**North Carolina Survivors Union Survey Assessing Methadone Access During COVID-19: Survey Design Suggestions for Future Studies**

**General comments and suggestions:**

Future studies should consider assessing whether take-home dosing has been consistent through COVID-19. For example, it would be informative to know if someone who received take-home doses initially was no longer receiving take-home doses, and if so, how long they received take-homes before they had to return to routine in-person visits. Additionally, it would be helpful to explicitly ask participants whether their clinic implemented changes to take-home dosing in response to COVID-19 and if these changes are still in place.

Since the days’ supply of take-home doses can change, it would be helpful to improve the ability to capture this information.

Reassuring people of the anonymity of the questionnaire, and that the clinic would not have access to the answers, seemed to encourage participation (this was a routinely expressed concern). Additionally, many people expressed concern about the time commitment, but on average the survey only took approximately three to four minutes to complete.

**Comments specific to survey questions:**

Question 2: A number of people did not respond, so this may have been confusing. We were trying to assess the length of uninterrupted treatment at current, but the phrasing seemed to be interpreted by some the same as question 1.

Question 4: This question was meant to capture the days’ supply since COVID-19 began, but the phrasing introduced some confusion. Responses to this question were inconsistent with durations identified in Question #5.

Questions 6-10: These questions were intended to capture whether the quality of the participants’ treatment experiences change while receiving take-home doses versus routine in-person daily visits. However, these questions may have introduced some confusion. These responses may vary and not be applicable for people who receive shorter-term take-home doses (e.g., a few days at a time, weekends only). We think it would be helpful to ask participants more directly whether they feel that take-home doses result in changes to maintaining a stable dose or quality of life.

Question 11: The response, “My take-homes come with something to measure doses,” may not be applicable for participants who receive take-home doses in a container containing a single day’s supply.

Questions 11-14: If possible given questionnaire space, it would be helpful to dichotomize (yes/no) the response for each question in order to assess potential issues with missing values.

Question 14: Saying “give away” may have led some respondents to answer under the impression we were asking about people strictly giving away their methadone. While the possible answer choices indicated we were asking about giving away, saving up, selling, etc., this wording may have caused some confusion. Ultimately, the question was trying to assess whether or not people were taking their methadone as prescribed.