
Outpatient Substance Use Treatment Module

Did you receive substance use services here in the last year?

Yes No

If “Yes,” please complete this section. If “No,” please skip this section.

This section is about the substance use treatment services you received here for alcohol or drug use. Please answer these questions based on your experiences over the last 12 months. If you have been coming here for less than 12 months, answer the questions based on your experiences since you started coming here.

In the last 12 months ...

1. When I needed an appointment, I could see my substance use counselors soon enough for my needs.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

2. My substance use counselors were responsible and professional.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

3. My substance use counselors knew about both substance use *and* HIV.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

4. I found it hard to relate to my substance use counselors.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

5. The program rules were enforced fairly by the staff.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

6. I felt I would get in trouble if I disagreed with or complained about my substance use counselors.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

7. I wish that the classes I went to had taught me more about taking care of myself.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

8. I was afraid to be seen going for HIV services in the facility.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

9. My substance use counselors, case manager, and HIV medical providers worked together to help me.

All of the Time Most Times Sometimes Rarely Never Does Not Apply

10. I wanted to have more time in *group* therapy to meet my needs.

Yes No Does Not Apply

11. I wanted to have more time in *individual* therapy to meet my needs.

Yes No Does Not Apply

12. If I relapsed, my substance use counselors explained ways to reduce the harm of drug use.

Yes No Does Not Apply

13. If I needed it, my substance use counselors helped me to get into a residential drug treatment program.

- Yes No Does Not Apply

14. My substance use counselors understood where I was with my recovery and helped me to reduce or eliminate my drug use.

- Yes No Not Sure Does Not Apply

15. My substance use counselors explained to me in a way I could understand how my substance use treatment (for example, methadone) and my HIV medications might interact.

- Strongly Disagree Disagree Agree Strongly Agree Does Not Apply

16. My substance use counselors helped me to achieve my substance use treatment plan goals.

- Strongly Disagree Disagree Agree Strongly Agree I didn't have a treatment plan

17. Clients should have had more help in transitioning out of the program.

- Strongly Disagree Disagree Agree Strongly Agree Don't Know

18. The program helped me to feel better about myself.

- Strongly Disagree Disagree Agree Strongly Agree

19. The program helped me to reduce my substance use.

- Strongly Disagree Disagree Agree Strongly Agree

20. If I knew someone who was HIV-positive and had a substance use problem, I would refer her or him to this program for help.

- Definitely Yes Maybe Definitely Not Not Sure

21. Overall, I am satisfied with the substance use services I received over the past 12 months.

- Strongly Disagree Disagree Agree Strongly Agree

22. Please answer this question only if you are in a methadone maintenance program:
The dispensing line was too slow.

- All of the Time Most Times Sometimes Rarely Never Does Not Apply

23. What would you change to make the substance use treatment program better for yourself and other clients?
