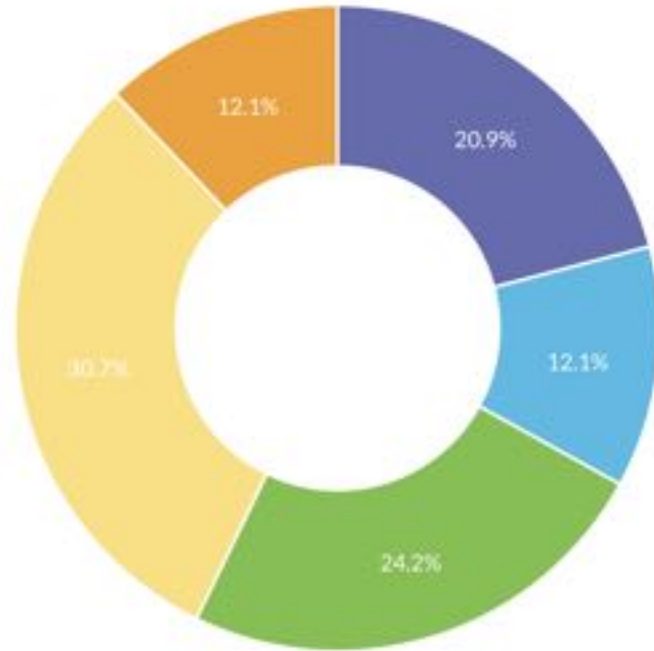
Choice		Total	
● Prefer not to say		45	
● Under $24,999		26	
● $25,000-$49,999		52	
● $50,000-$99,999		66	
● $100,000 or more		26	

20.9%
12.1%
12.1%
30.7%
24.2%

Unanswered
0

Answered
215

See all answers >

Q22 Gender:
Multiple Choice

6%

45.1%

47.9%
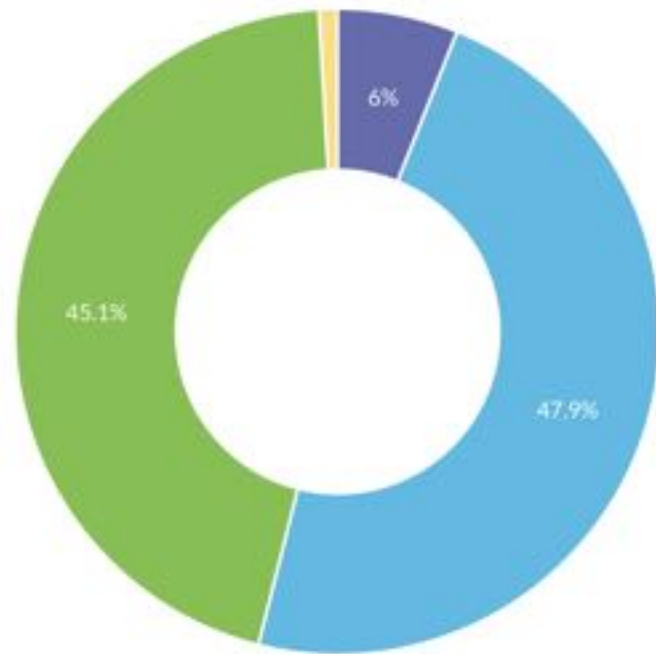
Choice		Total	
● Prefer not to self-identify		13	
● Male		103	
● Female		97	
● Gender Fluid		2	
● Nonbinary		0	

Unanswered
0

Answered
215

See all answers >

Q24 Ethnicity:
Multiple Choice

12.6%

87.4%
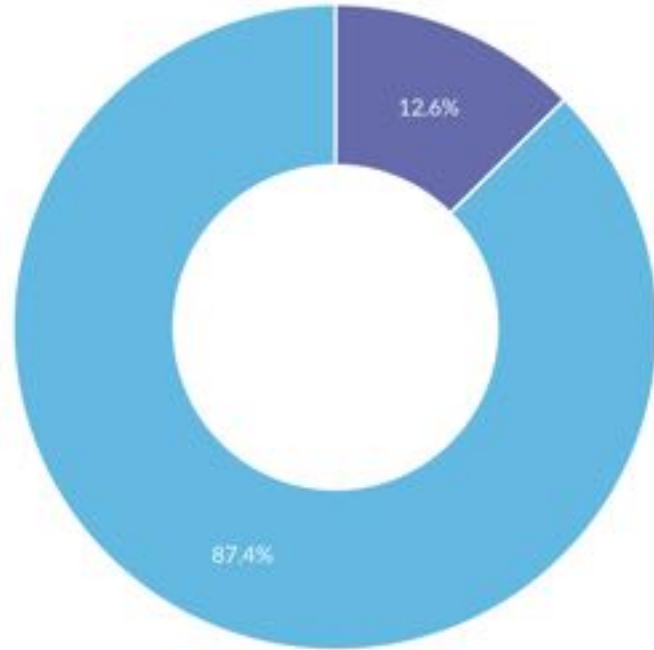
Choice	Total
● Hispanic or Latino	27
● Non-Hispanic	188

Unanswered
0

Answered
215

See all answers ›

Q25 Race:
Multiple Choice
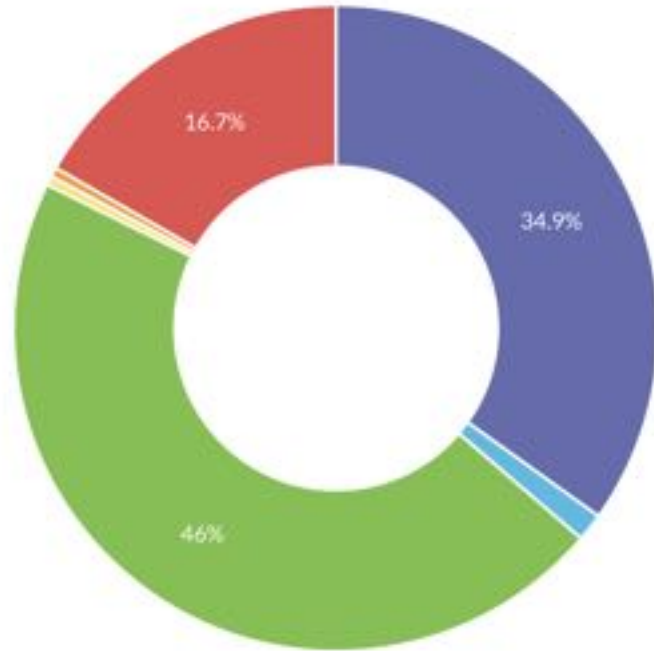
Choice		Total	
● African American/Black		75	
● Asian		3	
● Caucasian/White		99	
● Native American		1	
● Pacific Islander		1	
● Two or more races		36	

16.7%

34.9%

46%

Unanswered
0

Answered
215

See all answers >

Q26 Primary Language:
Multiple Choice
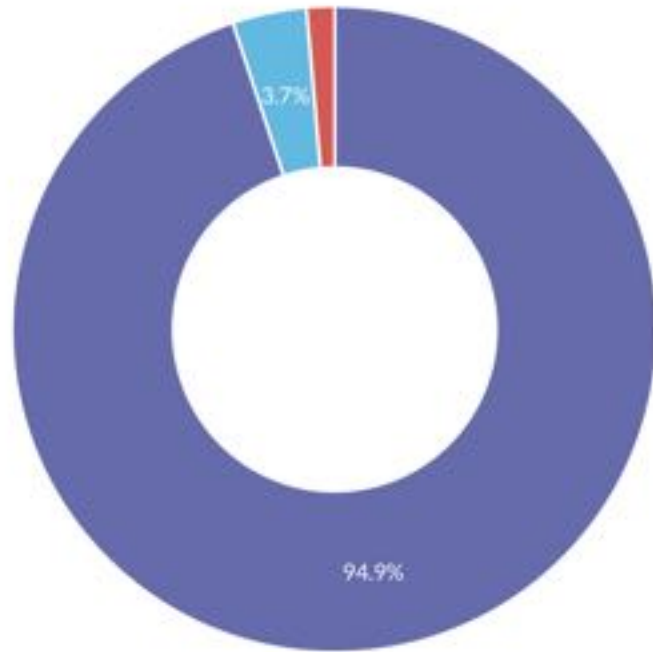
Choice	Total
English	204
Spanish	8
Mandarin	0
French	0
Arabic	0
Other: _____	3

94.9%

3.7%

Unanswered
0

Answered
215

See all answers >