

Health Department Naloxone Program
Training Evaluation (Group Training)

In what community did you receive this training?

- Ashland
- Framingham
- Hudson
- Natick
- Other _____

What is your gender?

- Female
- Male
- Non binary/third gender
- Prefer to self- describe _____
- Other

What is your race? (select all that apply)

- American Indian/Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- More than one race
- Other Race _____

Do you identify as transgender?

- Yes
- No
- Prefer not to say

Please select your age range:

- Under 18
- 19-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+

Do you identify as any of the following?

- Latino/Latina
- Hispanic
- Brazilian
- None of the above

PLEASE ANSWER THE FOLLOWING QUESTIONS

I understand what opioids are and how they work

1	2	3	4	5
Not at all			A great deal	

I understand how to recognize and respond to an opioid overdose

1	2	3	4	5
Strongly disagree			Strongly agree	

I understand the basic principles of harm reduction philosophy

1	2	3	4	5
Strongly disagree			Strongly agree	

How effective was this training in providing you the tools needed to help someone who is experiencing an overdose?

1	2	3	4	5
Not effective at all			Very effective	

To what extend do you feel confident in your ability to come to the aid of someone experiencing an overdose?

1	2	3	4	5
Not confident at all			Very confident	

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