

## O2DA Partner Evaluation Survey: Screener and Annotated Questionnaire

### Overview of Tracking Questions:

- Familiarity with CDC campaigns
- Perceptions of CDC's campaigns to Stop Overdose
- Facilitators and barriers
- Lessons learned
- Demographic information

### Separate questions from the survey:

- Name of organization
- Interest in participating in a follow-up

### Programming Notes:

#### Overall

- Include one additional variable in the data set that is not shown in this document: Respondent\_ID (a unique identifier).
- Refused=-99; Valid Skip=-100
- Each question is displayed on its own page unless otherwise indicated in the survey.

#### Survey

- Responses to all questions are voluntary. If a respondent does not answer a question, then the respondent should stay on the same page and be shown the **"We would like your response to this question"** soft prompt validation, after which the respondent should be allowed to move to the next page.
- Respondents must go to the end of the survey and submit their answers to count as complete. They must also provide answers to at least 70% of the survey questions.

## Survey

### [Survey Intro]

CDC's campaigns to Stop Overdose were launched in August 2021 to prevent and reduce the number of fatal and nonfatal drug overdoses, to promote recovery and stigma reduction, and to support communities facing a new phase of the drug overdose epidemic in the United States. This data collection effort is seeking feedback from CDC-funded OD2A recipients about the Stop Overdose campaign materials and products.

By continuing to the survey, you are indicating your consent for us to collect the information you provide in your responses.

CDC estimates the average public reporting burden for this collection of information as 25 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).

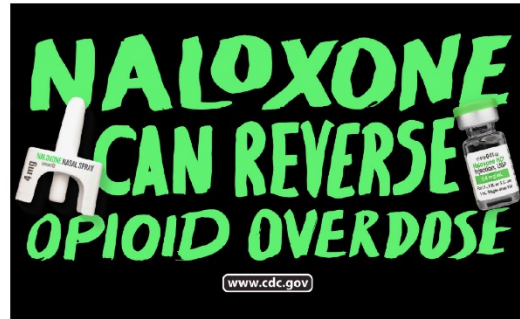
//Next page//

//AWARENESS AND IMPLEMENTATION OF STOP OVERDOSE CAMPAIGNS, PRODUCTS MATERIALS (RQ1)//

Below are the four Stop Overdose campaigns. Review each image and check all of the items that apply regarding your awareness and implementation. Please click [here](#) for a summary about the campaigns (this page will open in a new window).



The fentanyl campaign raises awareness about the dangers of fentanyl and how it has taken over the drug supply



The naloxone campaign raises awareness about where to get naloxone and how to use it



The polysubstance use campaign raises awareness about the risks and consequences of mixing different types of drugs



The stigma campaign raises awareness about what options are available and how to support loved ones on their recovery journey

//DISPLAY Q1 on the same page as Description Awareness//

**Question Type:** Multi Select

**Q1.** Which of the following campaigns is your organization familiar with? (Select all that apply.)

**Variable Label:** Q1: Campaigns Familiarity

Value	Variable Text	Variable Label	Programming Notes
Q1_1	Fentanyl	Q1_1 Fentanyl	//Continue to Q2//
Q1_2	Naloxone	Q1_2 Naloxone	
Q1_3	Stigma	Q1_3 Stigma	
Q1_4	Polysubstance use	Q1_4 Polysubstance use	
Q1_5	None of the above [Exclusive] <b>//DE-SELECT ALL OTHER OPTIONS//</b>	Q1_5 None of the above	<b>// SKIP TO Q28//</b>

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**//NEW SCREEN FOR EACH QUESTION//**

**Question Type:** Multi Select Grid

**Q2.** Please note: “Products and materials” is a general term used to describe outputs from a campaign, including videos, digital display ads, billboards, and fact sheets.

Our organization...

**Variable Label:** Q2: Materials implementation

Value	Variable Text	Variable Label	Programming Notes
Q2_1	Fentanyl	Q2_1 Fentanyl	//IF Q2_1 OR Q2_2 OR Q2_3 OR Q2_4=1 AND (Q2_1 AND Q2_2 AND Q2_3 AND Q2_4 !=2) GO TO Q10//
Q2_2	Naloxone	Q2_2 Naloxone	
Q2_3	Stigma	Q2_3 Stigma	
Q2_4	Polysubstance Use	Q2_4 Polysubstance Use	
			//IF Q2_1 OR Q2_2 OR Q2_3 OR Q2_4=2 GO TO Q4//
			//IF Q2_1 AND Q2_2 AND

			Q2_3 AND Q2_4=3 GO TO Q3//
-99	Refused	Refused	//If NO option is selected at all, continue to Q3//

//Individual components if any of Q2 = 1 or Campaign if any of Q2 = 2//

Value	Value Label
1	...used or adapted individual products or materials from this Stop Overdose campaign.
2	...implemented this Stop Overdose campaign at a state or local level.
3	Neither of these [exclusive]
-97	Multiple responses
-99	Refused

**Question Type:** Open End

**Q3.** For what reasons did your organization not disseminate or implement Stop Overdose campaign materials?

**Variable Label:** Q3: No implementation of materials

//Lower Limit: 1 character//

//Upper Limit: 500 characters//

//SKIP TO Q19//

//CAMPAIGN QUESTIONS//

//DISPLAY Q4 THROUGH Q9 ONLY IF Q2\_1 OR Q2\_2 OR Q2\_3 OR Q2\_4=2 //

**Question Type:** Single Select

**Q4.** Over what period of time did your organization implement a campaign that included Stop Overdose campaign materials or products?

**Variable Label:** Q4: Duration of campaign implementation

Value	Variable Text	Programming Notes
1	Less than a year	
2	One year	//Continue to Q5//
3	More than one year	
4	I don't know	//Continue to Q5//
5	Did not implement campaign	//SKIP TO Q10//
-99	Refused	//Continue to Q5//

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**Question Type:** Single Select

**Q5.** Is the campaign currently running?

**Variable Label:** Q5: Campaign status

Value	Variable Text	Programming Notes
1	Yes	
2	No	//Continue to Q6//
3	I don't know	
-99	Refused	//Continue to Q6//

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**Question Type:** Open End

**Q6.** What is the name of the campaign?

**Variable Label:** Q6: Campaign name

//Lower Limit: 1 character//

//Upper Limit: 200 characters//

**Question Type:** Open End

**Q7.** What was the approximate campaign launch date?

**Variable Label:** Q7: Campaign launch date

//Lower Limit: 1 character//

//Upper Limit: 20 characters//

**Question Type:** Single Select

**Q8.** Did your organization purchase paid media ads as part of this campaign?

**Variable Label:** Q8: Paid media YN

Value	Variable Text	Programming Notes
1	Yes	//Continue to Q9//
2	No	//Skip to Q10//
3	I don't know	//Continue to Q9//
-99	Refused	//Continue to Q9//

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**Question Type:** Multi Select

**Q9.** What type of paid media did your organization purchase? (Select all that apply.)

**Variable Label:** Q9: Paid media purchase

Value	Variable Text	Variable Label	Programming Notes
Q9_1	Radio broadcast	Q9_1 Radio broadcast	//Continue to Q10//
Q9_2	Social media	Q9_2 Social media	
Q9_3	Digital and display ads (e.g., banners, web, native ads, digital out-of-home)	Q9_3 Digital and display ads (e.g., banners, web, native ads, digital out-of-home)	
Q9_4	Print ads (e.g., newspaper, magazine)	Q9_4 Print ads (e.g., newspaper, magazine)	
Q9_5	Out-of-home (e.g., billboards, posters, bus shelters, benches)	Q9_5 Out of home (e.g., billboards, posters, bus shelters, benches)	
Q9_6	Other (specify)	Q9_6 Other (specify)	
Q9_7	None of the above [exclusive] //Deselect all other options//	Q9_7 None of the above	
-99	Refused	Refused	//Continue to Q10//

Value	Value Label
0	Not selected

1	Selected
-99	Refused

//MATERIALS QUESTIONS//

//DISPLAY Q10 ONLY IF Q2\_1 OR Q2\_2 OR Q2\_3 OR Q2\_4=1 OR IF Q2\_1 OR Q2\_2 OR Q2\_3 OR Q2\_4=2//

**Question Type:** Single Select

**Q10.** Is your organization currently promoting, disseminating, or otherwise using Stop Overdose campaign materials or products to support your work?

**Variable Label:** Q10: Campaign materials use

Value	Variable Text	Programming Notes
1	Yes	//Continue to Q11//
2	No	//Continue to Q11//
3	I don't know	//Continue to Q11//
-99	Refused	//Continue to Q11//

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**Question Type:** Multi Select

**Q11.** Which materials, if any, from the Stop Overdose campaigns has your organization distributed? (Select all that apply.) Please click [here](#) for a summary about the campaigns and materials (this page will open in a new window).

**Variable Label:** Q11: Materials distributed

Value	Variable Text	Variable Label	Programming Notes
Q11_1	Website	Q11_1 Website	
Q11_2	Video PSAs	Q11_2 Video PSAs	
Q11_3	Billboards	Q11_3 Billboards	
Q11_4	Bus shelter ads	Q11_4 Bus shelter ads	
Q11_5	Posters	Q11_5 Posters	



Q11_6	Paid search ads	Q11_6 Paid search ads	//Continue to Q12//	
Q11_7	Digital display ads	Q11_7 Digital display ads		
Q11_8	Static and animated social media ads	Q11_8 Static and animated social media ads		
Q11_9	YouTube ads	Q11_9 YouTube ads		
Q11_10	Streaming audio/radio ads	Q11_10 Streaming audio/radio ads		
Q11_11	Fact sheets	Q11_11 Fact sheets		
Q11_12	PowerPoint decks	Q11_12 PowerPoint decks		
Q11_13	Postcards	Q11_13 Postcards		
Q11_14	Pharmacy bags/delivery bag inserts	Q11_14 Pharmacy bags/delivery bag inserts		
Q11_15	Infographics	Q11_15 Infographics		
Q11_16	Other (please specify) [Open-Ended]	Q11_16 Other (please specify) [Open-Ended]		
Q11_17	None of the above [Exclusive] //Deselect all other options//	Q11_17 None of the above		//Skip to Q14//
-99	Refused	Refused		//Continue to Q12//

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**Question Type:** Multi Select

**Q12.** Through which channels did your organization disseminate Stop Overdose materials or products? (Select all that apply.)

**Variable Label:** Q12: Channels of materials dissemination

Value	Variable Text	Variable Label	Programming Notes
Q12_1	Organization's social media account(s)	Q12_1 Organization's social media account(s)	//Continue to Q13//
Q12_2	Organization's website	Q12_2 Organization's website	//Skip to Q14 if Q12_1=0//
Q12_3	Email distribution lists	Q12_3 Email distribution lists	
Q12_4	Text message	Q12_4 Text message	
Q12_5	Television	Q12_5 Television	

Q12_6	Radio	Q12_6 Radio	
Q12_7	Newspaper/magazine	Q12_7 Newspaper/magazine	
Q12_8	In-person events (e.g., health fair, community fair)	Q12_8 In-person events (e.g., health fair, community fair)	
Q12_9	At physical locations, such as an office or waiting room	Q12_9 At physical locations, such as an office or waiting room	
Q12_10	Mail	Q12_10 Mail	
Q12_11	Other (please specify) [Open-Ended]	Q12_11 Other (please specify) [Open-Ended]	
Q12_12	None of the above [Exclusive] <b>//Deselect all other options//</b>	Q12_12 None of the above	
-99	Refused	Refused	<b>//Skip to Q14//</b>

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**//DISPLAY Q13 ONLY IF Q12\_1=1//**

**Question Type:** Multi Select

**Q13.** Through which social media platforms did your organization distribute materials? (Select all that apply.)

**Variable Label:** Q13: Social media used

Value	Variable Text	Variable Label	Programming Notes
Q13_1	Facebook	Q13_1 Facebook	<b>//Continue to Q14//</b>
Q13_2	Instagram	Q13_2 Instagram	
Q13_3	TikTok	Q13_3 TikTok	
Q13_4	YouTube	Q13_4 YouTube	
Q13_5	X (formerly known as Twitter)	Q13_5 X (formerly known as Twitter)	
Q13_6	Snapchat	Q13_6 Snapchat	
Q13_7	Reddit	Q13_7 Reddit	
Q13_8	LinkedIn	Q13_8 LinkedIn	
Q13_9	Pinterest	Q13_9 Pinterest	

Q13_10	Other (specify) [Open-Ended]	Q13_10 Other (specify)	
Q13_11	None of the above [exclusive] <b>//Deselect all other options//</b>	Q13_11 None of the above	
-99	Refused	Refused	<b>//Continue to Q14//</b>

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**Question Type:** Multi Select

**Q14.** How, if at all, did your organization adapt the Stop Overdose campaign materials? (Select all that apply.)

**Variable Label:** Q14: Materials adaptation

Value	Variable Text	Variable Label	Programming Notes
Q14_1	Incorporated Stop Overdose messages or content into products our organization designed	Q141 Incorporated Stop Overdose messages or content into products	
Q14_2	Added our organization's logo to existing Stop Overdose products	Q14_2 Added our organization's logo to existing products	
Q14_3	Created our own drug overdose prevention campaign inspired by Stop Overdose campaign(s)	Q14_3 Created our own drug overdose prevention campaign inspired by Stop Overdose campaign	<b>//Continue to Q15//</b>
Q14_4	Other (specify) [Open-Ended]	Q14_4 Other (specify)	
Q14_5	None of the above [Exclusive] <b>//Deselect all other options//</b>	Q14_5 None of the above	
-99	Refused	Refused	<b>//Continue to Q15//</b>

Value	Value Label
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0	Not selected
1	Selected
-99	Refused

**Question Type:** Multi Select

**Q15.** Has your organization **planned** any of the following evaluations for any efforts containing Stop Overdose campaigns? (Select all that apply.)

**Variable Label:** Q15: Evaluation efforts planned

Value	Variable Text	Variable Label	Programming Notes
Q15_1	Process evaluation (e.g., social media metrics, number of posts, number of impressions)	Q15_1 Process evaluation	
Q15_2	Outcome evaluation (e.g., data such as knowledge, attitudes, and behaviors)	Q15_2 Outcome evaluation	//Continue to Q16//
Q15_3	Impact evaluation (e.g., assess campaign effects on specified drug overdose indicators)	Q15_3 Impact evaluation	
Q15_4	Other (specify) [Open-Ended]	Q15_4 Other (specify) [Open-Ended]	
Q15_5	My organization has not planned any evaluation efforts [Exclusive] //Deselect all other options//	Q15_5 My organization has not planned any evaluation efforts	
-99	Refused	Refused	//Continue to Q16//

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**Question Type:** Multi Select

**Q16.** Has your organization already **conducted** any of the following evaluations for any efforts containing Stop Overdose campaigns? (Select all that apply.)

**Variable Label:** Q16: Evaluation efforts conducted

Value	Variable Text	Variable Label	Programming Notes
Q16_1	Process evaluation (e.g., social media metrics, number of posts, number of impressions)	Q16_1 Process evaluation	
Q16_2	Outcome evaluation (e.g., data such as knowledge, attitudes, and behaviors)	Q16_2 Outcome evaluation	
Q16_3	Impact evaluation (e.g., assessed campaign effects on specified drug overdose indicators)	Q16_3 Impact evaluation	//Continue to Q17//
Q16_4	Other (specify) [Open-Ended]	Q16_4 Other (specify)	
Q16_5	My organization has not conducted any evaluation efforts. [Exclusive] <b>//DE-SELECT ALL OTHER OPTIONS//</b>	Q16_5 My organization has not conducted any evaluation efforts	
-99	Refused	Refused	//Continue to Q17//

Value	Value Label
0	Not selected
1	Selected
-99	Refused

**Question Type:** Single Select

**Q17.** Did your organization use the Evaluation Profile for Implementing an Overdose Communication Campaign document? Please click [here](#) to see the Evaluation Profile (in a new window).

**Variable Label:** Q17: Implementation of the Evaluation Profile

Value	Variable Text	Programming Notes
1	Yes	//Continue to Q18//
2	No, we were aware of the Evaluation Profile but we did not use it.	//SKIP to Q19//
3	No, we were unaware of the Evaluation Profile.	
4	I don't know	//SKIP to Q19//
-99	Refused	//SKIP to Q19//

//DISPLAY Q18 ONLY IF Q17=1//

**Question Type:** Single Select

**Q18.** How useful did you find the Evaluation Profile to your work?

**Variable Label:** Q18: Evaluation Profile usefulness

Value	Variable Text
1	Not at all useful
2	Slightly useful
3	Somewhat useful
4	Moderately useful
5	Extremely useful
-99	Refused

//NEW BLOCK//

//PERCEPTIONS OF STOP OVERDOSE CAMPAIGN PRODUCTS (RQ2)//

**Question Type:** Single Select

**Q19.** What is your overall level of satisfaction with the Stop Overdose campaigns materials?

**Variable Label:** Q19: Overall satisfaction with materials

Value	Variable Text
1	Not at all satisfied
2	Slightly satisfied
3	Moderately satisfied
4	Very satisfied
5	Extremely satisfied
-99	Refused

**Question Type:** Single Select Grid

**Q20.** Overall, to what extent do you feel the Stop Overdose campaign materials are...?

**Variable Label:** Q20: Assessment of materials

Value	Variable Text	Variable Label	Programming Notes
Q20_1	Easy to understand	Q20_1 Easy to understand	//Continue to Q21//
Q20_2	Informative	Q20_2 Informative	
Q20_3	Useful to your work	Q20_3 Useful to your work	
Q20_4	High quality	Q20_4 High-quality	
Q20_5	Visually engaging	Q20_5 Visually engaging	
Q20_6	Memorable	Q20_6 Memorable	
Q20_7	Likable	Q20_7 Likable	
-99	Refused	Refused	//Continue to Q21//

Value	Variable Text
1	Not at all
2	Slightly
3	Somewhat
4	Moderately
5	Extremely
-99	Refused

**Question Type:** Single Select Grid

**Q21.** To what extent do you feel the following Stop Overdose campaign products are useful to your work?

**Variable Label:** Q21: Usefulness of campaign materials

Value	Variable Text	Variable Label	Programming Notes
Q21_1	Videos	Q21_1 Videos	//Continue to Q22//
Q21_2	Out-of-home	Q21_2 Out-of-home	
Q21_3	Posters	Q21_3 Posters	
Q21_4	Digital display ads	Q21_4 Digital display ads	
Q21_5	Static social media ads	Q21_5 Static social media ads	
Q21_6	Animated social media ads	Q21_6 Animated social media	

		ads	
Q21_7	YouTube ads	Q21_7 YouTube ads	
Q21_8	Streaming audio/radio ads	Q21_8 Streaming audio/radio ads	
Q21_9	Fact sheets	Q21_9 Fact sheets	
Q21_10	PowerPoint decks	Q21_10 PowerPoint decks	
Q21_11	Postcards	Q21_11 Postcards	
Q21_12	Pharmacy bags/delivery bag inserts	Q21_12 Pharmacy bags/delivery bag inserts	
Q21_13	Infographics	Q21_13 Infographics	
-99	Refused	Refused	//Continue to Q22//

Value	Variable Text
1	Not at all useful
2	Slightly useful
3	Somewhat useful
4	Moderately useful
5	Extremely useful
6	Have not used
-99	Refused

**Question Type:** Open End

**Q22.** Please describe specific aspects of the Stop Overdose campaign materials and products that suited your work the most and why?

**Variable Label:** Q22: Best suited materials

//Lower Limit: 1 character//

//Upper Limit: 400 characters//



//NEW BLOCK//

// FACILITATORS AND BARRIERS//

**Question Type:** Single Select Grid

**Q23.** Please rate the extent to which you agree with the following statements.

**Variable Label:** Q23: Agreement on facilitator statements

Value	Variable Text	Variable Label	Programming Notes
Q23_1	Stop Overdose campaign materials are readily accessible.	Q23_1 Stop Overdose campaign materials are readily accessible.	
Q23_2	Our organizational leaders support us using Stop Overdose campaign materials.	Q23_2 Our organizational leaders support us using Stop Overdose campaign materials.	
Q23_3	There is sufficient ongoing communication about the Stop Overdose campaigns.	Q23_3 There is sufficient ongoing communication about the Stop Overdose campaigns.	
Q23_4	Support or training to implement Stop Overdose campaign materials are readily accessible.	Q23_4 Support or training to implement Stop Overdose campaign materials are readily accessible.	
Q23_5	I know how to request technical assistance for using the Stop Overdose campaign materials.	Q23_5 I know how to request technical assistance for using the Stop Overdose campaign materials.	
-99	Refused	Refused	

//Continue to Q24//

//Continue to Q24//

Value	Variable Text
1	Do not at all agree
2	Slightly agree
3	Somewhat agree
4	Moderately agree
5	Completely agree
6	N/A
-99	Refused

**Question Type:** Single Select Grid

**Q24.** To what extent did the following factors make implementing the Stop Overdose campaign materials or products challenging?

**Variable Label:** Q24: Challenges to use materials

Value	Variable Text	Variable Label	Programming Notes
Q24_1	Time constraints	Q24_1 Time constraints	
Q24_2	Inadequate staffing	Q24_2 Inadequate staffing	
Q24_3	Cost/Funding	Q24_3 Cost/Funding	
Q24_4	Lack of resources	Q24_4 Lack of resources	
Q24_5	Lack of communication expertise	Q24_5 Lack of communication expertise	
Q24_6	Low staffing	Q24_6 Low staffing	
Q24_7	Product types	Q24_7 Product types	
Q24_8	External policies	Q24_8 External policies	
Q24_9	Internal policies	Q24_9 Internal policies	
-99	Refused	Refused	//Continue to Q25//

Value	Variable Text
1	Not at all
2	Slightly
3	Somewhat
4	Moderately
5	Extremely
6	N/A
-99	Refused

**Question Type:** Open End

**Q25.** Please share any additional comments about other factors that influenced how easy or difficult it was to implement Stop Overdose campaign materials or products.

**Variable Label:** Q25: Comments on influencing factors

//Lower Limit: 1 character//

//Upper Limit: 500 characters//

//NEW BLOCK//

//LESSONS LEARNED//

**Question Type:** Open End

**Q26.** What lessons learned would you share with another OD2A grantee about implementing Stop Overdose campaign products or materials?

**Variable Label:** Q26: Lessons learned

**//Lower Limit:** 1 character//

**//Upper Limit:** 500 characters//

**Question Type:** Multi Select

**Q27.** In which areas listed below do you feel the Stop Overdose campaign materials and products could be improved?

**Variable Label:** Q27: Improvement of materials

Value	Variable Text	Variable Label	Programming Notes
Q27_1	Visual design	Q27_1 Visual design	<b>//Continue to Q28//</b>
Q27_2	Message content	Q27_2 Message content	
Q27_3	Message wording	Q27_3 Message wording	
Q27_4	More variety of digital products	Q27_4 More variety of digital products	
Q27_5	Ease of use	Q27_5 Ease of use	
Q27_6	Training on use	Q27_6 Training on use	
Q27_7	Other (specify) [Open-Ended]	Q27_7 Other (specify) [Open-Ended]	
Q27_8	None of the above [Exclusive] <b>//DE-SELECT ALL OTHER OPTIONS//</b>	Q27_8 None of the above	
-99	Refused	Refused	<b>//Continue to Q28//</b>

**Question Type:** Open End

**Q28.** What support from CDC would be most helpful to your organization’s implementation of drug overdose prevention communications (e.g., training, consultation, partnerships, materials)?

**Variable Label:** Q28: CDC support would be helpful

**//Lower Limit:** 1 character//

**//Upper Limit:** 500 characters//

**Question Type:** Open End

**Q29.** Please provide any other comments or feedback that you would like to share.

**Variable Label:** Q29: Additional comments or feedback

**//Lower Limit:** 1 character//

**//Upper Limit:** 500 characters//

//NEW BLOCK//

// DEMOGRAPHICS //

**Question Type:** Open End

**Q30.** What is your role in your organization as it relates to OD2A?

**Variable Label:** Q30: Role in the organization

//Lower Limit: 1 character//

//Upper Limit: 200 characters//

--

**Question Type:** Single Select

**Q30A.** Are you...

Value	Variable Text	Programming Notes
1	A state government employee	//Continue to Q31//
2	A local government employee	
3	A vendor or contractor	
4	Other (please specify)	
-99	Refused	

**Question Type:** Single Select

**Q31.** What is your OD2A funding mechanism?

**Variable Label:** Q31: Funding mechanism

Value	Variable Text	Programming Notes
1	OD2A in States	//Continue to Q32//
2	OD2A: LOCAL	
-99	Refused	//Continue to Q32//

**Question Type:** Single Select

**Q32.** How long have you worked at this organization?

**Variable Label:** Q32: Time working at organization

Value	Variable Text
1	Less than 6 months
2	6 months to less than 1 year
3	1-2 years
4	3-5 years
5	6+ years
-99	Refused

**Question Type:** Single Select

**Q33.** How many years has your organization received OD2A funding?

**Variable Label:** Q33: Time receiving OD2A funding

Value	Variable Text
1	Less than 1 year
2	1 year
3	2 years
4	3 years
5	4+ years
6	Don't know
-99	Refused

**//END OF MAIN SURVEY//**

**//TEXT//**

Please click [[link to separate survey](#)] to continue.

**//NEW SURVEY//**

**//TEXT//**

The information you submit in this form will be completely separate from your answers to the survey.

**Question Type:** Open End

**S1.** What is the name of your organization?

**Variable Label:** S1: Organization's name

**//Require response//**

**//Lower Limit: 2 characters//**

**//Upper Limit: 15 characters//**

**Question Type:** Single Select

**S2.** In some instances, we may be interested in further details about your experience. Do you wish to be contacted for follow-up?

**Variable Label:** S2: Follow-up information

**//NO SOFT PROMPT if left blank//**

Value	Variable Text	Programming Notes
1	Yes	//Continue to S3//
2	No	//Continue to END OF SHORT SURVEY//
-99	Refused	//Continue to END OF SHORT SURVEY//

**//NEW PAGE//**

**Question Type:** Open End

**S3.** Name (optional)

**Variable Label:** S3: Name

**//NO SOFT PROMPT if left blank//**

**Question Type:** Open End

**S4.** Email address (optional)

**Variable Label:** S4: Email address

**//NO SOFT PROMPT if left blank//**

**//Verify valid email address format//**

**//END OF SHORT SURVEY//**

//TEXT//

Thank you for taking the time to complete this survey!