

NASTAD Strengthening SSPs Evaluation: Baseline

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Please complete the survey below. Please refer to the Reference Guide at [this link](#).

[If the above link does not work, please copy and paste the following into your browser:

<https://sites.uw.edu/sharota/files/2023/07/Strengthening-Syringe-Service-Programs-Evaluation-Reference-Guide.pdf>

If you have any further questions or comments about this evaluation, please contact us at DUH-grants@nastad.org

Thank you!

The first set of questions asks for information about your program from 2022. This information will provide an overall picture of your program the year before funding began.

For clarification on any questions or terms, please refer to the survey reference guide, available [here](#).

What was your harm reduction program's annual operating budget in 2022 (or for the last fiscal year)? (Note: Please round to nearest dollar. Please don't include decimal or dollar sign.)

- ☐ Budget:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

reset

Approximately how many new syringes did your harm reduction program distribute in 2022?

- ☐ Syringes distributed:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

reset

How many encounters did your harm reduction program have in 2022? (Note: For the purposes of this survey, "encounter" refers to one participant visit to your harm reduction program or, for mail-based services, one mailing.)

- ☐ Number of encounters in 2022:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

reset

Does your harm reduction program collect unique data/unique identifiers at each participant visit? (Note: By "unique identifiers," we mean a code that is unique to a participant and can be used to link their data across visits. By "participant", we mean the unique individual receiving services at your program.)

- ☐ Yes
- ☒ No
- ☐ Don't know
- ☐ My program prefers not to answer this question.

reset

Does your harm reduction program collect race and/or ethnicity demographics from participants? (Please select all that apply.)

- ☒ Yes, at enrollment/intake
- ☐ Yes, at each encounter/visit
- ☐ Yes, during a point-in-time survey
- ☐ My harm reduction collects perceived race and/or ethnicity (i.e., program staff or volunteers note participant race and/or ethnicity, but don't ask participants)
- ☐ No, my program does not collect race/and or ethnicity demographics from participants
- ☐ Don't know
- ☐ My program prefers not to answer this question.

How does your program record race and ethnicity data?

- ☐ My program records one race and/or ethnicity per participant (so our data on race always adds up to about 100%)
- ☐ My program may record more than one race and/or ethnicity per participant (so our data on race may add up to more than 100%)
- ☐ My program records race and/or ethnicity data another way (please describe):
- ☐ Don't know
- ☐ My program prefers not to answer this question.

reset

This next set of questions asks about the services and capacity of your harm reduction program on **March 31, 2023**. This will provide a snapshot of your program *just before funding began*.

As of March 31, 2023, did your harm reduction program conduct activities designed to engage any of the following demographic groups? Please select all that apply. If your program serves participants in any of these categories but does not conduct activities specifically designed to engage them, please do not mark the box for that category.

- ☐ Lesbian, gay, bisexual, or queer persons
- ☐ Transgender, genderqueer, or non-binary persons
- ☐ Women
- ☐ American Indian or Alaska Native persons
- ☐ Asian persons
- ☐ Black or African-American persons
- ☐ Hispanic or Latinx persons
- ☐ Native Hawaiian or Other Pacific Islander persons
- ☐ Persons aged < 20 years
- ☐ Persons aged 20 to 29 years
- ☐ Persons aged 30 to 39 years
- ☐ Persons aged 40 to 59 years
- ☐ Persons aged < or = 60 years
- ☐ Persons who trade sex
- ☐ Other (please describe)
- ☐ No, my program does not conduct activities designed to engage any specific demographic group(s).
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, what was your harm reduction program's service delivery model? (Please select all that apply.)

- ☒ Brick and mortar fixed site (including drop-in centers)
- ☐ Backpack/outreach or foot/pedestrian-based
- ☐ Pop-up sites (tables, tent, etc.)
- ☒ Delivery to regular locations (e.g., established route)
- ☐ Delivery to participant requested locations (e.g., home delivery)
- ☒ Mail-based distribution
- ☒ Vending machine
- ☐ Other (please describe)
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, how many brick-and-mortar (fixed site) locations did your harm reduction program operate?

- ☐ Number of locations:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, how many outreach and/or delivery vehicles did your harm reduction program operate?

- ☐ Number of vehicles:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, how many harm reduction vending machines did your program operate?

- ☐ Number of vending machines:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, what supplies did your harm reduction program offer in vending machines? (Please select all that apply.)

- ☐ Syringes
- ☐ Intramuscular naloxone kits
- ☐ Nasal naloxone kits
- ☐ Condoms and/or safer sex kits
- ☐ Other (please specify):
- ☐ Don't know
- ☐ My program prefers not to answer this question.

How would you describe your harm reduction program? (Please select all that apply.)

- ☐ Community-based organization with our own 501(c)(3) status
- ☐ Community-based organization with a sponsor's 501(c)(3) status
- ☐ City or County health department
- ☐ State health department
- ☐ Tribal affiliated organization
- ☐ Academic health care organization
- ☐ Private or commercial health care organization
- ☐ Mutual aid organization
- ☐ Other (please specify)
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, what was your harm reduction program's syringe provision model?

- ☐ One-for-one exchange (1:1)
- ☐ One-for-one (1:1) plus (i.e., "rounding up" 1:1)
- ☒ One-for-one exchange (1:1) with starter packs
- ☐ One-for-one (1:1) plus with starter packs
- ☐ Need-based
- ☐ Other (please describe):
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

How many syringes does your program provide in a starter pack?

- ☐ Number of syringes:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, did your harm reduction program limit how many syringes a participant may receive at once?

- ☒ Yes, always
- ☐ Yes, with occasional exceptions (for example, if a participant travels a long distance to your program)
- ☐ Sometimes (for example, if your program is experiencing a funding or syringe shortage)
- ☐ No
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

On March 31, 2023 what was the maximum number of syringes a participant could receive from your SSP per visit?

- ☐ Maximum number of syringes:
- ☐ My program did not have a syringe cap on March 31, 2023.
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, how many paid full-time employees did your harm reduction program have?

- ☐ Number of full-time employees:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, how many paid part-time employees did your harm reduction program have?

- ☐ Number of part-time employees:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, how many hours per week did your harm reduction program offer services? Please enter the number of hours only. *Note: If your program offers services in multiple locations or modes, please provide the sum of all service hours (e.g., 2 brick-and-mortar locations open 20 hours a week each [20x2] + 10 hours of mobile outreach per week= 50)*

- ☐ Number of hours per week:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, how many hours per week did your harm reduction program offer services? Please enter the number of hours only. *Note: If your program offers services in multiple locations or modes, please provide the sum of all service hours (e.g., 2 brick-and-mortar locations open 20 hours a week each [20x2] + 10 hours of mobile outreach per week= 50)*

- ☐ Number of hours per week:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[reset](#)

As of March 31, 2023, what types of syringe disposal resources did your harm reduction program offer? *(Please select all that apply.) (Note: The policy environment and on-the-ground reality varies from state to state and program to program. While CDC's guidance, [Syringe Services Programs: A Technical Package of Effective Strategies and Approaches for Planning, Design, and Implementation](#) characterizes syringe disposal education as a "core service" of SSPs, the project partners recognize that not all programs can reasonably offer disposal. All of your answers are confidential and will not affect your eligibility for future funding. As always, your program may respond "My program prefers not to answer this question.")*

- ☐ Accepted used syringes for safe disposal
- ☐ Provided training on safe disposal of used syringes
- ☐ Provided sharps containers for carrying used syringes
- ☐ No syringe disposal services were provided
- ☐ Other (specify)
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, did your program provide services in tribal nations? *(Please select all that apply.)*

- ☐ Yes, mail-based (Please specify tribal nation(s))

[Expand](#)

- ☐ Yes, in-person and/or on-site (Please specify

tribal nation(s))

[Expand](#)

- ☐ No
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which state(s) or territory(-ies) did your harm reduction program provide MAIL-BASED services? (Please select all that apply.)

- ☐ All US States and territories
- ☐ Alabama
- ☐ American Samoa
- ☐ Alaska
- ☐ Arizona
- ☐ Arkansas
- ☐ California
- ☐ Colorado
- ☐ Connecticut
- ☐ Delaware
- ☐ District of Columbia (DC)
- ☐ Florida
- ☐ Georgia
- ☐ Guam
- ☐ Hawaii
- ☐ Idaho
- ☐ Illinois
- ☐ Indiana
- ☐ Iowa
- ☐ Kansas
- ☐ Kentucky
- ☐ Louisiana
- ☐ Maine
- ☐ Maryland
- ☐ Massachusetts
- ☐ Michigan
- ☐ Minnesota
- ☐ Mississippi
- ☐ Missouri
- ☐ Montana
- ☐ Nebraska
- ☐ Nevada
- ☐ New Hampshire
- ☐ New Jersey
- ☐ New Mexico
- ☐ New York
- ☐ North Carolina
- ☐ North Dakota
- ☐ Northern Mariana Islands
- ☐ Ohio
- ☐ Oklahoma
- ☐ Oregon
- ☐ Pennsylvania
- ☐ Puerto Rico
- ☐ Rhode Island
- ☐ South Carolina
- ☐ South Dakota
- ☐ Tennessee
- ☐ Texas
- ☐ United States Virgin Islands
- ☐ Utah
- ☐ Vermont
- ☐ Virginia
- ☐ Washington
- ☐ West Virginia
- ☐ Wisconsin
- ☐ Wyoming
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which state(s) or territory(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☒ Alabama
- ☒ American Samoa
- ☒ Alaska
- ☒ Arizona
- ☒ Arkansas
- ☒ California
- ☒ Colorado
- ☒ Connecticut
- ☒ Delaware
- ☒ District of Columbia (DC)
- ☒ Florida
- ☒ Georgia
- ☒ Guam
- ☒ Hawaii
- ☒ Idaho
- ☒ Illinois
- ☒ Indiana
- ☒ Iowa
- ☒ Kansas
- ☒ Kentucky
- ☒ Louisiana
- ☒ Maine
- ☒ Maryland
- ☒ Massachusetts
- ☒ Michigan
- ☒ Minnesota
- ☒ Mississippi
- ☒ Missouri
- ☒ Montana
- ☒ Nebraska
- ☒ Nevada
- ☒ New Hampshire
- ☒ New Jersey
- ☒ New Mexico
- ☒ New York
- ☒ North Carolina
- ☒ North Dakota
- ☒ Northern Mariana Islands
- ☒ Ohio
- ☒ Oklahoma
- ☒ Oregon
- ☒ Pennsylvania
- ☒ Puerto Rico
- ☒ Rhode Island
- ☒ South Carolina
- ☒ South Dakota
- ☒ Tennessee
- ☒ Texas
- ☒ United States Virgin Islands
- ☒ Utah
- ☒ Vermont
- ☒ Virginia
- ☒ Washington
- ☒ West Virginia
- ☒ Wisconsin
- ☒ Wyoming
- ☐ Don't know
- ☐ My program prefers not to answer this question.

The following screenshots are examples of how counties will be presented based on state selection on the previous item

As of March 31, 2023, in which Alaska borough(s) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☐ All Alaskan Boroughs
- ☐ Aleutians East
- ☐ Aleutians West
- ☐ Anchorage
- ☐ Bethel
- ☐ Bristol Bay
- ☐ Denali
- ☐ Dillingham
- ☐ Fairbanks North Star
- ☐ Haines
- ☐ Juneau
- ☐ Kenai Peninsula
- ☐ Ketchikan Gateway
- ☐ Kodiak Island
- ☐ Lake and Peninsula
- ☐ Matanuska-Susitna
- ☐ Nome
- ☐ North Slope
- ☐ Northwest Arctic
- ☐ Prince of Wales-Outer Ketchikan
- ☐ Sitka
- ☐ Skagway-Hoonah-Angoon
- ☐ Southeast Fairbanks
- ☐ Valdez-Cordova
- ☐ Wade Hampton
- ☐ Wrangell-Petersburg
- ☐ Yakutat
- ☐ Yukon-Koyukuk
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which Alabama county(/-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☐ All Alabama Counties
- ☐ Autauga
- ☐ Baldwin
- ☐ Barbour
- ☐ Bibb
- ☐ Blount
- ☐ Bullock
- ☐ Butler
- ☐ Calhoun
- ☐ Chambers
- ☐ Cherokee
- ☐ Chilton
- ☐ Choctaw
- ☐ Clarke
- ☐ Clay
- ☐ Cleburne
- ☐ Coffee
- ☐ Colbert
- ☐ Conecuh
- ☐ Coosa
- ☐ Covington
- ☐ Crenshaw
- ☐ Cullman
- ☐ Dale
- ☐ Dallas
- ☐ De Kalb
- ☐ Elmore
- ☐ Escambia
- ☐ Etowah
- ☐ Fayette
- ☐ Franklin
- ☐ Geneva
- ☐ Greene
- ☐ Hale
- ☐ Henry
- ☐ Houston
- ☐ Jackson
- ☐ Jefferson
- ☐ Lamar
- ☐ Lauderdale
- ☐ Lawrence
- ☐ Lee
- ☐ Limestone
- ☐ Lowndes
- ☐ Macon
- ☐ Madison
- ☐ Marengo
- ☐ Marion
- ☐ Marshall
- ☐ Mobile
- ☐ Monroe
- ☐ Montgomery
- ☐ Morgan
- ☐ Perry
- ☐ Pickens
- ☐ Pike
- ☐ Randolph
- ☐ Russell
- ☐ Shelby
- ☐ St. Clair
- ☐ Sumter
- ☐ Talladega
- ☐ Tallapoosa
- ☐ Tuscaloosa
- ☐ Walker
- ☐ Washington
- ☐ Wilcox
- ☐ Winston
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which Arkansas county(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☐ All Arkansas Counties
- ☐ Arkansas
- ☐ Ashley
- ☐ Baxter
- ☐ Benton
- ☐ Boone
- ☐ Bradley
- ☐ Calhoun
- ☐ Carroll
- ☐ Chicot
- ☐ Clark
- ☐ Clay
- ☐ Cleburne
- ☐ Cleveland
- ☐ Columbia
- ☐ Conway
- ☐ Craighead
- ☐ Crawford
- ☐ Crittenden
- ☐ Cross
- ☐ Dallas
- ☐ Desha
- ☐ Drew
- ☐ Faulkner
- ☐ Franklin
- ☐ Fulton
- ☐ Garland
- ☐ Grant
- ☐ Greene
- ☐ Hempstead
- ☐ Hot Spring
- ☐ Howard
- ☐ Independence
- ☐ Izard
- ☐ Jackson
- ☐ Jefferson
- ☐ Johnson
- ☐ Lafayette
- ☐ Lawrence
- ☐ Lee
- ☐ Lincoln
- ☐ Little River
- ☐ Logan
- ☐ Lonoke
- ☐ Madison
- ☐ Marion
- ☐ Miller
- ☐ Mississippi
- ☐ Monroe
- ☐ Montgomery
- ☐ Nevada
- ☐ Newton
- ☐ Ouachita
- ☐ Perry
- ☐ Phillips
- ☐ Pike
- ☐ Polk
- ☐ Polk
- ☐ Pope
- ☐ Prairie
- ☐ Pulaski
- ☐ Randolph
- ☐ Saline
- ☐ Scott
- ☐ Searcy
- ☐ Sebastian
- ☐ Sevier
- ☐ Sharp
- ☐ St. Francis
- ☐ Stone
- ☐ Union
- ☐ Van Buren
- ☐ Washington
- ☐ White
- ☐ Woodruff
- ☐ Yell
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which American Samoa county(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? *(Please select all that apply.)*

- ☐ All American Samoa Counties
- ☐ Eastern
- ☐ Manu'a
- ☐ Rose Island
- ☐ Swains Island
- ☐ Western
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which Arizona county(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? *(Please select all that apply.)*

- ☐ All Arizona Counties
- ☐ Apache
- ☐ Cochise
- ☐ Coconino
- ☐ Gila
- ☐ Graham
- ☐ Greenlee
- ☐ La Paz
- ☐ Maricopa
- ☐ Mohave
- ☐ Navajo
- ☐ Pima
- ☐ Pinal
- ☐ Santa Cruz
- ☐ Yavapai
- ☐ Yuma
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which California county(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☐ All California Counties
- ☐ Alameda
- ☐ Alpine
- ☐ Amador
- ☐ Butte
- ☐ Calaveras
- ☐ Colusa
- ☐ Contra Costa
- ☐ Del Norte
- ☐ El Dorado
- ☐ Fresno
- ☐ Glenn
- ☐ Humboldt
- ☐ Imperial
- ☐ Inyo
- ☐ Kern
- ☐ Kings
- ☐ Lake
- ☐ Lassen
- ☐ Los Angeles
- ☐ Madera
- ☐ Marin
- ☐ Mariposa
- ☐ Mendocino
- ☐ Merced
- ☐ Modoc
- ☐ Mono
- ☐ Monterey
- ☐ Napa
- ☐ Nevada
- ☐ Orange
- ☐ Placer
- ☐ Plumas
- ☐ Riverside
- ☐ Sacramento
- ☐ San Benito
- ☐ San Bernardino
- ☐ San Diego
- ☐ San Francisco
- ☐ San Joaquin
- ☐ San Luis Obispo
- ☐ San Mateo
- ☐ Santa Barbara
- ☐ Santa Clara
- ☐ Santa Cruz
- ☐ Shasta
- ☐ Sierra
- ☐ Siskiyou
- ☐ Solano
- ☐ Sonoma
- ☐ Stanislaus
- ☐ Sutter
- ☐ Tehama
- ☐ Trinity
- ☐ Tulare
- ☐ Tuolumne
- ☐ Ventura
- ☐ Yolo
- ☐ Yuba
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which Colorado county(/-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☐ All Colorado Counties
- ☐ Adams
- ☐ Alamosa
- ☐ Arapahoe
- ☐ Archuleta
- ☐ Baca
- ☐ Bent
- ☐ Boulder
- ☐ Chaffee
- ☐ Cheyenne
- ☐ Clear Creek
- ☐ Conejos
- ☐ Costilla
- ☐ Crowley
- ☐ Custer
- ☐ Delta
- ☐ Denver
- ☐ Dolores
- ☐ Douglas
- ☐ Eagle
- ☐ El Paso
- ☐ Elbert
- ☐ Fremont
- ☐ Garfield
- ☐ Gilpin
- ☐ Grand
- ☐ Gunnison
- ☐ Hinsdale
- ☐ Huerfano
- ☐ Jackson
- ☐ Jefferson
- ☐ Kiowa
- ☐ Kit Carson
- ☐ La Plata
- ☐ Lake
- ☐ Larimer
- ☐ Las Animas
- ☐ Lincoln
- ☐ Logan
- ☐ Mesa
- ☐ Mineral
- ☐ Moffat
- ☐ Montezuma
- ☐ Montrose
- ☐ Morgan
- ☐ Otero
- ☐ Ouray
- ☐ Park
- ☐ Phillips
- ☐ Pitkin
- ☐ Prowers
- ☐ Pueblo
- ☐ Rio Blanco
- ☐ Rio Grande
- ☐ Routt
- ☐ Saguache
- ☐ San Juan
- ☐ San Miguel
- ☐ Sedgwick
- ☐ Summit
- ☐ Teller
- ☐ Washington
- ☐ Weld
- ☐ Yuma
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which Connecticut county(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☐ All Connecticut Counties
- ☐ Fairfield
- ☐ Hartford
- ☐ Litchfield
- ☐ Middlesex
- ☐ New Haven
- ☐ New London
- ☐ Tolland
- ☐ Windham
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which Delaware county(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☐ All Delaware Counties
- ☐ Kent
- ☐ New Castle
- ☐ Sussex
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which Florida county(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? (Please select all that apply.)

- ☐ All Florida Counties
- ☐ Alachua
- ☐ Baker
- ☐ Bay
- ☐ Bradford
- ☐ Brevard
- ☐ Broward
- ☐ Calhoun
- ☐ Charlotte
- ☐ Citrus
- ☐ Clay
- ☐ Collier
- ☐ Columbia
- ☐ Dade
- ☐ De Soto
- ☐ Dixie
- ☐ Duval
- ☐ Escambia
- ☐ Flagler
- ☐ Franklin
- ☐ Gadsden
- ☐ Gilchrist
- ☐ Glades
- ☐ Gulf
- ☐ Hamilton
- ☐ Hardee
- ☐ Hendry
- ☐ Hernando
- ☐ Highlands
- ☐ Hillsborough
- ☐ Holmes
- ☐ Indian River
- ☐ Jackson
- ☐ Jefferson
- ☐ Lafayette
- ☐ Lake
- ☐ Lee
- ☐ Leon
- ☐ Levy
- ☐ Liberty
- ☐ Madison
- ☐ Manatee
- ☐ Marion
- ☐ Martin
- ☐ Monroe
- ☐ Nassau
- ☐ Okaloosa
- ☐ Okeechobee
- ☐ Orange
- ☐ Osceola
- ☐ Palm Beach
- ☐ Pasco
- ☐ Pinellas
- ☐ Polk
- ☐ Putnam
- ☐ Santa Rosa
- ☐ Sarasota
- ☐ Seminole
- ☐ St. Johns
- ☐ St. Lucie
- ☐ Sumter
- ☐ Suwannee
- ☐ Taylor
- ☐ Union
- ☐ Volusia
- ☐ Wakulla
- ☐ Walton
- ☐ Washington
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of March 31, 2023, in which Georgia county(-ies) did your harm reduction program provide *IN-PERSON* and/or *ON-SITE* services (including vending machines)? *(Please select all that apply.)*

- ☐ All Georgia Counties
- ☐ Appling
- ☐ Atkinson
- ☐ Bacon
- ☐ Baker
- ☐ Baldwin
- ☐ Banks
- ☐ Barrow
- ☐ Bartow
- ☐ Ben Hill
- ☐ Berrien
- ☐ Bibb
- ☐ Bleckley
- ☐ Brantley
- ☐ Brooks
- ☐ Bryan
- ☐ Bulloch
- ☐ Burke
- ☐ Butts
- ☐ Calhoun
- ☐ Camden
- ☐ Candler
- ☐ Carroll
- ☐ Catoosa
- ☐ Chariton
- ☐ Chatham
- ☐ Chattahoochee
- ☐ Chattooga