

Justice Community Overdose Innovation Network (JCOIN)

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# **The 2026 National Survey of Substance Use Services in Jails**

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The availability, accessibility, and use of  
services for substance use disorders.

For questions about this survey,  
please email [JCOINJailSurvey@norc.org](mailto:JCOINJailSurvey@norc.org)  
or call 877-369-3240.



## About this Survey

The purpose of this survey is to learn more about the services for substance use disorders available to those in jails across the US. This survey is an activity of the Justice Community Overdose Innovation Network (JCOIN), a National Institute on Drug Abuse (NIDA) research initiative. NORC at the University of Chicago is a non-profit research organization that is conducting this survey on behalf of JCOIN. This survey follows up on a survey fielded in 2022-2023, and aims to assess any changes in the services provided on a national level. Your participation is essential to make this survey a success.

This survey may also be completed via web or phone. To do so, visit [JCOINsurvey.norc.org](https://jcoinsurvey.norc.org) and enter your PIN from the invitation letter or call NORC at 877-369-3240. Please email [JCOINjailsurvey@norc.org](mailto:JCOINjailsurvey@norc.org) if you have trouble locating your PIN.

## Consent to Participate

This survey will take approximately 20 minutes to complete; however it may take additional time to look up the information required to complete the survey. Your participation is voluntary and you may choose to skip any questions. Your responses are confidential and will not be matched directly to you or your facility in any reports of survey findings. Researchers who are part of JCOIN may have access to your jail's individual responses that may be connected to your jail. Response-level data with your jail's information removed may be shared so that it is accessible to researchers outside of JCOIN.

By returning this completed survey, you:

- Indicate you have read the information provided above.
- Voluntarily agree to participate in this survey.
- Understand you have the right to withdraw as a participant at any time or refuse to answer any questions you do not want to answer.

## Instructions

### Complete the Survey

You may mail this completed paper survey back to NORC using the envelope provided. See above for instructions on how to submit this survey via web or complete it with an interviewer over the phone. Please email [JCOINJailSurvey@norc.org](mailto:JCOINJailSurvey@norc.org) with questions.

### Identify a Staff Member

This survey should be completed by a staff member(s) who can speak to all substance use disorder screening and treatment protocols in your jail. More than one person may be needed to complete the survey.

For this survey, information for the following should be included:

- Jails and other confinement facilities—including detention centers that are either privately owned and operated or administered by two or more governments (or a board composed of representatives from two or more governments).
- Temporary holding or lockup facilities if they are part of your combined function.
- All individuals detained at this facility, including pretrial and sentenced individuals.

Do not include information for:

- Services for individuals held BY other jurisdictions (for example, another county housing inmates at their facility on your behalf).
- Services for individuals under community corrections or supervision who are NOT detained, including electronic monitoring, probation, parole, or diversion.

## Clearly Mark Your Answers

This survey contains several types of questions. Please select only one response option unless otherwise noted.

- 1** For some questions, you answer the question by marking a box, like this:

Yes

No

## Follow Pathways to Questions

- 2** Please continue to the next question unless you are told to skip over questions in this survey. When this happens, you will see an arrow with a note that tells you what question to answer next, like this:

Yes → *SKIP to Question 5*

No

- 3** You may also see a note starting with an exclamation point (!) that tells you how to proceed based on your previous responses or characteristics of your jail, like this:

**!** If your jail does not offer Buprenorphine to pregnant people **SKIP to Question 51.**

## Section 1: Jail Information

- 11** Throughout this survey, we would like you to provide information on the most recent, full 12-month period for which the jail has reasonably complete data. Please identify the most recent 12 consecutive months for which your jail has complete or near-complete data. This period may be a calendar year or fiscal year, depending on how your records are maintained.

Year start:   /   /

Year end:   /   /

**!** When the survey asks, "In the past 12 months," please report on the year you indicated above.

- 12** Please provide your contact information in case we'd like to follow up with you about your survey responses:

Name:

Job title:

Phone number:

Email address:

- 13** Please confirm or provide the full name and the contact information for the jail or facility for which you are completing the survey.

Facility Name:

Street address:

City:

State:

Zip:

Phone number:

Email address:

- 1.3a.** Please select whether this information applies to one facility or a set of facilities in a jail system.

One specific facility

Set of facilities

**!** Please provide data for this facility or set of facilities when completing the survey.

- 14** Who comprises the jail's population (pre-trial and sentenced)?

Males only

Females only

Both males and females

- 15** Which of the following operate this jail? *Select all that apply.*

The county

A city, town, or other municipality

A regional public entity, Department of Corrections (DOC), or Unified System

A court, sheriff's office, or elected official

A private contractor to one of the above

A Tribe or Tribal Consortium

Other (please specify):

- 16** Which model best describes the current health care delivery in the jail (including general healthcare, mental health, and addiction services)?

Direct services (i.e., all healthcare services provided by jail employees)

Contracted services (i.e., all healthcare services provided by contracted vendor(s)/provider(s))

Hybrid, or a combination of direct and contracted services

Other (please specify):

**1.7** In the past 12 months, how many uniformed correctional staff positions (including all ranks) was the jail authorized to fill?

- 1  0–10
- 2  11–20
- 3  21–50
- 4  51–100
- 5  101–200
- 6  Over 200 (please specify):

**1.8** In the past 12 months, on average, what was the vacancy rate for uniformed correctional staff positions (including all ranks)?

- 1  0% (we had no vacancies)
- 2  1-10%
- 3  11-20%
- 4  21-30%
- 5  31-40%
- 6  41-50%
- 7  51-60%
- 8  More than 60%

**1.9** In the past 12 months, on average, how many licensed healthcare providers were employed or contracted by the jail to provide general medical services (e.g., treatment for acute or chronic illness)? Please include all medical staff including physicians (MD/DOs), physician assistants, nurse practitioners, and nurses.

- 0  None
- 1  1
- 2  2
- 3  3
- 4  4
- 5  5
- 6  6
- 7  More than 6 (please specify):

**1.10** In the past 12 months, on average, how many licensed addiction treatment providers were employed or contracted by the jail? Licensed addiction treatment providers may include substance use disorder professionals, counselors, doctors (MD/DO), nurse practitioners, or social workers. Do not include those who provide peer support without other licensure.

- 0  None
- 1  1
- 2  2
- 3  3
- 4  4
- 5  5
- 6  6
- 7  More than 6 (please specify):

**1.11** In the past 12 months, what was the average daily population of the jail?

- 1  0–10
- 2  11–25
- 3  26–50
- 4  51–100
- 5  101–200
- 6  201–500
- 7  501–1,000
- 8  Over 1,000 (please specify):

**1.11a.** Was that number estimated or based on jail records?

- 1  Estimated
- 2  Based on jail records

**1.12** In the past 12 months, what was the rated capacity of the jail? *Rated capacity is the number of beds or persons assigned by a rating official to institutions within the jurisdiction.*

- 1  0–10
- 2  11–25
- 3  26–50
- 4  51–100
- 5  101–200
- 6  201–500
- 7  501–1,000
- 8  Over 1,000 (please specify):

**1.12a.** Was that number estimated or based on jail records?

- 1  Estimated
- 2  Based on jail records

**1.13** In the past 12 months, what was the average length of stay in the jail?

- 1  Less than 1 day (up to 24 hours)
- 2  1 to 3 days
- 3  4 to 6 days
- 4  About 1 to 2 weeks
- 5  About 3 to 4 weeks
- 6  About 1 to 3 months
- 7  About 4 to 6 months
- 8  About 7 to 12 months
- 9  More than 1 year

**1.13a.** Was the number provided estimated or based on jail records?

- 1  Estimated
- 2  Based on jail records

## Section 2: Withdrawal Screening and Management

The remainder of the survey will focus on services for substance use disorders. This section asks about jail processes for identifying and treating individuals who are in withdrawal from alcohol, opioids, or stimulants.

*Opioids include drugs such as heroin and fentanyl, as well as many prescription pain medications.*

*Stimulants include prescription stimulants (e.g., Adderall, Ritalin), amphetamine/methamphetamines (meth), and cocaine/crack, among others.*

### 2.1 How does the jail identify people who are in withdrawal or at risk of withdrawing from alcohol? *Select all that apply.*

- 1  The jail does not identify people who are withdrawing or at risk of withdrawing from alcohol → **SKIP to Question 2.2**
- 2  The intake process asks about symptoms and/or history of withdrawal.
- 3  The intake process does not ask about withdrawal; we wait until individuals self-report symptoms and/or history of withdrawal.
- 4  Clinical staff observe withdrawal symptoms.
- 5  Other (please specify):

#### 2.1a. If an individual is determined to be in withdrawal from alcohol, does the jail provide medications for withdrawal management?

- 1  Yes
- 2  No
- 3  Don't know/data do not exist

### 2.2 How does the jail identify people who are in withdrawal or at risk of withdrawing from opioids (e.g., heroin)? *Select all that apply.*

- 1  The jail does not identify people who are withdrawing or at risk of withdrawing from opioids → **SKIP to Question 2.3**
- 2  The intake process asks about symptoms and/or history of withdrawal.
- 3  The intake process does not ask about withdrawal; we wait until individuals self-report symptoms and/or history of withdrawal.
- 4  Clinical staff observe withdrawal symptoms.
- 5  Other (please specify):

#### 2.2a. If an individual is determined to be in withdrawal from opioids, does the jail provide medications for withdrawal management?

- 1  Yes
- 2  No
- 3  Don't know/data do not exist

### 2.3 How does the jail identify people who are in withdrawal or at risk of withdrawing from stimulants? *Select all that apply.*

- 1  The jail does not identify people who are withdrawing or at risk of withdrawing from stimulants → **SKIP to Section 3**
- 2  The intake process asks about symptoms and/or history of withdrawal.
- 3  The intake process does not ask about withdrawal; we wait until individuals self-report symptoms and/or history of withdrawal.
- 4  Clinical staff observe withdrawal symptoms.
- 5  Other (please specify):

#### 2.3a. If an individual is determined to be in withdrawal from stimulants, does the jail provide medications for withdrawal management?

- 1  Yes
- 2  No
- 3  Don't know/data do not exist

## Section 3: Substance Use Disorder Screening

The following questions ask about the jail's processes for identifying individuals with alcohol use or other substance use disorders.

### 3.1 Does the jail screen individuals for possible alcohol use disorder?

- 1  Yes
- 2  No → **SKIP to Question 3.3**

### 3.2 How does the jail determine which individuals will be screened for possible alcohol use disorder? *Select all that apply.*

- 1  Everyone is screened (including screening that takes place at booking/intake or during universal medical intake processes)
- 2  Screening based on presenting charges (e.g., DUI) or court order
- 3  Jail follows a protocol set by Department of Corrections or other entity
- 4  Screening based on individual request/need
- 5  Other (please specify):

### 3.3 Does the jail screen individuals for possible opioid or other substance use disorders? *Select all that apply.*

- 1  Yes
- 2  No → **SKIP to Section 4**

**3.4** How does the jail determine which individuals will be screened for possible opioid or other substance use disorders? Select all that apply.

- 1  Everyone is screened (including screening that takes place at booking/intake or during universal medical intake processes)
- 2  Screening based on presenting charges (e.g., DUI) or court order
- 3  Jail follows a protocol set by Department of Corrections or other entity
- 4  Screening based on individual request/need
- 5  Other (please specify):

## Section 4: Substances In the Jail

The following questions ask about potential methods by which substances may enter your jail.

**4.1** In the past 12 months, has your jail confirmed drugs entering your facility via drug soaked paper?

- 1  Yes
- 2  No → **SKIP to Section 5**
- 3  Don't know/data do not exist → **SKIP to Section 5**

**4.2** In the past 30 days, how many times has your jail confirmed drugs entering your facility via drug soaked paper?

- 1  Never
- 2  Once
- 3  Twice
- 4  3–6 times
- 5  7–10 times
- 6  More than 10 times
- 7  Don't know/data do not exist

## Section 5: Treatment and Medication Assisted Treatment (MAT)

The following questions ask about the types of substance use services available in the jail, including medication assisted treatment (MAT) for opioid, alcohol, and stimulant use disorders.

*Medication Assisted Treatment (MAT) is the use of medications, often in combination with behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders. Medications used for opioid use disorder include buprenorphine, methadone, and naltrexone. Medications often used for treating alcohol use disorder include naltrexone and disulfiram.*

**5.1** In the past 12 months, have medications been available in this jail to treat opioid use disorder?

- 1  Yes → **SKIP to Question 5.3**
- 2  No

**5.2** Please select up to three reasons why MAT has not been available to treat opioid use disorder in the past 12 months.

- 1  We do not see many individuals with an opioid use disorder
- 2  Policies prevent us from offering MAT
- 3  We do not have adequate staffing or staffing licensed to provide MAT
- 4  MAT is too expensive / budget does not allow
- 5  We are in the process of starting a MAT program
- 6  Regulatory barriers (e.g., OTP access, DEA constraints)
- 7  Security or operational limitations (diversion risk/storage)
- 8  Other (please specify):

**5.2a** Optional: If you would like to provide more information about your response above, please do so here.

**!** After answering this item, **SKIP to 5.12**

**5.3** If an individual is not already receiving MAT for opioid use disorder when they enter jail, what is the policy for when MAT is initiated?

- 0  MAT is not available in this jail to treat opioid use disorder → **SKIP to Question 5.12**
- 1  Individuals who were not already receiving MAT do not receive MAT while detained
- 2  As soon as possible during or after intake
- 3  Within the first week
- 4  Within the first month
- 5  After the first month
- 6  Within 60–90 days of release
- 7  Other (please specify):

**5.4** In the past 12 months, has buprenorphine been available to treat individuals with an opioid use disorder?

- 1  Yes
- 2  No → **SKIP to Question 5.6**
- 3  Don't know/data do not exist → **SKIP to Question 5.6**

**5.4a.** In what form has buprenorphine been provided?

- 1  Sublingual tablets or film placed under the tongue (e.g., Suboxone, Zubsolv)
- 2  Long-acting injection (e.g., Sublocade, Brixadi)
- 3  Both sublingual and long-acting injection
- 77  Not sure in which form

**5.5** Who has buprenorphine been made available to? *Select all that apply.*

- 1  Anyone with an opioid use disorder who requests it
- 2  People who are pregnant
- 3  People who were already receiving buprenorphine when booked into the jail
- 4  Individuals identified by a medical professional
- 5  People who were receiving naltrexone when booked into the jail (i.e., they are switched to buprenorphine)
- 6  People who were receiving methadone when booked into the jail (i.e., they are switched to buprenorphine)
- 7  Other (please specify):

**5.6** In the past 12 months, has methadone available to treat individuals with an opioid use disorder?

- 1  Yes
- 2  No → **SKIP to Question 5.8**
- 77  Don't know/data do not exist → **SKIP to Question 5.8**

**5.7** Who has methadone been made available to? *Select all that apply.*

- 1  Anyone with an opioid use disorder who requests it
- 2  People who are pregnant
- 3  People who were already receiving methadone when booked into the jail
- 4  People identified by a medical professional
- 5  People who were receiving naltrexone when booked into the jail (i.e., they are switched to methadone)
- 6  People who were receiving methadone when booked into the jail (i.e., they are switched to methadone)
- 7  Other (please specify):

**5.8** In the past 12 months, has naltrexone been available to treat individuals with an opioid use disorder?

- 1  Yes
- 2  No → **SKIP to Question 5.10**

→ **5.8a.** In what form has naltrexone been provided?

- 1  Long-acting injection (Vivitrol)
- 2  Tablet/pill
- 3  Both injection and pill
- 77  Not sure in which form

**5.9** Who has naltrexone been made available to? *Select all that apply.*

- 1  Anyone with an opioid use disorder who requests it
- 2  People who are pregnant
- 3  People who were already receiving naltrexone when booked into the jail
- 4  People identified by a medical professional
- 5  People who were receiving methadone when booked into the jail (i.e., they are switched to naltrexone)
- 6  People who were receiving buprenorphine when booked into the jail (i.e., they are switched to naltrexone)
- 7  Other (please specify):

**5.10** In the past 12 months, have medications been available in this jail to treat alcohol use disorder?

- 1  Yes
- 2  No → **SKIP to Question 5.12**

**5.11** In the past 12 months, which medications have been available to treat alcohol use disorder? *Select all that apply.*

- 1  Acamprosate (Campral)
- 2  Disulfiram (Antabuse)
- 3  Naltrexone (Vivotrol)
- 4  Other (please specify):

**5.12** In the past 12 months, have medications been available in this jail to treat stimulant use disorder? *Medications for stimulant use disorder often include bupropion and naltrexone.*

- 1  Yes
- 2  No → **SKIP to Question 5.14**

**5.13** Which medications have been available to treat stimulant use disorder? *Select all that apply.*

- 1  Bupropion and naltrexone
- 2  Bupropion (only)
- 3  Mirtazapine
- 4  Topiramate
- 5  Modafinil
- 6  Other (please specify):

**5.14** Besides MAT, are any other substance use treatment services and/or recovery support services available to people while they are in this jail?

- 1  Yes
- 2  No → **SKIP to Section 6**

**5.15** Which of the following substance use treatment or recovery support services are available? *Select all that apply.*

- 1  Outpatient substance use treatment by a licensed provider
- 2  Therapeutic community within the correctional system by a licensed provider
- 3  Services for co-occurring substance use and mental health conditions by a licensed provider
- 4  Self-help meetings (e.g., Alcoholics Anonymous, SMART Recovery)
- 5  Other (please specify):

## Section 6: Naloxone

This section asks about naloxone. Naloxone is a medication that is used to reverse an opioid overdose. The medication is often given by intranasal spray (into the nose) and can also be given via intramuscular (into the muscle), subcutaneous (under the skin) or intravenous injection. Narcan and RiVive are some examples of naloxone.

Opioid overdose is life-threatening and can occur when mixing or taking too much of an opioid. Signs include not responding to touch or voice; abnormal or slow breathing; pin-point sized pupils, and blue lips and nose.

**6.1** In the past 12 months, has naloxone (e.g., Narcan) been available for staff to reverse opioid overdoses within the jail?

- 1  Yes  
 2  No → **SKIP to Question 6.3**  
 77  Don't know/data do not exist → **SKIP to Question 6.3**

**6.2** Who does the jail train on how to administer naloxone? Select all that apply.

- 1  The jail does not provide naloxone training  
 2  Individuals in custody  
 3  Medical staff  
 4  Frontline correctional staff  
 5  All correctional staff  
 6  Other (please specify):

**!** After answering this question, **SKIP to 6.4**

**6.3** What are the reasons why naloxone is not available in the jail? Select all that apply.

- 1  Low rate of overdose in the jail  
 2  High cost of naloxone  
 3  Lack of a statute or regulation to allow naloxone  
 4  Lack of access to training or technical assistance  
 5  Limited availability of trained staff to administer it  
 6  Other (please specify):

**6.4** Please select yes or no for each item below. Prior to release, are individuals with an opioid use disorder or who are at risk of opioid overdose...

	Yes	No
1. provided with a naloxone kit?	1 <input type="checkbox"/>	2 <input type="checkbox"/>
2. provided with a prescription for naloxone?	1 <input type="checkbox"/>	2 <input type="checkbox"/>
3. given a referral to a community-based agency where naloxone can be obtained?	1 <input type="checkbox"/>	2 <input type="checkbox"/>
4. given information about where naloxone can be obtained in the community?	1 <input type="checkbox"/>	2 <input type="checkbox"/>
5. given instructions on how to administer naloxone?	1 <input type="checkbox"/>	2 <input type="checkbox"/>
6. provided other overdose education or information?	1 <input type="checkbox"/>	2 <input type="checkbox"/>
7. provided transportation to obtain naloxone in the community?	1 <input type="checkbox"/>	2 <input type="checkbox"/>

## Section 7: Preparation for Release

The following questions ask about the services jails provide to support individuals prior to release or reentry into the community.

**7.1** For individuals with an opioid use disorder, does the jail do any of the following in preparing for their release? Select all that apply.

	Yes, the jail does this	Yes, a partner/ contractor does this	No
1. Schedule appointments with MAT providers in the community	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
2. Provide names of MAT providers in the community	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
3. Assist with completing intake paperwork for community MAT provider	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
4. Facilitating exchange of information (e.g., medical records, treatment history) for community MAT provider	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
5. Coordinate MAT services with parole or probation officer	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
6. Assist with reactivating and/or applying for Medicaid or other types of insurance	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
7. Connect the individual to a peer mentor/navigator/recovery coach	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
8. Arrange transportation to a MAT provider in the community	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
9. Provide a bridge supply of multiple doses or days of MAT on the day of release	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
10. Provide written prescriptions for MAT upon release	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
11. Coordinate behavioral health services (other than MAT) with a provider in the community	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
12. Facilitate "reach in" services from community-based treatment providers (e.g., a provider contacts the individual prior to release to arrange for services after their release)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
13. Other things to facilitate linkage to MAT upon release: (please specify):	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

**7.2** Besides substance use services, which services does the jail, including jail contractors or via partnerships with organizations, provide to individuals to prepare for their release? *Select all that apply.*

- 1  Assessment for individual medical, educational, and/or social needs
- 2  Connection/referral to **shelter or housing**
- 3  Connection/referral to **food assistance** (e.g., SNAP benefits)
- 4  Connection/referral to **employment assistance** (e.g., job training, assistance with job searching)
- 5  Connection/referral to **healthcare services** other than substance use treatment (e.g., dentists, primary care providers)
- 6  Connection/referral to **public financial assistance** (e.g., Social Security, Supplemental Security Income, cash benefits for low-income parents with children).
- 7  Connection/referral to receive state **identification cards**
- 8  Development of **care plans**
- 9  Monitoring and **follow up on care plans**
- 10  None of the above

**7.3** Before release, what assistance does your facility offer to individuals who might be eligible for Medicaid? *Select all that apply.*

- 0  This facility does not provide pre-release Medicaid assistance → **SKIP to Question 7.5**
- 1  Assistance completing a Medicaid application
- 2  Initiating the renewal/recertification process
- 3  Assistance gathering required documents and/or completing forms
- 4  Submitting applications/forms online

**7.4** Before release, who helps individuals who might be eligible for Medicaid? *Select all that apply.*

- 1  Jail staff
- 2  Contracted medical or health care providers
- 3  Contracted social service providers (e.g., case managers, reentry coordinators)
- 4  Contracted peer support staff
- 5  Peer support volunteers
- 6  Other (please specify):

**7.5** When a person is in jail, their Medicaid benefits are either terminated or suspended. Some states have applied for Medicaid to cover some services while in jail (e.g., pre-release services), through a demonstration or waiver program. Does your facility participate in any Medicaid demonstration or waiver programs (e.g., Section 1115 managed-care, or reentry, waivers) that extend Medicaid services into jails?

- 1  Yes
- 2  No, but the facility is preparing to participate in a demonstration
- 3  No, and the facility does not have plans to participate in a demonstration
- 77  Don't know

**7.6** In the past 12 months, has your facility contracted with a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) to deliver on-site medical or addiction services?

- 1  Yes, for medical and addiction services
- 2  Yes, for medical services only
- 3  Yes, for addiction services only
- 4  No → **SKIP to Section 8**
- 77  Don't know

**7.6a** Briefly name or describe the FQHC/RHC partner(s):

## Section 8: Training, Technical Assistance, and Resource Needs

The following question asks about the training, technical assistance, and resources that would be helpful to your facility for providing substance use services for those in jail and at re-entry.

**8.1** What are the top three challenges your facility faces in implementing or expanding substance use disorder (SUD) services? *Please select up to three.*

- 1  Lack of qualified medical or behavioral health staff available to the jail
- 2  Lack of knowledge, training, and/or technical assistance for staff
- 3  Lack of leadership support
- 4  Limited staff and/or staff time for SUD services
- 5  Short duration of stays in the jail
- 6  Insufficient funding or budget constraints
- 7  Restrictive policies or regulations
- 8  Transportation and storage of medications
- 9  Security or operational concerns (e.g., diversion risk)
- 10  Negative attitudes towards SUD services among staff
- 11  Hesitancy or lack of trust in SUD services among individuals in custody
- 12  Difficulty coordinating with community providers
- 13  Challenges with obtaining or maintaining necessary licenses or waivers
- 14  Technology or infrastructure limitations (e.g., telehealth, electronic records)
- 15  Other (please specify):

**8.1a** Optional: If you would like to provide more information about your response above, please do so here.

## Section 9: General Medical Services

**9.1** In the past 12 months, have any of the following technologies been available to provide substance use disorder treatment or recovery support services to individuals? *Select yes or no for each item.*

	Yes	No
1. Telemedicine (live video conferencing with medical professionals)	1 <input type="checkbox"/>	2 <input type="checkbox"/>
2. Chat-based AI tools to support individuals with SUD treatment or recovery support	1 <input type="checkbox"/>	2 <input type="checkbox"/>
3. Wearable devices to monitor health	1 <input type="checkbox"/>	2 <input type="checkbox"/>
4. AI tools to assist staff with clinical decisions	1 <input type="checkbox"/>	2 <input type="checkbox"/>
5. Tablets or computers	1 <input type="checkbox"/>	2 <input type="checkbox"/>
6. Other technology (e.g., kiosks)	1 <input type="checkbox"/>	2 <input type="checkbox"/>

**9.2** In the past 12 months, have any GLP-1 medications (e.g., Ozempic, Wegovy, Zepbound) been offered at your jail or part of your jail's formulary (i.e., routinely available through jail medical services)? *GLP-1 medications are prescription drugs used to treat type 2 diabetes and support weight management.*

- 1  Yes  
2  No → **SKIP to Section 10**

**9.3** Are GLP-1 medications typically:

- 1  Continued if a person arrives with a community prescription  
2  Initiated during incarceration  
3  Both continued and initiated  
77  Don't know

## Section 10: Conclusion

**10.1** If we have questions about your responses or would like to contact you regarding additional survey or interview opportunities, how can we reach you?

Name:

Phone number:

### Thank you!

**Thank you for completing the National Survey of Substance Use Services in Jails. Your participation will help make this study a success, which will provide new insights to the current screening and treatment practices for substance use disorders within jail settings. We understand and appreciate that you have many demands on your time, and we are very grateful for your generous cooperation.**

**For questions about this survey, please e-mail [JCOINJailSurvey@norc.org](mailto:JCOINJailSurvey@norc.org).**

