

# First Responder Substance Use Stigma Assessment Template

*[Note: This survey is a template assessment that is designed for online dissemination. It could be adapted into a phone survey or pencil-and-paper survey with some changes. Information in bold is meant to provide guidance to participants. Information provided in italics and brackets is meant to provide further context to the implementor and would not be seen by the participant.]*

*[The scales used in this template assessment are from the [First Responder Substance Use Stigma Measures Toolkit](#) and the [Public Stigma of Substance Use Measures Toolkit](#) which contain additional information for interpretation of assessment results. A [toolkit for data collection and data analysis](#) is also available.*

*The measures included in this template assessment do not directly match the original measures. Minor edits were made to ensure language was as non-stigmatizing as possible while maintaining the integrity of the question. Response scales are on a 4-point Likert scale that excludes the neutral option to require respondents to form an opinion.*

*This template assessment should be used to describe the overall degree or magnitude of substance use related stigma among first responder populations. Unless otherwise noted, participant responses to all questions in each stigma scale should be summed. The sum score can then be used to characterize the level of stigma among the sample of healthcare providers. For example, questions 25-29 are from a scale developed by Stone et al. to assess opioid related attitude and beliefs. The responses to questions 25-29 can be added together to create a summed score. In this case, a higher score would indicate that the responding individual has higher levels of stigmatizing attitudes and beliefs.*

*Additional notes for analysis, including reverse-coding, are included under questions in italics and square brackets.]*

**Thank you for your interest in completing this survey to help us better understand what people in your community think about substance use, people who use drugs, and related topics. Follow the instructions below to answer each set of questions. Please remember to answer the questions honestly, and that there is no right or wrong answer. By taking this survey, you agree that the information you provide can be used by [Local Health Department Name]. Your responses will only ever be reported in aggregate and will at all times remain anonymous.**

**This survey is to be completed by professional first responders. First responders are, for the purposes of this survey, defined as “an employee of the state or a local public agency who provides emergency response services.” While this may encompass other positions, it most commonly refers to law enforcement professionals, firefighters, and emergency response services.**

**First, we will ask you a few questions about yourself and who you are.**

1. What type of first responder are you?
  - Law enforcement
  - Firefighter
  - EMS
  - Other (please specify): \_\_\_\_\_
  
2. What is your gender identity?
  - Female
  - Male
  - Transgender Male
  - Transgender Female
  - Nonbinary/Genderqueer
  - Other (please specify): \_\_\_\_\_
  
3. Which of the following age ranges do you fall into?
  - 18-24 years old
  - 25-34 years old
  - 35-44 years old
  - 45-54 years old
  - 55-64 years old
  - 65 or more years old

4. How long have you been in your career?
- Less than 5 years
  - 5 to 10 years
  - 10 to 20 years
  - Over 20 years
5. How often do you directly interact with people who use drugs (PWUD)?
- Daily
  - Weekly
  - Monthly
  - Rarely
6. In your life, have you had friends or family members whose substance use has negatively impacted their lives?
- Yes
  - No
7. Have you ever completed any specialized training or courses on addiction and/or overdose prevention?
- Yes, during pre-employment training
  - Yes, as part of Continuing Education
  - Yes, both of the above
  - Yes, Other (please specify): \_\_\_\_\_
  - No

**The following section will ask questions related to your knowledge of immediate overdose response skills.**

8. I already have enough information about how to manage an overdose.

Strongly Disagree       Disagree       Agree       Strongly Agree

9. I am already able to administer naloxone to someone who has overdosed.

Strongly Disagree       Disagree       Agree       Strongly Agree

10. I would be able to check that someone who has overdosed was breathing properly.

Strongly Disagree       Disagree       Agree       Strongly Agree

11. I would be able to perform mouth to mouth resuscitation to someone who has overdosed.

Strongly Disagree       Disagree       Agree       Strongly Agree

12. I would be able to perform chest compressions to someone who has overdosed.

Strongly Disagree       Disagree       Agree       Strongly Agree

13. I would be able to place someone who has overdosed in the recovery position.

Strongly Disagree       Disagree       Agree       Strongly Agree

**Please tick each correct statement.**

14. There is no need to call for an ambulance if I know how to manage an overdose.	<input type="checkbox"/> True	<input type="checkbox"/> False [*]
15. Someone can overdose again after having received naloxone.	<input type="checkbox"/> True [*]	<input type="checkbox"/> False
16. The effect of naloxone is shorter than the effect of opioids such as heroin or fentanyl.	<input type="checkbox"/> True [*]	<input type="checkbox"/> False

17. Over-administration of naloxone can provoke withdrawal symptoms.	<input type="checkbox"/> True [*]	<input type="checkbox"/> False
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*[\*correct response]*

The next section will ask questions about your attitudes concerning people who use drugs and overdose response efforts.

18. People who overdose need to learn a lesson from it so they will not do it again.

Strongly Disagree     
 Disagree     
 Agree     
 Strongly Agree

19. People who overdose are to blame for their own overdose.

Strongly Disagree     
 Disagree     
 Agree     
 Strongly Agree

20. It should not be the job of law enforcement officers to treat drug overdoses.

Strongly Disagree     
 Disagree     
 Agree     
 Strongly Agree

21. People who overdose need to be referred to drug treatment.

Strongly Disagree     
 Disagree     
 Agree     
 Strongly Agree

22. People who overdose need to be arrested.

Strongly Disagree     
 Disagree     
 Agree     
 Strongly Agree

23. People who are arrested after an overdose will be motivated to stop using drugs.

Strongly Disagree       Disagree       Agree       Strongly Agree

24. People who overdose deserve life threatening outcomes as a natural consequence of their actions.

Strongly Disagree       Disagree       Agree       Strongly Agree

**These questions are about what you think about people with substance use disorder.**

25. Individuals with substance use disorder only have themselves to blame for their problem.

Strongly Agree       Agree       Disagree       Strongly Disagree

26. People with substance use disorder have poor moral character.

Strongly Agree       Agree       Disagree       Strongly Disagree

27. How willing would you be to have a person with substance use disorder marry into your family?

Strongly Willing       Somewhat Willing       Somewhat Unwilling       Strongly Unwilling

28. How willing would you be to have a person taking medication treatment for substance use disorder marry into your family?

- Strongly Willing       Somewhat Willing       Somewhat Unwilling       Strongly Unwilling

29. People who need medication treatment to stop using substances lack willpower.

- Strongly Agree       Agree       Disagree       Strongly Disagree

**The next questions are about what you think most people think about people who have been treated for substance use.**

30. Most people would willingly accept someone who has been treated for substance use disorder as a close friend.

- Strongly Disagree       Disagree       Agree       Strongly Agree

31. Most people believe that someone who has been treated for substance use disorder is just as trustworthy as the average citizen.

- Strongly Disagree       Disagree       Agree       Strongly Agree

32. Most employers will hire someone who has been treated for substance use disorder if they are qualified for the job.

- Strongly Disagree       Disagree       Agree       Strongly Agree

33. Most people would be willing to date someone who has been treated for substance use disorder.

Strongly Disagree       Disagree       Agree       Strongly Agree

**This section will ask you questions about your views on the efficacy of naloxone distribution and use.**

34. Increasing access and utilization of naloxone is a good solution to the overdose problem.

Strongly Disagree       Disagree       Agree       Strongly Agree

35. Increasing access and utilization of naloxone provides individuals with a substance use disorder an excuse to continue their drug use.

Strongly Disagree       Disagree       Agree       Strongly Agree

36. There should be a limit on how often someone who overdoses be administered naloxone.

Strongly Disagree       Disagree       Agree       Strongly Agree

**This section will ask you questions about your views on the efficacy of Medication for Opioid Use Disorder (MOUD).**

37. MOUD is effective at reducing overdoses. *[reverse coded]*

Strongly Agree       Agree       Disagree       Strongly Disagree

38. MOUD is effective at reducing future crime. *[reverse coded]*

Strongly Agree       Agree       Disagree       Strongly Disagree

39. MOUD puts more drugs on the streets.

Strongly Agree       Agree       Disagree       Strongly Disagree

40. MOUD is a good investment for society. *[reverse coded]*

Strongly Agree       Agree       Disagree       Strongly Disagree

Thank you for participating in the survey. Your responses will help your community improve its provision of overdose prevention and response services. If you have any questions about the survey, please reach out to \_\_\_\_\_.