Interview Guide: Individual Opioid Drug Users

1. Can you describe the extent of your opioid use after experiencing an extended period of not using drugs—either forced (like incarceration) or by choice (like drug treatment or self-imposed clean-time)—where you were no longer had a habit when you left?

*Probes*

* What was the reason for the abstinence?
* How long was the period?
* What types did you use?
* Did you resume using the same amount of opioids you did before you went in?

1. Can you describe a typical day when you are using opioids?

*Probes*

* + Who and how many people do you use with?
  + What is your main route of administration (eating; sniffing; injecting)?
  + How many times a day do you use opioids?
  + Do you also use other drugs?
  + If you use additional drugs, what is the timing with opioids? What types of are they? Do you use them together (like a speedball) or at different times throughout the day? Are there special combinations you like because of the high it delivers?

In the last year, have you ever overdosed on an opioid drug (either licit or illicit)? If yes, go to question 3, if no, skip to question 4.

1. (**For persons who have overdosed**) Can you describe the situation and place of the last time you overdosed?

*Probes*

* 1. Was it in the place you most often use, or a new setting?
  2. Were you alone or with another person or persons?
  3. Did someone administer naloxone to reverse your overdose?

1. (**For persons who have never overdosed**) Can you explain why you have never overdosed given you have been using opioid regularly for a period of time?

*Probes*

* + Is it due to the type of opioid and other drugs you use?
  + Do you usually use alone or with other persons?
  + Do you take any precautions when you use opioids or other drugs? If so, what are they? If not, why not?

1. Have you used any heroin that looked or felt different/stronger than the heroin you are typically used to?

*Probes*

* + Was the texture or look different?
  + Did you know if it was a different form?
  + Have you used fentanyl in the last year, either on purpose or accident?
  + Do you regularly do tester shots? Sometimes?

1. (For people who use prescription opioids licitly) Can you describe the medications you receive, what they are for, and the methods in which you take them?

*Probes*

* 1. Are you taking several different pain medications?
  2. Are you also taking medications that are not pain-specific, like benzos?
  3. Have you ever take more medication than was prescribed?
  4. Have you ever sniffed your pills, or even injected them?
  5. Do you drink alcohol?
  6. Do you have a history of substance abuse?
  7. Do you receive naloxone with your pain medication prescriptions?