

*FOR ASSESSOR ONLY: Before starting this quiz, please review the informed consent form with the participant and answer any questions they may have. Once completed, administer this quiz:*

*READ TO PARTICIPANT: Please answer the following questions to the best of your ability. We will not be grading this quiz – we will use your responses to make sure you know your rights as a participant in this project and understand what the project is about.*

Participation in this research study is not my decision.

- True
- False

I can decide to leave or walk away from this study at any time without loss of harm reduction services or any other negative consequences.

- True
- False

Any information I provide to the study staff can be shared with anyone who asks for it, without my permission.

- True
- False

For the first 2 months or so, I will be asked to complete weekly in-person assessments.

- True
- False

The follow up includes 3 assessments at 3-, 6-, and 12-months after the main part of the study is completed

- True
- False

All study publications will mention me by name.

- True
- False

I may contact Dr. Jordan (the study's Principal Investigator), the New York University Langone Health Human Investigations Committee, or other members of the research team if I have any questions about the study or my rights as a participant.

- True
- False