**Attachment A**

**Recruitment Screener Criteria**

**AGE** What is your age?

1 11 OR YOUNGER [NOT ELIGIBLE]

2 12-17 [NOT ELIGIBLE]

3 18-34

4 35-54

5 55 OR OLDER

**GENDER** What is your gender?

1. Male
2. Female

**LANG** Is your primary language English, Spanish, or another language?

1 English

2 Spanish

3 Other

**FENTA** During the past 12 months, have you used prescription fentanyl?

1 Yes

2 No

**FENTB** During the past 12 months,have you used fentanyl without a prescription?

1 Yes

2 No

**METH** During the past 12 months,have you used methamphetamine?

1 Yes

2 No

**KRATOM** During the past 12 months,have you used kratom?

1 Yes

2 No

**DRTX** During the past 12 months, have you received treatment or counseling for your use of alcohol or any drug, not counting cigarettes?

1 Yes

2 No

**DRTXa** [IF DRTX= 1] During the past 12 months when you received treatment, was the treatment for alcohol use only, drug use only, or both alcohol and drug use?

1 Alcohol use only

2 Drug use only

3 Both alcohol and drug use

**MHTX** During the past 12 months, have you received treatment or counseling for problems with emotions, nerves or mental health? Please do not include treatment for alcohol or drug use.

1 Yes

2 No

**PROXY** [IF AGE = 3-5] Do you have any children in your household between the ages of 12 – 17?

1 Yes

2 No

**CNUM** [IF PROXY = 1] How many children in your household are between the ages of 12 – 17?

1. 1
2. 2
3. 3
4. 4
5. 5
6. 6
7. 7
8. 8

**CAGE** [IF CNUM = 2-8: What are the ages of the children in your household who are between the ages of 12 – 17?/IF CNUM = 1: How old is this child?]

Child 1 1=12 years old

2=13 years old

3=14 years old

4=15 years old

5=16 years old

6=17 years old

Child 2 1=12 years old

2=13 years old

3=14 years old

4=15 years old

5=16 years old

6=17 years old

…

Child N [repeat for each subsequent child based on number of children indicated in CNUM]

**CGENDER** [IF CNUM = 1]Is this child male or female?

1. Male
2. Female

**CGENDER2** [IF CNUM = 2-8] For each of your children aged 12-17, please indicate whether they are male or female.

|  |  |  |
| --- | --- | --- |
| *Please select one response per row.* | Male | Female |
| X-year-old child | 1 🔾 | 2 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 |
| … [repeat for each child based on CAGE] | 1 🔾 | 2 🔾 |

**CLANG** [IF CNUM = 1]Is your child’s primary language English, Spanish, or another language?

1 English

2 Spanish

3 Other

**CLANG2** [IF CNUM = 2-8] For each of your children aged 12-17, please indicate if their primary language is English, Spanish, or another language.

|  |  |  |  |
| --- | --- | --- | --- |
| *Please select one response per row.* | English | Spanish | Other |
| X-year-old child | 1 🔾 | 2 🔾 | 3 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 | 3 🔾 |
| … [repeat for each child based on CAGE] | 1 🔾 | 2 🔾 | 3 🔾 |

**CFENTA** [IF CNUM = 1]During the past 12 months, has this child used prescription fentanyl?

1 Yes

2 No

**CFENTA2** [IF CNUM = 2-8] During the past 12 months, have any of your children aged 12-17 used prescription fentanyl? Please indicate Yes or No for each child.

|  |  |  |
| --- | --- | --- |
| *Please select one response per row.* | Yes | No |
| X-year-old child | 1 🔾 | 2 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 |
| … [repeat for each child based on CAGE] | 1 🔾 | 2 🔾 |

**CFENTB** [IF CNUM = 1]During the past 12 months,has this child used fentanyl without a prescription?

1 Yes

2 No

**CFENTB2** [IF CNUM = 2-8] During the past 12 months, have any of your children aged 12-17 used fentanyl without a prescription? Please indicate Yes or No for each child.

|  |  |  |
| --- | --- | --- |
| *Please select one response per row.* | Yes | No |
| X-year-old child | 1 🔾 | 2 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 |
| … [repeat for each child based on CAGE] | 1 🔾 | 2 🔾 |

**CMETH** [IF CNUM = 1]During the past 12 months,has this child used methamphetamine?

1 Yes

2 No

**CMETH2** [IF CNUM = 2-8] During the past 12 months, have any of your children age 12-17 used methamphetamine? Please indicate Yes or No for each child.

|  |  |  |
| --- | --- | --- |
| *Please select one response per row.* | Yes | No |
| X-year-old child | 1 🔾 | 2 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 |
| … [repeat for each child based on CAGE] | 1 🔾 | 2 🔾 |

**CKRATOM** [IF CNUM = 1]During the past 12 months,has this child used kratom?

1 Yes

2 No

**CKRATOM2** [IF CNUM = 2-8] During the past 12 months, have any of your children aged 12-17 used kratom? Please indicate Yes or No for each child.

|  |  |  |
| --- | --- | --- |
| *Please select one response per row.* | Yes | No |
| X-year-old child | 1 🔾 | 2 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 |
| … [repeat for each child based on CAGE] | 1 🔾 | 2 🔾 |

**CDRTX** [IF CNUM = 1]During the past 12 months, has this child received treatment or counseling for their use of alcohol or any drug, not counting cigarettes??

1 Yes

2 No

**CDRTXa** [IF CDRTX = 1] During the past 12 months when this child received treatment, was the treatment for alcohol use only, drug use only, or both alcohol and drug use?

1 Alcohol use only

2 Drug use only

3 Both alcohol and drug use

**CDRTX2** [IF CNUM = 2-8] During the past 12 months, have any of your children aged 12-17 received treatment or counseling for their use of alcohol or any drug, not counting cigarettes? Please indicate Yes or No for each child.

|  |  |  |
| --- | --- | --- |
| *Please select one response per row.* | Yes | No |
| X-year-old child | 1 🔾 | 2 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 |
| … [repeat for each child based on CAGE] | 1 🔾 | 2 🔾 |

**CDRTX2a** [IF CDRTX2= 1] During the past 12 months when any of your children aged 12-17 received treatment, was the treatment for alcohol use only, drug use only, or both alcohol and drug use? Please indicate your response below for each child.

|  |  |  |  |
| --- | --- | --- | --- |
| *Please select one response per row.* | Alcohol Use Only | Drug Use Only | Both Alcohol and Drug Use |
| X-year-old child | 1 🔾 | 2 🔾 | 3 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 | 3 🔾 |
| … [repeat for each child based on CAGE AND CDRTX2] | 1 🔾 | 2 🔾 | 3 🔾 |

**CMHTX** [IF CNUM = 1]During the past 12 months, has this child received treatment or counseling for problems with emotions, nerves or mental health? Please do not include treatment for alcohol or drug use?

1 Yes

2 No

**CMHTX2** [IF CNUM = 2-8] During the past 12 months, have any of your children aged 12-17 received treatment or counseling for problems with emotions, nerves or mental health? Please do not include treatment for alcohol or drug use Please indicate Yes or No for each child.

|  |  |  |
| --- | --- | --- |
| *Please select one response per row.* | Yes | No |
| X-year-old child | 1 🔾 | 2 🔾 |
| X-year-old child | 1 🔾 | 2 🔾 |
| … [repeat for each child based on CAGE] | 1 🔾 | 2 🔾 |

**Eligibility Determination**

Spanish speakers: IF LANG = 2 OR CLANG = 2 OR ANY CLANG2 = 2

Fentanyl users: IF FENTA = 1 OR FENTB = 1 OR CFENTA = 1 OR CFENTB = 1 OR ANY CFENTA2 = 1 OR OR ANY CFENTB2 = 1

Methamphetamine users: IF METH=1 OR CMETH =1 OR ANY CMETH2 = 1

Kratom users: IF KRATOM=1 OR CKRATOM = 1 OR ANY CKRATOM2 = 1

Drug treatment: IF DRTX = 1 OR CDRTX = 1 OR ANY CDRTX2 = 1

Mental health treatment: IF MHTX = 1 OR CMHTX = 1 OR CMHTX2 = 1

Youth: IF PROXY=1

General Population: IF (AGE = 3-5 AND FENTA = 2 AND FENTB = 2 AND METH = 2 AND KRATOM = 2 AND DRTX = 2 AND MHTX = 2) OR (PROXY = 2 AND CFENTA = 2 AND ALL CFENTA2 = 2 AND CFENTB = 2 AND ALL CFENTB2 = 2 AND CMETH = 2 AND ALL CMETH2 = 2 AND CKRATOM = 2 AND ALL CKRATOM2 = 2 AND CDRTX = 2 AND ALL CDRTX2 = 2 AND CMHTX = 2 AND ALL CMHTX2 = 2)