

Participant Survey Questions:

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

- 1] My attendance at the recovery center is based on my drug and alcohol use/addictions. Yes [ ] or No [ ]
- 2] My interest in recovery is based on someone else's substance use / addictive behaviors. Yes [ ] or No [ ]
- 3] How long have you been coming to the recovery center? \_\_\_\_\_years\_\_\_\_\_months\_\_\_\_days
- 4] How long have you been sober and/or in recovery from drug use? \_\_\_\_\_years\_\_\_\_\_months\_\_\_\_days
- 5] How many times a month do you come to the recovery center? \_\_\_\_\_

6] How did you find us? (pick one) Came to attend meeting/training at center [ ] Referred by court [ ]  
Referred by Dept of Corrections [ ] Referred from Detox / Public Inebriate program [ ]  
Referred by Treatment program [ ] Service provider [ ] Friend [ ] other \_\_\_\_\_

- 7] Have you had problems with returning to use after trying to stop? Yes [ ] or No [ ]
- 8] Has the recovery center helped you to reduce the frequency of relapses? Yes [ ] or No [ ]
- 9] Has at the recovery center helped you to reduce the length of relapses? Yes [ ] or No [ ]

- 10] Have you been in substance abuse treatment? [Please include counseling as treatment] Yes [ ] or No [ ]
- 11] Have you been in treatment during the last 30 days? Yes [ ] or No [ ]
- 12] Have you participated in outpatient/inpatient mental health services? past [ ] present [ ] never [ ]

13] Are you involved in activities at the recovery center? Please check all that apply: 12 Step meetings [ ]  
Other recovery meetings [ ] Events [ ] Educational workshops [ ] TV/Videos [ ] Pool or other games [ ]  
Computer use [ ] Fellowshiping (meeting or hanging with friends) [ ] Volunteering / providing support [ ]

- 14] The recovery center helped me to FIND my recovery. Yes [ ] or No [ ]
- 15] Coming to the recovery center has helped me MAINTAIN my recovery. Yes [ ] or No [ ]
- 16] Participating in the recovery center activities has ENHANCED my recovery experience. Yes [ ] or No [ ]

17] Current housing: (pick one) homeless [ ] staying with friends [ ] transitional (halfway/sober house) [ ]  
Rent residence or a room in a shared apartment [ ] own my residence [ ]

- 18] Have you found housing since coming to the center? Yes [ ] or No [ ]
- 19] Did people, support, or information provided at the center help you to find housing? Yes [ ] -No [ ] -NA [ ]

20] Current employment status:(pick one) unemployed [ ] part-time employment (less than 35 hours/week) [ ]  
employed (35 or more hours/ week) [ ] not looking for work, student, disabled, retired or homemaker [ ]

- 21] Have you found work since coming to the center? Yes [ ] or No [ ]
- 22] Did people, support, or information provided at the center help you to find work? Yes [ ] - No [ ] - NA [ ]

23] Criminal justice system involvement: (pick all that apply) never involved with criminal justice system [ ]  
currently on probation or parole [ ] released from probation or parole [ ]

- 24] Had incidents or criminal involvement **before** getting involved with recovery center? Yes [ ] or No [ ]
- 25] Had new incidents or criminal involvement **since** getting involved with recovery center? Yes [ ] or No [ ]

- 26] Do you have children who are living at home or under 18? Yes [ ] or No [ ]
- 27] Do you feel your children have benefited from your involvement at the recovery center?  
Yes [ ] No [ ] NA [ ]

28] Are you currently taking prescribed medications in support of your health and recovery? Yes [ ] or No [ ]

29] Please (pick all that apply) antidepressant [ ]; antipsychotic [ ]; pain medications [ ]; Methadone [ ];  
Buprenorphine [ ]; Naltraxone [ ]; Acomprasate [ ]; Antabuse [ ]; other \_\_\_\_\_

30] Initials \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: male [ ] female [ ] Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Information is collected only for demonstrating how well Recovery Centers work. We are committed to protecting our visitor's identities and anonymity.