

# **NATIONAL SURVEY ON DRUG USE AND HEALTH**

## **COGNITIVE INTERVIEWING RESULTS FOR CIPSEA MATERIALS**

Contract No. 283-2004-00022  
RTI Project No. 0209009

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Prepared for:

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Rockville, Maryland 20857

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Research Triangle Park, North Carolina 27709

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# Executive Summary

On November 9, 2006, the Office of Management and Budget (OMB) approved the Substance Abuse and Mental Health Services Administration's (SAMHSA) Office of Applied Studies (OAS) as a statistical unit. As a result, OAS is now required to follow the Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA) implementation guidance in their sponsored surveys, including the National Survey on Drug Use and Health (NSDUH). With OMB guidance, SAMHSA revised various contact materials used in the NSDUH to incorporate CIPSEA language. These materials included the Lead Letter to Selected Dwelling Units, Study Description, and Question and Answer Brochure. Prior to fully administering the revised materials in the 2008 NSDUH, 24 cognitive interviews were conducted to compare the current contact materials administered in the 2007 NSDUH with the revised contact materials to be administered in the 2008 NSDUH. The main purpose of these interviews was to evaluate whether potential NSDUH respondents noticed a difference between the two versions of the materials. If the potential NSDUH respondents did notice a difference between the two versions of the materials, then the cognitive interviews evaluated whether the revisions would (1) change their decision to respond to the survey and (2) change their responses to the questions within the survey. Highlights on the findings and recommendations resulting from this aspect of the cognitive interviews are presented in the bullets below, and detailed results can be found in Section 3.1 of this report.

- Overall, the participants did not notice differences between the two versions of the NSDUH contact materials. There were only a couple of participants who noticed the actual changes in language due to CIPSEA. These comments were related to the language about confidentiality and the CIPSEA act (e.g., penalty for violation).
- The findings from these cognitive interviews suggest that the revisions will not adversely affect sample members' decisions to participate in the survey, nor will the revisions affect how honest respondents will be in reporting their answers in the survey. If any minor effect occurs, it might be in a positive way in that a couple of participants mentioned that they liked the increased emphasis on confidentiality (and the CIPSEA act) in the revised materials.
- There were no distinct patterns when looking at the differences in interview location (Location 1, versus Location 2), adults versus children, and drug use (users versus nonusers).
- There did not appear to be any noteworthy order effects where participant responses depended on the order of presentation of the current and revised contact materials.
- Overall, the findings mentioned above indicate that the CIPSEA language does not appear to have an impact on sample members' decisions to participate in the survey and how honest they would be in reporting answers within the survey. Thus, it is recommended that no additional research is needed at this time on the CIPSEA language included in the NSDUH contact materials.

A second purpose of the cognitive interviews was to evaluate how well potential NSDUH respondents understood the contact materials provided. During the cognitive interviews,

participants were asked questions by the interviewers to gauge their understanding of various phrases used within different sections of the contact materials that were read earlier by the participants. The findings and recommendations for this aspect of the cognitive interviews can be found in Section 3.2 of this report.



# 1.

# Background

The Overview of the Office of Management and Budget's (OMB) proposed implementation guidance on the Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA) states, "Issues of privacy and confidentiality are of increasing concern to respondents of Federal government surveys. Agencies often seek to assuage these concerns by pledging to respondents that the agency will protect the information that respondents provide, and by using whatever statutory authority that the agency has to substantiate this pledge. However, many agencies do not have strong confidentiality provisions in their authorizing statutes." It also states, "The CIPSEA is a new government-wide law that can provide strong confidentiality protections to many Federal agencies conducting statistical information collections such as surveys and censuses as well as other statistical activities including data analysis, modeling, sample design, etc." At large, CIPSEA protects information that is acquired for statistical purposes only, under a pledge of confidentiality. The protection of the information collected under this law is supported by a penalty of a Class E Felony for a knowing and willful disclosure of confidential information. This includes imprisonment for up to 5 years and fines up to \$250,000 (OMB, 2006).

In October 2006, the OMB issued the above-mentioned implementation guidance on CIPSEA (OMB, 2006). The purpose of this guidance was to inform agencies about the requirements for using CIPSEA and clarify the circumstances under which CIPSEA may be used. The guidance included suggested CIPSEA language to incorporate into the lead letter, study description, informed consent materials, survey instrument, or other materials that are read to or by the respondent.

One of the key distinctions made in the CIPSEA guidance is that the only agencies that are authorized to designate agents (e.g., RTI International<sup>1</sup>) to perform exclusively statistical activities (including data collection) subject to CIPSEA limitations and penalties are agencies that have been recognized by OMB as "statistical units." Thus, for purposes of CIPSEA, on November 9, 2006, the OMB approved the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Office of Applied Studies (OAS) as a statistical unit. As a result, OAS is now required to follow the CIPSEA implementation guidance in their sponsored surveys, including the National Survey on Drug Use and Health (NSDUH). Since the 2007 NSDUH was prepared to enter the field in January 2007, and OMB was aware that any revisions made to the NSDUH contact materials to incorporate CIPSEA language would need to be tested (e.g., via cognitive interviews), OAS was provided full clearance to conduct the 2007 NSDUH with the contact materials used in prior years. However, OMB did request that changes to NSDUH contact materials for purposes of CIPSEA be fully implemented in the 2008 NSDUH.

With OMB and Office of General Counsel (OGC) guidance, SAMHSA revised various contact materials used in the NSDUH to incorporate CIPSEA language according to the above-mentioned guidance. The revised contact materials included the Lead Letter to Selected Dwelling Units, Study Description, and Question and Answer Brochure. One key initial task prior to fully administering these materials in the 2008 NSDUH was to conduct cognitive tests

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<sup>1</sup> RTI International is a trade name of Research Triangle Institute.

comparing the current contact materials administered in the 2007 NSDUH with the revised contact materials to be administered in the 2008 NSDUH. The purpose of the cognitive testing was to first evaluate whether potential NSDUH respondents noticed a difference between the current and revised materials and, if so, whether the revisions would (1) change their decision to respond to the survey and (2) change their responses to the questions within the survey. The cognitive testing also evaluated how well potential NSDUH respondents understood the materials provided.<sup>2</sup>

This report documents the qualitative research conducted by RTI to evaluate the current and revised NSDUH contact materials. Chapter 2 provides a detailed description of the methodology used to conduct the research, and Chapter 3 provides the findings obtained from the cognitive interviews and recommendations based on these findings.

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<sup>2</sup> The current and revised versions of the NSDUH contact materials tested appear in Appendices A through F.

## 2.

# Methodology

Cognitive interviews were conducted with a total of 24 participants: 12 in each of two locations. This section of the report summarizes the main objectives of the research; describes the protocol developed for the project; and details the methodology for identifying, recruiting, and interviewing participants.

### 2.1 Objectives of the Cognitive Interviews

The main purpose of the cognitive interviews was to evaluate whether potential NSDUH respondents noticed a difference between the contact materials currently being administered in the 2007 survey and those revised to incorporate CIPSEA language that are to be administered in the 2008 NSDUH. If the potential NSDUH respondents did notice a difference between the two versions of the materials, then the cognitive interviews evaluated whether the revisions would (1) change their decision to respond to the survey and (2) change their responses to the questions within the survey. A second purpose of the cognitive interviews was to evaluate how well potential NSDUH respondents understood the materials provided. Cognitive interview participants were asked to respond to specific probes by an in-person cognitive interviewer.

### 2.2 Cognitive Interview Protocol

Three interview protocols were developed to be used in the 24 cognitive interviews: one for participants aged 12 to 17, one for adult participants recruited as parents or legal guardians of adolescents aged 12 to 17, and one for adult participants recruited as adults aged 18 or older. All three protocols were developed to administer the cognitive interview as follows:

1. Participants were asked to read through one version of the NSDUH contact materials.
2. Depending on their age, participants were either read the "Introduction and Informed Consent for Interview Respondents Aged 18+" or the "Introduction and Informed Consent for Interview Respondents Aged 12-17."
3. Participants were shown a short 2-minute video of a typical interaction between an interviewer and a potential respondent.
4. Based on the materials they just read and heard and the video they saw, the participants were asked to respond to pre-scripted questions by the cognitive interviewer.
5. Participants were asked to read through a second version of the NSDUH contact materials.
6. The appropriate NSDUH "Introduction and Informed Consent for Interview Respondents Aged XXX" was re-read to the participants.
7. Based only on the second set of materials they read and heard, participants were asked pre-scripted questions by the cognitive interviewer.

8. The cognitive interviewer asked the participants pre-scripted questions comparing the two different versions of the NSDUH contact materials.
9. The cognitive interviewer asked the participants pre-scripted questions about their general understanding of various terms and phrases in the NSDUH contact materials read by the participants earlier in the interview.

The version of the contact materials received first and second by the participants during the cognitive interviews was randomly assigned to reduce the potential for order effects. Twelve participants were asked to review the current version being administered in the 2007 survey first and then review the revised version, which incorporates the CIPSEA language and is to be administered in the 2008 NSDUH. The other 12 participants were asked to review the contact materials in the opposite order.

The NSDUH contact materials administered by the protocols developed for participants recruited as parents or legal guardians of adolescents aged 12 to 17 and for participants recruited as adults aged 18 or older included the Lead Letter to Selected Dwelling Units, Study Description, and Question and Answer Brochure. Since it is assumed that adolescents themselves are unlikely to see the lead letter in the main NSDUH, the Lead Letter to Selected Dwelling Units was not included with the NSDUH contact materials administered by the protocol developed for participants aged 12 to 17.

The protocol developed for participants recruited as parents or legal guardians of adolescents aged 12 to 17 included a few more pre-scripted questions than the protocols developed for participants aged 12 to 17 and participants recruited as adults aged 18 or older. These additional questions were used to evaluate whether the parent would allow their child to participate in the survey after reading through each version of the NSDUH contact materials.

Four cognitive interview participants were administered the protocol for participants aged 12 to 17, 4 were administered the protocol for participants recruited as parents or legal guardians of adolescents aged 12 to 17, and 16 were administered the protocol for participants recruited as adults aged 18 or older. See Appendix G for the completed cognitive interview protocols for this study.

### **2.3 Participant Recruitment**

To ensure that the cognitive interview participants represented more than one geographical location in the United States, 12 participants were recruited from two different metropolitan areas. Within each location, the recruitment criteria were established to ensure that the cognitive interview participants represented various characteristics of the NSDUH main study sample (e.g., varying age groups and education levels, drug users and non-drug users). Thus, within each location, it was recommended that participants be recruited according to the matrix presented in Table 1 below.

**Table 1. Recruiting Matrix (for each location)**

Characteristics	Requested Number of Participants
Aged 12 to 17	2
Parents or legal guardians of adolescents aged 12 to 17	2
Aged 18 to 49, illegal drug user in past 12 months, less than high school education	1
Aged 18 to 49, illegal drug user in past 12 months, at least a high school education	1
Aged 18 to 49, never used illegal drugs in lifetime, less than high school education	1
Aged 18 to 49, never used illegal drugs in lifetime, at least a high school education	1
Aged 50 or older, illegal drug user in past 12 months, less than high school education	1
Aged 50 or older, illegal drug user in past 12 months, at least a high school education	1
Aged 50 or older, never used illegal drugs in lifetime, less than high school education	1
Aged 50 or older, never used illegal drugs in lifetime, at least a high school education	1

To summarize, participants were either recruited as adolescents aged 12 to 17, as parents or legal guardians of adolescents aged 12 to 17, or as adults aged 18 or older. During the recruitment process, only potential participants being screened as adults aged 18 or older were asked (1) if they were a high school graduate (including GED) and (2) whether they used illegal drugs in their lifetime, the past 12 months, and/or in the past 30 days. For purposes of this study, use of illegal drugs included the use of marijuana, cocaine, crack, heroin, hallucinogens (i.e., PCP, LSD, and ecstasy), and/or the illegal use of methamphetamine. Use of alcohol, tobacco, and/or prescription drugs was not considered illegal drug use.

Recruitment was conducted by placing ads on craigslist (craigslist.org), a free online community-based bulletin board. Different ads were posted for adolescents aged 12 to 17, parents or legal guardians of adolescents aged 12 to 17, and adults aged 18 or older. All ads invited interested persons to call a toll-free number to determine whether they were eligible to participate in the study. The text for the ads is included in Appendix H.

When interested participants called the toll-free number, they were screened for eligibility (see Appendix I for the recruitment screeners). Persons aged 12 to 17 were considered eligible to participate only after permission was obtained from a parent during the screening process (see Appendix J for the script for parental informed consent). If, for one of the two locations, interested participants calling in met the eligibility requirements for one of the cells in the matrix detailed in Table 1 above that had already been filled (e.g., a parent of an adolescent was calling in from Location 1, and we had already recruited two parents of adolescents in Location 1), they were placed on a "will call back" list in the event that we needed to fill vacant cells at the end of the recruiting process to conduct a total of 24 interviews.

After screening 83 interested participants between the two locations, two thirds of the cognitive interview participants were recruited according to the various eligibility requirements detailed in the matrix in Table 1 above. No participants of the following types were identified:

### Location 1

- Person aged 18 to 49, illegal drug user in past 12 months, less than high school education
- Person aged 50 or older, illegal drug user in past 12 months, less than high school education
- Person aged 50 or older, illegal drug user in past 12 months, at least a high school education
- Person aged 50 or older, never used illegal drugs in lifetime, less than high school education

### Location 2

- Person aged 18 to 49, illegal drug user in past 12 months, less than high school education
- Person aged 18 to 49, never used illegal drugs in lifetime, less than high school education
- Person aged 50 or older, illegal drug user in past 12 months, less than high school education

Based on SAMHSA feedback, the above-mentioned difficult-to-recruit participants were respectively replaced with participants on the "will call back" list who had met the following eligibility criteria:

### Location 1

- 4 persons aged 18 to 49, illegal drug user in past 12 months, at least a high school education

### Location 2

- Person aged 18 to 49, illegal drug user in past 12 months, at least a high school education
- Person aged 18 to 49, never used illegal drugs in lifetime, at least a high school education
- Person aged 50 or older, illegal drug user in past 12 months, at least a high school education

Once a caller was screened in for participating, the recruiter provided additional information about the study, including

- the purpose of the study,
- the amount of time required to participate (approximately 1 hour),
- the location of the cognitive interviews,

- the amount of incentive (\$50 gift card for first 9 participants, \$40 gift card for remaining 15 participants<sup>3</sup>),
- the voluntary nature of participation, and
- the fact that sessions would be audio recorded.

Callers who were interested in participating and who were determined to be eligible were scheduled for an appointment and provided directions to the cognitive interview location. A total of 24 participants were selected for the cognitive interviews. Tables 2 and 3 include various characteristics (collected during the recruitment process and the cognitive interview) for each of the participants who took part in this research, by geographic location. Table 4 includes an overall summary of the demographic and drug use information for the complete set of participants who took part in this research, combining geographic locations.

**Table 2. Characteristics of Cognitive Interview Participants—Location 1**

Participant	Recruited as	Age	Gender	Education	Race/Hispanicity*
L1-1	Adult 18+	40	Female	Some College	NH White
L1-2	Adult 18+	55	Female	Some College	NH White
L1-3	Adult 18+	35	Female	4-Year College Degree	NH White
L1-4	Adolescent	14	Male	Less than High School	NH Asian
L1-5	Parent	50-55	Female	Some College	NH Asian
L1-6	Adult 18+	20	Female	Less than High School	NH White/ NH American Indian
L1-7	Adolescent	15	Female	Less than High School	NH White/ NH American Indian
L1-8	Parent	45	Female	Some College	NH White/ NH American Indian
L1-9	Adult 18+	43	Male	4-Year College Degree	NH Black
L1-10	Adult 18+	28	Female	Some College	NH Black
L1-11	Adult 18+	41	Male	4-Year College Degree	NH White
L1-12	Adult 18+	42	Female	Some College	NH White

\*NH = Non-Hispanic.

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<sup>3</sup> The request to conduct a CIPSEA materials study was submitted to OMB on May 18, 2007, and approval was granted on June 22, 2007. In order to begin the study by June 13, 2007, to stay on schedule, the first 9 interviews were scheduled prior to OMB approval and compensated with a \$50 gift card. The remaining 15 participants were compensated with a \$40 gift card as stated in the terms of clearance included with the June 22, 2007, notice of action.

**Table 3. Characteristics of Cognitive Interview Participants—Location 2**

Participant	Recruited as	Age	Gender	Education	Race/Hispanicity*
L2-1	Adult 18+	63	Female	Less than High School	NH Black/ NH American Indian
L2-2	Adult 18+	61	Female	4-Year College Degree	NH Black
L2-3	Adult 18+	30	Male	4-Year College Degree	NH White
L2-4	Adult 18+	19	Male	Some College	NH Black
L2-5	Adult 18+	58	Male	Some College	NH White
L2-6	Parent	44	Female	High School Graduate	NH Black
L2-7	Adolescent	12	Male	Less than High School	NH Black
L2-8	Adult 18+	25	Female	4-Year College Degree	NH Other ("bunch of stuff")
L2-9	Adult 18+	51	Male	Some College	NH White
L2-10	Adult 18+	26	Female	Some College	Hispanic
L2-11	Parent	47	Female	4-Year College Degree	NH White
L2-12	Adolescent	12	Female	Less than High School	NH White

\*NH = Non-Hispanic.

**Table 4. Summary of Demographic and Drug Use Information**

Demographic Characteristic	Criteria	Total
Age	12-17	4
	18-25	3
	26-34	3
	35-49	8
	50 or Older	6
Gender	Male	8
	Female	16
Education	Less than High School	6
	High School Graduate	1
	Some College	10
	4-Year College Degree	7
Race/Hispanicity	Non-Hispanic White	10
	Non-Hispanic Black	6
	Non-Hispanic Asian	2
	Non-Hispanic Two or More Races	5
	Hispanic	1
Drug Use Status*	Never Used	7
	Used in PY	4
	Used in PM	5
	N/A	8

\*During the screening process, only respondents recruited as adults aged 18 or older were asked whether they ever used drugs, used drugs in the past year (PY), and/or used drugs in the past 30 days (PM). Parents and adolescents were not asked about drug use during the screening process. Thus, this question was not applicable (N/A) to them.



## **2.4 Conducting the Cognitive Interviews**

Every cognitive interview was conducted by only one interviewer. All cognitive interview sessions were audio recorded. The interviewer began each cognitive interview by providing in written format and reading aloud the respective informed consent form (Appendix K). Once this was read to the participant and signed by the interviewer, the interviewer began the audio recording (if participant consented to it) and read the cognitive interviewing introduction using the respective protocol.

Upon completion of the cognitive interview, the interviewer provided the promised incentive payment and signed the receipt for participation form, indicating that the participant had received the gift card in appreciation for his or her participation in the project (Appendix L). All cognitive interviews were completed between June 14, 2007, and July 10, 2007.



# 3. Findings and Recommendations

Recruiting efforts on this study were made to maximize the diversity of the participants in this research. However, the results presented in this report are qualitative in nature and do not reflect a statistically representative sample of any kind. This chapter summarizes the results of the cognitive interviews by the two main objectives of conducting the testing.

## 3.1 Current versus Revised Contact Materials

As mentioned in Section 2.1 (Objectives of the Cognitive Interviews), the main purpose of the cognitive interviews was to evaluate whether potential NSDUH respondents noticed a difference between the contact materials currently being administered in the 2007 survey and those revised to incorporate CIPSEA language that are to be administered in the 2008 NSDUH. If the potential NSDUH respondents did notice a difference between the two versions of the materials, then the cognitive interviews evaluated whether the revisions would (1) change their decision to respond to the survey and (2) change their responses to the questions within the survey. Thus, the cognitive interview protocols were set up so that during the first half of the interviews, the participants (1) read through both versions of the contact materials, answering pre-scripted questions after each one to determine their level of participation and honesty in answering the questions within the NSDUH, and (2) were asked pre-scripted questions comparing the two versions of the contact materials. Both the overall and question-specific findings for the first half of the cognitive interviews are detailed below.

### 3.1.1 Overall Findings and Recommendations

Overall, the participants did not notice differences between the two versions of the NSDUH contact materials. There were only a couple of participants who noticed the actual changes in language due to CIPSEA. These comments were related to the language about confidentiality and the CIPSEA act (e.g., penalty for violation).

The findings from these cognitive interviews suggest that the revisions will not adversely affect sample members' decisions to participate in the survey, nor will the revisions affect how honest respondents will be in reporting their answers in the survey. If any minor effect occurs, it might be in a positive way in that a couple of participants mentioned that they liked the increased emphasis on confidentiality (and the CIPSEA act) in the revised materials. In addition, there were no distinct patterns when looking at the differences in interview location, adults versus children, and drug use (users versus nonusers). Any discernable differences are identified for the specific question in the question-specific summaries below. Finally, there did not appear to be any noteworthy order effects where participant responses depended on the order of presentation of the current and revised contact materials. In other words, there were no overall differences in the responses to questions Q1 through Q3 versus questions Q4 through Q6, by version of the contact materials received. Thus, the fact that the participants did not perceive the differences in the two versions of the contact materials is reinforced. The only order effects that were noticed were related to participants thinking that the second set of materials they received were easier to

read (e.g., more concise) or contained different information. From the debriefing questions, most of these perceived differences were not real. However, this implies that if the order in which participants received the current and revised contact materials had not been randomized, we might have concluded that participants preferred the second set of materials over the first.

Overall, the findings mentioned above indicate that the CIPSEA language does not appear to have an impact on sample members' decisions to participate in the survey and how honest they would be in reporting answers within the survey. Thus, it is recommended that no additional research is needed at this time on the CIPSEA language included in the NSDUH contact materials.

### 3.1.2 Question-Specific Findings

**Q1.** *(If you were the contacted participant in the video/If your parent or legal guardian were the person contacted in the video and he or she gave the interviewer permission to interview you), how likely would you be to agree to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be **not at all likely** to participate, and 5 means you would be **very likely** to participate.*

Rating	Adults 18+	Children 12-17	Total
1 (Not at all likely)	1	0	1
2	1	0	1
3	4	0	4
4	7	2	9
5 (Very likely)	7	2	9
Total	20	4	24

*Was there anything in the materials you just read and heard that would influence how likely you would be to agree to participate in the interview? If yes, what?*

Only a few of the participants said the materials would influence their decision to participate in the NSDUH interview. These comments were positive and not related to any of the differences between the two versions of the materials. A few of the comments about the materials included (1) the materials explained the process and purpose of the survey; (2) responses would count for other persons, which made the study seem important; (3) the materials mentioned the incentive payment; and (4) the materials mentioned the notion of confidentiality. While the materials in general were not a major factor in whether these participants would participate in the NSDUH, there were other factors cited including the willingness (and sometimes perceived importance) to participate in studies. There were only a couple of negative comments provided. One participant did not want to be contacted by an outside researcher, and another participant thought the interviewer in the video was pushy and invasive.

**Q1 (As Parent of Child).** *If you were the person contacted in the video, how likely would you be to agree to allow your 12-17 year old child to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be **not at all likely** to allow him/her to participate, and 5 means you would be **very likely** to allow him/her to participate.*

Rating	Parents
1 (Not at all likely)	0
2	1
3	0
4	0
5 (Very likely)	3
Total	4

*Was there anything in the materials you just read and heard that would influence how likely you would be to agree to allow your 12-17 year old child to participate in the interview? If yes, what?*

Two of the participants answered "Yes" to the follow-up question. One cited the confidential nature of the information and the other cited the incentive payment and the importance of doing the study. The one parent (who answered "2") said he or she does not like to force his or her kids to do anything they don't like to do.

**Q2.** *As a reminder, the survey being presented in the materials you have read asks about drug use or non-use. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be **not at all likely** to answer honestly, and 5 means you would be **very likely** to answer honestly.*

Rating	Adults 18+	Children 12-17	Total
1 (Not at all likely)	0	0	0
2	0	0	0
3	0	0	0
4	4	0	4
5 (Very likely)	16	4	20
Total	20	4	24

*Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about drug use or non-use honestly? If yes, what?*

About half of the participants said the materials would not influence how honest they would answer the questions about drug use or nonuse because they would answer honestly regardless. The other participants cited confidentiality and names not associated with answers as the main points in the materials that would influence them to answer the questions honestly.

**Q3.** *The survey being presented in the materials you have read also asks about mental health. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be **not at all likely** to answer honestly, and 5 means you would be **very likely** to answer honestly.*

<b>Rating</b>	<b>Adults 18+</b>	<b>Children 12-17</b>	<b>Total</b>
1 (Not at all likely)	0	0	0
2	0	0	0
3	1	0	1
4	4	0	4
5 (Very likely)	15	4	19
Total	20	4	24

*Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about mental health honestly? If yes, what?*

Almost all of the participants cited the same reasons for answering honestly as provided in Q2, and their responses about the materials did not change much. There was one participant who said the term "mental health" has a negative stigma in society and so using this term in the materials would decrease honest answers because persons would not want to reveal a mental health problem.

**Q4.** *(If you were the contacted participant/If your parent or legal guardian were the person contacted and he or she gave the interviewer permission to interview you), how likely would you be to agree to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be **not at all likely** to participate, and 5 means you would be **very likely** to participate.*

<b>Rating</b>	<b>Adults 18+</b>	<b>Children 12-17</b>	<b>Total</b>
1 (Not at all likely)	1	0	1
2	0	0	0
3	5	0	5
4	7	2	9
5 (Very likely)	7	2	9
Total	20	4	24

*Was there anything in the materials you just read and heard that would influence how likely you would be to agree to participate in the interview? If yes, what?*

Nothing from the responses to this question would suggest that the materials would have any negative impact on whether these participants would agree to participate in the NSDUH. Similar to Q1, the comments about the materials were mostly positive and not related to any of the differences between the two versions of the materials. The participants provided similar answers and comments as in Q1.

Some of the participants thought both versions of the materials were the same and so their answers would not change from Q1. Others thought there were differences and even mentioned that they liked the second version of materials better, but they only cited differences that did not truly exist.

There was one participant (same as in Q1) who answered negatively and was wary about being selected and contacted by an outside researcher.

**Q4 (As Parent of Child).** *If you were the person contacted, how likely would you be to agree to allow your 12-17 year old child to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be **not at all likely** to allow him/her to participate, and 5 means you would be **very likely** to allow him/her to participate.*

Rating	Parents
1 (Not at all likely)	1
2	0
3	0
4	0
5 (Very likely)	3
Total	4

*Was there anything in the materials you just read and heard that would influence how likely you would be to agree to allow your 12-17 year old child to participate in the interview? If yes, what?*

The same answers were provided by these parents as in Q1 (As Parent of Child), so there were no changes in the answers. The one participant who answered "1" said that they would have to talk about it as a family before deciding.

**Q5.** *As a reminder, the survey being presented in the materials you have read asks about drug use or non-use. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be **not at all likely** to answer honestly, and 5 means you would be **very likely** to answer honestly.*

Rating	Adults 18+	Children 12-17	Total
1 (Not at all likely)	0	0	0
2	0	0	0
3	1	0	1
4	4	0	4
5 (Very likely)	15	4	19
Total	20	4	24

*Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about drug use or non-use honestly? If yes, what?*

Almost all of the participants provided the same (or very similar) answers and comments as in Q2. Confidentiality was again cited as an important factor in answering the questions about drug use or nonuse honestly.

There was one participant who changed his or her answer from 4 (in Q2) to 3. The participant commented that the second version (current) mentioned confidentiality but the first version (revised) repeated the notion of confidentiality more. Another participant changed his or her answer from 5 (in Q2) to 4. In both Q2 and Q5, the participant mentioned that there was nothing in the materials that would influence how honest he or she would answer the questions about drug use or nonuse. In Q2, he or she added that he or she liked to help others.

**Q6.** *The survey being presented in the materials you have read also asks about mental health. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be **not at all likely** to answer honestly, and 5 means you would be **very likely** to answer honestly.*

<b>Rating</b>	<b>Adults 18+</b>	<b>Children 12-17</b>	<b>Total</b>
1 (Not at all likely)	0	0	0
2	0	0	0
3	2	0	2
4	4	0	4
5 (Very likely)	14	4	18
Total	20	4	24

*Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about mental health honestly? If yes, what?*

The participants provided similar answers and comments about answering honestly for the questions about mental health as in Q3. The same participant commented about the negative stigma of the term "mental health," and the other participant (mentioned in Q5) again provided the same comment about confidentiality being emphasized more in the first version (revised).

**F1.** (Not administered to children 12 to 17) *Did you notice any differences between the LEAD LETTER you read at the beginning of this interview and the one you just read? If yes, what differences did you notice?*

None of the participants noticed the actual differences between the current and revised lead letters. Some participants indicated that they did notice differences, but the differences that were cited were not real. For example, a couple of participants thought the two versions of the lead letter provided different numbers of persons who were selected for the study. Also, a couple of participants thought the second version was easier to read, was more concise, and had a different feel (note the order of the materials was not the same for these participants).

**F2.** *Did you notice any differences between the STUDY DESCRIPTION you read at the beginning of this interview and the one you just read? If yes, what differences did you notice?*

Most of the participants said there was no difference between the two versions of the Study Description. A few participants cited differences that did not exist. One of the adult



participants said the first version (revised) was more detailed about confidentiality but could not specifically remember the details. Another adult participant stated that the revised version of the Study Description mentioned the penalty for violating CIPSEA but the current version did not. This participant indicated this difference in the Study Description after mentioning the same difference in F3 below for the Question and Answer Brochure.

**F3.** *Did you notice any differences between the QUESTION AND ANSWER BROCHURE you read at the beginning of this interview and the one you just read? If yes, what differences did you notice?*

Some of the differences cited were not real differences. However, three participants (including one child participant) stated that the revised version of the brochure mentioned the penalty for violating CIPSEA but the current version did not.

**F4a.** (IF F1 or F2 or F3=YES) *Is one version of the materials more convincing in getting someone to respond to the survey being presented? If yes, which version and why? If no, why?*

The four participants who mentioned the additional wording regarding the penalty for violating CIPSEA in the revised versions of the Study Description and Question and Answer Brochure in F2 and F3 above thought the revised materials were more convincing in getting someone to participate because of the emphasis on confidentiality and the mention of the CIPSEA act and fines.

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version of the contact materials is more convincing? (If not all three): How did you decide which material(s) to tell me about?*

Of the four participants who thought the revised materials were more convincing in getting someone to participate, two were including all three materials (or both materials for the children) in answering the question, one was including the Study Description and the brochure, and one was including just the brochure.

**F4b.** (IF F1 and F2 and F3=NO) *Were the materials convincing in getting someone to respond to the survey being presented? Why?*

All of the participants who were asked this question answered "Yes," the materials were convincing in getting someone to participate in NSDUH. The participants' comments varied somewhat but included remarks about confidentiality, providing sufficient information about the study, and the importance of the research.

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials were convincing? (If not all three): How did you decide which material(s) to tell me about?*

Most of the participants said they were thinking about all three materials (or both materials for the children). However, one participant thought the Study Description went into

more detail about what the survey would be asking. Another participant thought the brochure was the most effective because he or she thought the lead letter was ineffective (a turnoff).

**F4a (As Parent of Child).** (IF F1 or F2 or F3=YES) *Is one version of the materials more convincing in getting a parent to allow his/her 12-17 year old child to respond to the survey being presented? If yes, which version and why? If no, why?*

None of the parents noticed the actual differences between the current and revised versions of the materials.

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version of the contact materials is more convincing? (If not all three): How did you decide which material(s) to tell me about?*

None of the parents noticed the actual differences between the current and revised versions of the materials.

**F4b (As Parent of Child).** (IF F1 and F2 and F3=NO) *Were the materials convincing in getting a parent to allow his/her 12-17 year old child to respond to the survey being presented? Why?*

One participant said "No," not for him or her personally, but for others the materials might be convincing. The other participants said the materials were convincing for reasons such as their confidentiality was assured and the survey was government based.

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials were convincing? (If not all three): How did you decide which material(s) to tell me about?*

All of the parents were thinking of all three materials.

**F5a.** (IF F1 or F2 or F3=YES) *If you agreed to participate in the survey, would either version of the materials make you more or less likely to give honest answers to the questions in the survey about drug use or non-use? If yes, which version(s) and why? If no, why?*

The four participants who mentioned the additional wording regarding the penalty for violating CIPSEA in the revised versions of the Study Description and Question and Answer Brochure in F2 and F3 above said they would give honest answers to the drug use or nonuse questions regardless of which version of the materials they received. They thought the materials were similar and would not affect their honesty in responding.

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version would make you more or less likely to give honest answers? (If not all three): How did you decide which material(s) to tell me about?*

All four participants mentioned above who said they would give honest answers to the drug use or nonuse questions regardless of which version of the materials they received were including all three materials (or both materials for the children) in answering the question.

**F5b.** (IF F1 and F2 and F3=NO) *If you agreed to participate in the survey, would the materials make you more or less likely to give honest answers to the questions in the survey about drug use or non-use? Why?*

Most of the participants mentioned confidentiality as a factor for being honest in answering the drug use or nonuse questions. Some participants said the materials would not make a difference because he or she would answer honestly regardless. Only one participant answered "Less likely" because it is a government study (and this participant was wary of the government collecting personal information).

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials would make you more or less likely to give honest answers? (If not all three): How did you decide which material(s) to tell me about?*

Most of the participants were thinking about all three materials (or both materials for the children), though a few mentioned the brochure in particular.

**F6a.** (IF F1 or F2 or F3=YES) *If you agreed to participate in the survey, would either version of the materials make you more or less likely to give honest answers to the questions in the survey about mental health? If yes, which version(s) and why? If no, why?*

The four participants who mentioned the additional wording regarding the penalty for violating CIPSEA in the revised versions of the Study Description and Question and Answer Brochure in F2 and F3 above said they would give honest answers to the mental health questions regardless of which version of the materials they received. They thought the materials were similar and would not affect this aspect.

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version would make you more or less likely to give honest answers? (If not all three): How did you decide which material(s) to tell me about?*

All four participants above who said they would give honest answers to the mental health questions regardless of which version of the materials they received were including all three materials (or both materials for the children) in answering the question.

**F6b.** (IF F1 and F2 and F3=NO) *If you agreed to participate in the survey, would the materials make you more or less likely to give honest answers to the questions in the survey about mental health? Why?*

Most of the participants said they would be more likely to answer honestly about the questions on mental health because of the emphasis on confidentiality and also because they

would answer honestly if they were to participate. Two participants said the materials would not make a difference because they would answer honestly regardless of them.

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials would make you more or less likely to give honest answers? (If not all three): How did you decide which material(s) to tell me about?*

Most of the participants were thinking about all three materials (or both materials for the children), though a couple of them mentioned the brochure in particular.

## **3.2 Comprehension of Contact Materials**

As mentioned in Section 2.1 (Objectives of the Cognitive Interviews), a second purpose of the cognitive interviews was to evaluate how well potential NSDUH respondents understood the contact materials provided. Thus, the cognitive interview protocols were set up so that during the second half of the interviews, the interviewer read out loud different sections of the contact materials read earlier by the participants. After reading through a given section, the interviewer asked the participants pre-scripted questions about their understanding of various phrases within that section of the contact materials. The findings for each of the pre-scripted questions are detailed below. Unless specifically noted, the responses provided by the participants did not differ among age or geographical region. This section of the report concludes with some recommendations to consider based on the findings presented.

### **3.2.1 Findings**

**U1:** The first paragraph of the Lead Letter to Selected Dwelling Units was read to all participants except those aged 12 to 17. This paragraph is the same in both the current and revised versions of the letter. After reading this paragraph, participants were asked, "***What did the phrase "health-related issues" mean to you as used in this letter?***" Most of the participants understood this phrase to mean overall health issues and included medical conditions or diseases such as cancer, diabetes, and heart problems in addition to drug or mental health issues. A couple of participants indicated that the phrase "health-related issues" did not make them think of alcohol or drug issues.

**U2:** The first paragraph of the Study Description was read to all participants. This paragraph is the same in both the current and revised versions of the description. After reading this paragraph, participants were asked, "***What did the phrase "randomly chosen" mean to you as used in this Study Description?***" About two thirds of the participants understood this phrase in the correct manner. Phrases used by these participants to explain "randomly chosen" included "I was just picked out of a hat" or "Pick a number out of a bag, a lotto." A few participants even mentioned that the selection was not based on their specific race/ethnicity, gender, income, etc. Three participants did not know what the phrase "randomly chosen" meant. A couple of other participants incorrectly described the phrase to mean they were chosen based on specific demographic information (e.g., white, male, between the ages of 18 and 25) or the type of neighborhood they lived in (e.g., lower income).

**U3:** The second paragraph of the current Study Description was read to all participants. Then participants were asked, "**What did the phrase "research purposes" mean to you as used in this Study Description?**" Most of the participants interpreted this phrase to mean data would be collected or information would be gathered to find out more about persons in general. A couple of participants went deeper and indicated that this information would then be used to help allocate funds for various programs such as substance abuse prevention. Some participants, particularly a handful from Location 2, associated the phrase "research purposes" with collecting statistics or gathering information for statistical data use. A couple of other participants understood "research purposes" to be related to statistics without actually mentioning the term. For example, one participant said, "Stuff you might see in the newspaper such as drug use is down among teens." None of the participants incorrectly described the phrase "research purposes" to mean information gathered to find out more about persons at an individual level.

**U4:** The second paragraph of the revised Study Description was read to all participants. Then participants were asked, "**What did the phrase "statistical purposes" mean to you as used in this Study Description?**" A majority of the participants associated the phrase "statistical purposes" with numbers. For example, participants mentioned "information gleaned for number crunching," "To put numbers on just to compare," "It would be gathered on a ratio or percentage," and "How many people do illegal drugs, how many people don't." Some participants understood the phrase "statistical purposes" to mean the same as "research purposes." One participant preferred the use of the term "statistical purposes" versus "research purposes" because it was clearer. Two participants did not know and could not explain the meaning of "statistical purposes." Three participants who did know the meaning of "statistical purposes" expressed concerns about the phrase being too difficult and complicated for their peers to understand.

**U5 through U10:** The remainder of the revised Study Description was read to all participants, including the CIPSEA reference below the signature. Then all participants were asked the following six questions.

**U5: "In your own words, can you tell me what type of information is collected by the National Survey on Drug Use and Health? Do you think this type of information is important to research? Why?"** Most participants specifically mentioned that the information collected by the NSDUH included the use and nonuse of drugs, alcohol, and tobacco as well as information about mental health. Some participants also indicated that the type of information collected by the NSDUH included health issues in general, attitudes toward health behaviors, and demographic and socioeconomic information. All of the participants thought this type of information was important to research for various reasons, which can be summarized into three main categories:

1. Substance use and mental health have a big influence on the Nation's health, which everyone should be aware of. For example, one participant mentioned that many persons today are stressed out and tend to turn toward a substance of some type (e.g., alcohol) to cope. Thus, there has to be some sort of study done to help the general population develop coping skills that do not utilize substances.

Another participant mentioned that substance abuse was an incidental part of why the health insurance and pharmaceutical costs were spiraling out of control.

2. The information collected from the research on current drug use and mental health would be helpful to allocate funding to assist persons who suffer from substance abuse or mental health problems.
3. The information collected on substance use and mental health could be used to design more effective programs for treatment and prevention.

**U6: "Would you be convinced to do the interview for \$30? Why or why not?"**

All but five of the participants said "Yes" to being convinced to do the interview for \$30. These participants thought either \$30 was reasonable for a 1-hour interview or the topic was very important to research and wanted to help. Several of these participants said they would participate in the interview regardless of the money since it was the right thing to do. All participants aged 12 to 17 were convinced to do the interview. Only 2 of the 24 participants said they would not be convinced to do the interview for \$30. They thought the money would not make it worth their time to provide personal and sensitive information even though they had nothing to hide. Three other participants said they might be convinced to do the interview, depending on their financial situation or what they were doing when the interviewer showed up at their door.

**U7: "What did the phrase "any project staff or authorized data user" mean to you as used in this Study Description?"** Most of the participants understood this phrase to mean employees of RTI or government staff who were involved with any aspect of this project. Some participants narrowed the meaning by limiting it to interviewers and data entry staff. A few participants broadened the meaning by including all persons who worked for RTI or the government. Although all adult participants gave an answer for this question, two participants aged 12 to 17 were confused by this phrase and did not provide an answer.

**U8: "What did the phrase "your confidentiality" mean to you as used in this Study Description?"** All 24 participants seemed to understand the concept of confidentiality. Some participants used the words "anonymous" or "privacy" to describe the concept. Other participants explained that their name or any other personal identifying information would not be associated with the answers they provided. One participant indicated that he or she represented a demographic figure head (e.g., white, male, between the ages of 18 and 25).

**U9: "In your own words, can you tell me what the penalty is for "any project staff or authorized data user who violates CIPSEA"?"** None of the participants specifically said the penalty was "a jail term of up to 5 years, a fine of up to \$250,000, or both." Four participants gave the most accurate description of the penalty as "5 years in jail, a \$250,000 fine, or both." Five participants gave a similar description but left out the "or both" part. One participant did not remember. All of the other participants mentioned either just the jail term, just the

fine, or both. However, some of these answers did not provide specific terms or amounts. Others provided a term or amount that was incorrect.

**U10: "What does it mean for someone to "violate CIPSEA"? (PROBE FOR EXAMPLES OF WHAT PARTICIPANT CONSIDERS TO BE VIOLATIONS)"** Most of the participants understood this phrase to mean giving out individual information (e.g., name, address, answers to the survey) to someone for purposes not related to the particular research study. Examples of "violating CIPSEA" included "if the interviewer went and told my family, friends, or parents about my information" and "To leak out your name with the answer you provide." A couple of participants indicated more extreme cases of CIPSEA violations such as "someone getting hold of the data and selling it or using it to harass or blackmail" and "Posting name/address on a website with information about what you said."

**U11:** The first bullet under the "Why Should I Participate?" section of the Question and Answer Brochure was read to all participants. This bullet is the same in both the current and revised versions of the brochure. After reading this bullet, participants were asked, "**What did the phrase "accurate policy decisions" mean to you as used in this Question and Answer Brochure?"** The interpretation of this phrase varied among the participants and some had difficulty providing an explanation that did not include the term "policy." However, the majority of the answers provided can be summarized into two main themes, using the supporting survey data to (1) make better decisions on what programs need to be developed for mental health and substance abuse and (2) allocate funds accurately (e.g., for treatment programs and laws). Some participant responses included "Policies can be effective in addressing and identifying problems," "Determine if more programs need to be in the mental health field or drug addictions or other addictions," "Developing programs for substance abuse and mental health. Ensuring data will be correct to help develop the programs," "How much money, when the physical budget comes up, is each program going to get versus other programs (e.g., alcohol versus methamphetamine use)," and "How to distribute the money for treatment and law enforcement." Five participants had difficulty providing an answer to this question. Four of these participants answered "don't know" and mentioned that the phrase "accurate policy decisions" could possibly be referring to laws ("anywhere, in workplace and society" or "regarding drug use"). One of these participants answered that it was "not very clear" and then followed up with "assumed the research was conducted in order to help people and know more about the population."

**U12:** The second half of the cognitive interviews concluded with the interviewer asking each of the participants the following question, "**Thinking about both versions of the Lead Letter, Study Description, and Question and Answer Brochures that you read earlier in this interview, are there any other terms or phrases in these materials that are unfamiliar or confusing to you? If yes, what are they and why?"** More than half of the participants said there were no other unfamiliar or confusing terms or phrases used in the materials they had read earlier in the interview. While most of the comments provided by participants who answered "Yes" to this question were unique to that individual, there were a couple of issues that were mentioned by more than one participant. The first issue pointed to participants' confusion as to how persons are selected to participate in the NSDUH. One participant questioned why they received the lead letter if it says "it is possible that no one from your household will be chosen to be interviewed."

Another participant mentioned that "the idea of being random and possibly having one or two people chosen and then possibly not being chosen, and then if you don't participate someone else not being chosen" was all a little confusing. The second issue pointed to the phrase "similar to you" as used in the "Introduction and Informed Consent for Interview Respondents Aged XX." Two participants questioned what this meant (e.g., "like me as in drug addicts, mental health problems, or same demographic characteristics").

### **3.2.2 Recommendations**

The following recommendations focus on the terms and phrases that proved to be the most difficult for participants to understand based on the findings presented above.

1. A quarter of the participants either did not know or incorrectly described the meaning of the phrase "randomly chosen" as it was used in the Study Description. While the selection process is described in more detail in the Question and Answer Brochure, not all participants receive this information during the main study. Thus it is recommended that additional information be provided in the Study Description to describe the phrase "randomly chosen" in more common terms.
2. More participants seemed to better understand the phrase "research purposes" as it was used in the current Study Description versus the phrase "statistical purposes" as it was used in the revised Study Description. Participants appeared to understand the concept of "research purposes" without difficulty and to some extent related it to statistics. On the contrary, two participants could not explain what the phrase "statistical purposes" meant, and three participants who could provide an explanation were concerned that their peers could not. Thus, it may be the case that the phrase "statistical purposes" is less understood among the general population than "research purposes."
3. While the adult participants could provide an explanation of what the phrase "any project staff or authorized data user" meant as it was used in the Study Description, two participants aged 12 to 17 could not. Thus, it is recommended that a more detailed explanation be provided for this phrase where it is used in the NSDUH contact materials for adolescent participants who are not familiar with the current verbiage.
4. The phrase "accurate policy decisions" as it was used in the Question and Answer Brochure seemed to be the most difficult for the participants to explain among all of the phrases provided. Thus, it is recommended that a more detailed explanation, with examples of how the results of the NSDUH assist with making accurate policy decisions, be added to the text in the Question and Answer Brochure to better illustrate this concept.

For each of the items mentioned above, it is recommended that alternative language be developed and tested in multiple rounds of controlled, experimental settings such as focus groups and/or cognitive interviews. These types of settings are extremely important to ensure that there is no introduction of response bias in the NSDUH data resulting from the introduction of any revised language.



## References

Office of Management and Budget. (2006). *Implementation Guidance for Title V of the E-Government Act, Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA)* (Web page). Retrieved July 27, 2007, from [http://www.whitehouse.gov/omb/infoereg/proposed\\_cispea\\_guidance.pdf](http://www.whitehouse.gov/omb/infoereg/proposed_cispea_guidance.pdf)



## **Appendix A**

### **Lead Letter (Current Version)**





DEPARTMENT OF HEALTH & HUMAN SERVICES

U.S. Public Health Service  
Office of Applied Studies  
Rockville, MD 20857

\_\_\_\_\_, 2007

Dear Resident:

To better serve all people across the nation, the United States Public Health Service (USPHS) is conducting a national study on health-related issues. Your address was randomly chosen along with more than 200,000 others. Research Triangle Institute (RTI) is under contract to carry out this study for the USPHS. Soon, an RTI interviewer will be in your neighborhood to give you more information.

When the interviewer arrives, please ask to see his or her personal identification card. An example of the ID card is shown below. The interviewer will ask you a few questions, and then may ask one or two members of your household to complete an interview. It is possible that no one from your household will be chosen to be interviewed. You may choose not to take part in this study, but no one else can take your place. **Every person who is chosen and completes the interview will receive \$30 in cash.**

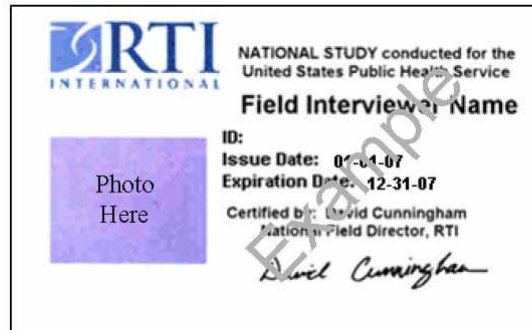
All the information collected is confidential and will be used only for research purposes. This is guaranteed by federal law. This letter is addressed to "Resident" because your address was selected, and we do not know your name. Feel free to ask the interviewer any questions you have about the study.

Your help is very important to this study's success. Thank you for your cooperation.

Sincerely,

*Joseph Kenet*  
Joel Kennet, Ph.D.  
National Study Director, USPHS

*David Cunningham*  
David Cunningham  
National Field Director, RTI  
(800) 848-4079



\_\_\_\_\_  
Assigned Field Interviewer

Confidentiality protected by the Confidential Information Protection and Statistical Efficiency Act of 2002 (PL 107-347)  
Authorized by Section 505 of the Public Health Service Act (42 USC 290aa4)  
Approved by Office of Management and Budget (OMB Approval No. 0930-0110)



**Appendix B**  
**Study Description (Current Version)**







**Public Health Service  
Office of Applied Studies**

## **Study Description**

Your address is one of several in this area randomly chosen for the 2007 National Survey on Drug Use and Health. This study, sponsored by the United States Public Health Service, collects information for research and program planning by asking about:

- tobacco, alcohol, and drug use or non-use,
- knowledge and attitudes about drugs,
- mental health, and
- other health issues.

You cannot be identified through any information you give us. Your name and address will never be connected to your answers. Also, federal law requires us to keep all of your answers confidential, and to use your answers only for research purposes (the *Confidential Information Protection and Statistical Efficiency Act of 2002*).

The screening questions take just a few minutes. If anyone is chosen, the interview will take about an hour. You can refuse to answer any questions, and you can quit at any time. **Each person who is chosen and completes the interview will receive \$30 in cash.**

If you have questions about the study, call the Project Representative at 1-800-848-4079. If you have questions about your rights as a study participant, call Dr. Wendy Visscher, the representative for RTI's Office of Research Protection, at 1-866-214-2043 (a toll-free number). You can also visit our project Website: <http://nsduhweb.rti.org/> for more information.

Thank you for your cooperation and time.

Arthur Hughes, Project Officer  
Office of Applied Studies  
Substance Abuse and Mental Health Services Administration (SAMHSA)  
U.S. Public Health Service  
Department of Health and Human Services



**Appendix C**  
**Q&A Brochure (Current Version)**



## Answering Your Important Questions about the 2007 National Survey on Drug Use and Health

### What Is the Substance Abuse and Mental Health Services Administration (SAMHSA)?

The Substance Abuse and Mental Health Services Administration (SAMHSA) is an agency of the U.S. Public Health Service in the U.S. Department of Health and Human Services (DHHS). SAMHSA was created in 1992 to provide leadership and a Federal focus for the Nation's mental health and substance abuse treatment and prevention programs. NSDUH is used to help facilitate this mission by monitoring the nature and extent of substance use in the United States, as well as the consequences of this use.

### How Does the Government Conduct the Study?

Under a competitive bidding process, SAMHSA selects a survey research organization to administer NSDUH. Currently, Research Triangle Institute (RTI) is under contract to conduct the 2007 NSDUH. RTI, which is located in Research Triangle Park, North Carolina, and closely associated with the University of North Carolina, Duke University, and North Carolina State University, is a large, experienced research organization that has successfully conducted NSDUH since 1988.

### How Was I Selected?

A scientific random sample of households is selected throughout the United States. Once selected, no other residence can be substituted for any reason. A professional RTI interviewer makes a personal visit to each household to ask several initial questions. One or possibly two residents of your household may be asked to voluntarily participate in the survey. If you are selected, no other person can be substituted. Since the survey is based on a random sample, you will represent over 3,000 other United States residents.

### What If I Do Not Smoke, Drink or Use Illegal Drugs?

In order to know the percentage of people who do use these substances, we also have to know how many people do not. Therefore, the responses of people who do not use drugs are just as important as those of people who do. You need not know anything about drugs to answer the questions. In addition, we ask a number of health-related questions that are relevant for all people.

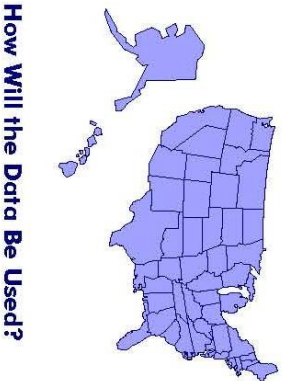
### What Happens to My Information?

Each computerized interview data file—which is identified only by a code number—is electronically transmitted to RTI on the same day the interview is conducted. The answers then are combined with all other participants' answers, and are coded, totaled, and turned into statistics for analysis. As a quality-control measure, you may receive a telephone call or a letter from RTI to verify that the interviewer did complete the survey with you.

## CONFIDENTIAL

### Will My Answers Be Kept Confidential?

Both SAMHSA and RTI are committed to assuring complete confidentiality of responses. Our interest is only in the combination of all responses nationwide—not anyone's individual answers. Your name is never recorded or associated with your answers. The information is only used for research and analysis and cannot be used for any other purpose. Confidentiality of all answers to questions in this survey is provided under Federal law, the Confidential Information Protection and Statistical Efficiency Act of 2002.



### How Will the Data Be Used?

Government agencies, private organizations, individual researchers, and the public at large use the data for a number of purposes. For example, the U.S. Public Health Service and state health agencies use data from NSDUH to estimate the need for drug treatment facilities. Other federal, state, and local agencies use the information to support their drug use prevention programs and to monitor drug control strategies.



### How Is the Study Administered?

NSDUH data are collected in the privacy of the participant's home. A professional RTI interviewer personally visits each selected household to administer the NSDUH questionnaire using a laptop computer. For some items, the interviewer reads questions and enters the responses into the computer; however, the participant privately enters most responses directly into the computer. The survey takes approximately 60 minutes to complete.

## Why Should I Participate?

- NSDUH is the primary source of national data on the use of alcohol, tobacco, and illicit substances. By volunteering in this study, you are helping us gather this important information that is needed to make accurate policy decisions.
- Individual residents of selected households, who are randomly chosen and agree to participate, are given a cash payment of \$30 at the end of the interview.
- If selected to participate, you will represent over 3,000 other United States residents. Since our sample is selected based on scientific random sampling, no other household or person can be substituted.
- By participating in this study, you will be assisting with the formation of public policy.

### Conducted by

Research Triangle Institute  
3040 Cornwallis Road  
Research Triangle Park, NC 27709

### For more information on NSDUH or SAMHSA, contact:

NSDUH National Study Director  
SAMHSA, Office of Applied Studies  
1 Choke Cherry Road  
Room 7-1009  
Rockville, MD 20857

### For more information on NSDUH or RTI, contact:

NSDUH National Field Director  
Research Triangle Institute  
3040 Cornwallis Road  
Research Triangle Park, NC 27709  
1-800-848-4079

**Internet Users:** You may access more information about SAMHSA on the World Wide Web at:

<http://www.samhsa.gov>

Additional information about RTI is available at:

<http://www.rti.org>

Additional information about the National Survey on Drug Use and Health is available at:

<http://nhdhweb.rti.org>

# National Survey on Drug Use and Health

Answering Your Important Questions



## What Is the National Survey on Drug Use and Health (NSDUH)?

The National Survey on Drug Use and Health (NSDUH) is the Federal Government's primary source of national data on the use of alcohol, tobacco, and illicit substances. The survey also contains questions on health, illegal behaviors, and other topics associated with substance use. The study was initiated in 1971 and currently is conducted on an annual basis. This year approximately 70,000 individuals, 12 years old and older, will be randomly selected and asked to voluntarily participate.

The primary objectives of NSDUH are:

- to collect timely data on the magnitude and patterns of alcohol, tobacco, and illegal substance use and abuse;
- to assess the consequences of substance use and abuse; and
- to identify those groups at high risk for substance use and abuse.

### Sponsored by

Substance Abuse and Mental Health  
Services Administration  
U.S. Public Health Service  
U.S. Department of Health  
and Human Services

**Appendix D**  
**Lead Letter (Revised Version)**







DEPARTMENT OF HEALTH & HUMAN SERVICES

U.S. Public Health Service  
Office of Applied Studies  
Rockville, MD 20857

\_\_\_\_\_, 2007

Dear Resident:

To better serve all people across the nation, the United States Public Health Service (USPHS) is conducting a national study on health-related issues. Your address was randomly chosen along with more than 200,000 others. Research Triangle Institute (RTI) is under contract to carry out this study for the USPHS. Soon, an RTI interviewer will be in your neighborhood to give you more information.

When the interviewer arrives, please ask to see his or her personal identification card. An example of the ID card is shown below. The interviewer will ask you a few questions, and then may ask one or two members of your household to complete an interview. It is possible that no one from your household will be chosen to be interviewed. You may choose not to take part in this study, but no one else can take your place. **Every person who is chosen and completes the interview will receive \$30 in cash.**

All the information collected is confidential and will be used only for statistical purposes. This is assured by federal law. This letter is addressed to "Resident" because your address was selected, and we do not know your name. Feel free to ask the interviewer any questions you have about the study.

Your help is very important to this study's success. Thank you for your cooperation.

Sincerely,

Joel Kennet, Ph.D.  
National Study Director,  
Office of Applied Studies

David Cunningham  
National Field Director, RTI  
(800) 848-4079



\_\_\_\_\_  
Assigned Field Interviewer

Confidentiality protected by the Confidential Information Protection and Statistical Efficiency Act of 2002 (PL 107-347)  
Authorized by Section 505 of the Public Health Service Act (42 USC 290aa4)  
Approved by Office of Management and Budget (OMB Approval No. xxxx-xxxx)



**Appendix E**  
**Study Description (Revised Version)**





**Public Health Service  
Office of Applied Studies**

## **Study Description**

Your address is one of several in this area randomly chosen for the 2007 National Survey on Drug Use and Health. This study, sponsored by the United States Public Health Service, collects information for research and program planning by asking about:

- tobacco, alcohol, and drug use or non-use,
- knowledge and attitudes about drugs,
- mental health, and
- other health issues.

You cannot be identified through any information you give us. Your name and address will never be connected to your answers. Also, federal law requires us to keep all of your answers confidential. Any data that you provide will only be used by authorized personnel for statistical purposes according to the Confidential Information Protection and Statistical Efficiency Act of 2002.

The screening questions take just a few minutes. If anyone is chosen, the interview will take about an hour. You can refuse to answer any questions, and you can quit at any time. **Each person who is chosen and completes the interview will receive \$30 in cash.**

If you have questions about the study, call the Project Representative, at 1-800-848-4079. If you have questions about your rights as a study participant, call Dr. Wendy Visscher, the representative for RTI's Office of Research Protection, at 1-866-214-2043 (a toll-free number). You can also visit our project Website: <http://nsduhweb.rti.org/> for more information.

Thank you for your cooperation and time.

Arthur Hughes, Project Officer  
Office of Applied Studies  
Substance Abuse and Mental Health Services Administration (SAMHSA)  
U.S. Public Health Service  
Department of Health and Human Services

Your confidentiality is protected by the Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA, PL 107-347). Any project staff or authorized data user who violates CIPSEA may be subject to a jail term of up to 5 years, a fine of up to \$250,000, or both.



**Appendix F**  
**Q&A Brochure (Revised Version)**





# National Survey on Drug Use and Health

Answering Your Important Questions about the 2007

## What Is the Substance Abuse and Mental Health Services Administration (SAMHSA)?

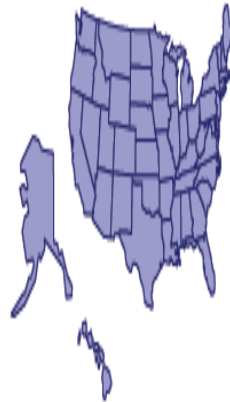
The Substance Abuse and Mental Health Services Administration (SAMHSA) is an agency of the U.S. Public Health Service in the U.S. Department of Health and Human Services (DHHS). SAMHSA was created in 1992 to provide leadership and a Federal focus for the Nation's mental health and substance abuse treatment and prevention programs. NSDUH is used to help facilitate this mission by monitoring the nature and extent of substance use in the United States, as well as the consequences of this use.

## How Does the Government Conduct the Study?

Under a competitive bidding process, SAMHSA selects a survey research organization to administer NSDUH. Currently, Research Triangle Institute (RTI) is under contract to conduct the 2007 NSDUH. RTI, which is located in Research Triangle Park, North Carolina, and closely associated with the University of North Carolina, Duke University, and North Carolina State University, is a large, experienced research organization that has conducted NSDUH since 1988.

## How Was I Selected?

A scientific random sample of households is selected throughout the United States. Once selected, no other residence can be substituted for any reason. A professional RTI interviewer makes a personal visit to each household to ask several initial questions. One or possibly two residents of your household may be asked to voluntarily participate in the survey. If you are selected, no other person can be substituted. Since the survey is based on a random sample, you will represent over 3,000 other United States residents.



## How Will the Data Be Used?

Government agencies, private organizations, individual researchers, and the public at large use the data for a number of purposes. For example, the U.S. Public Health Service and state health agencies use data from NSDUH to estimate the need for drug treatment facilities. Other federal, state, and local agencies use the information to support their drug use prevention programs and to monitor drug control strategies.

## What If I Do Not Smoke, Drink or Use Illegal Drugs?

In order to know the percentage of people who do use these substances, we also have to know how many people do not. Therefore, the responses of people who do not use drugs are just as important as those of people who do. You need not know anything about drugs to answer the questions. In addition, we ask a number of health-related questions that are relevant for all people.

## What Happens to My Information?

Each computerized interview data file—which is identified only by a code number—is electronically transmitted to RTI on the same day the interview is conducted. The answers then are combined with all other participants' answers, and are coded, totaled, and turned into statistics for analysis. As a quality-control measure, you may receive a telephone call or a letter from RTI to verify that the interviewer did complete the survey with you.

**CONFIDENTIAL**

## How Is the Study Administered?

NSDUH data are collected in the privacy of the participant's home. A professional RTI interviewer personally visits each selected household to administer the NSDUH questionnaire using a laptop computer. For some items, the interviewer reads questions and enters the responses into the computer; however, the participant privately enters most responses directly into the computer. The survey takes approximately 60 minutes to complete.



## Will My Answers Be Kept Confidential?

Both SAMHSA and RTI are committed to assuring complete confidentiality of responses. Our interest is only in the combination of all responses nationwide—not anyone's individual answers. Your name is never recorded or associated with your answers. The information is only used for statistical purposes and cannot be used for any other purpose. Confidentiality of all answers to questions in this survey is assured under Federal law, the Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA). Any project staff or authorized data user who violates CIPSEA may be subject to a jail term of up to 5 years, a fine of up to \$250,000, or both.

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- NSDUH is the primary source of national data on the use of alcohol, tobacco, and illicit substances. By volunteering in this study, you are helping us gather this important information that is needed to make accurate policy decisions.
- Individual residents of selected households, who are randomly chosen and agree to participate, are given a cash payment of \$30 at the end of the interview.
- If selected to participate, you will represent over 3,000 other United States residents. Since our sample is selected based on scientific random sampling, no other household or person can be substituted.
- By participating in this study, you will be assisting with the formation of public policy.

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### Conducted by

Research Triangle Institute  
3040 Cornwallis Road  
Research Triangle Park, NC 27709

*For more information on NSDUH or SAMHSA, contact:*

NSDUH National Study Director  
SAMHSA, Office of Applied Studies  
1 Choke Cherry Road  
Room 7-1009  
Rockville, MD 20857

*For more information on NSDUH or RTI, contact:*

NSDUH National Field Director  
Research Triangle Institute  
3040 Cornwallis Road  
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1-800-948-4079

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# National Survey on Drug Use and Health

Answering Your Important Questions



## What Is the National Survey on Drug Use and Health (NSDUH)?

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The primary objectives of NSDUH are:

- to collect timely data on the magnitude and patterns of alcohol, tobacco, and illegal substance use and abuse;
- to assess the consequences of substance use and abuse; and
- to identify those groups at high risk for substance use and abuse.

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### Sponsored by

Substance Abuse and Mental Health  
Services Administration

U.S. Public Health Service

U.S. Department of Health  
and Human Services

**Appendix G**  
**Protocols for Cognitive Interviews**



## **Participants Aged 12 to 17**



**Protocol for Cognitive Testing  
(Participants Aged 12 to 17)**

**National Survey on Drug Use and Health (NSDUH)**

**Date of Interview**\_\_\_\_\_

**Time Interview Started:**\_\_\_\_\_

*ENTER AFTER INTERVIEW COMPLETION:*

**Interviewer Initials**\_\_\_\_\_

**Time Interview Ended:** \_\_\_\_\_

*NOTE TO INTERVIEWER:*

READ (OR PARAPHRASE) THE FOLLOWING TO THE SUBJECT AFTER THE INFORMED CONSENT IS SIGNED:

(Thank you for participating in our study. The National Survey on Drug Use and Health is a large survey given to about 70,000 people across the country every year. It collects information on many health-related issues. The aim is to better serve all segments of the American population. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study.)

During this process, I will give you some materials to read through, show you a short video of an interaction between an interviewer and a potential respondent, and ask you some questions about the materials. My job is to take a lot of notes and to figure out how potential respondents think about these materials. There are no right or wrong answers to the questions I ask. Our main goal is to make sure that the materials make sense and tell people what they need to know about the study. You can help us by pointing out anything in the materials you find confusing or unclear. If something doesn't make sense, tell me that. Or, if you're not sure about your response, tell me that, too. When we're done you'll receive a \$40 gift card for participation.

Do you have any questions? Let's begin.

GIVE PARTICIPANT ONE VERSION OF THE FOLLOWING CONTACT MATERIALS (BASED ON RANDOM ASSIGNMENT SPREADSHEET):

- STUDY DESCRIPTION
- QUESTION AND ANSWER BROCHURE

The following materials are presented to people who are contacted to participate in the National Survey on Drug Use and Health. When the interviewer arrives at their door, the contacted participants are asked to read the "Study Description" describing the survey. If the contacted participants have further questions regarding the survey, they can be provided with a "Question and Answer Brochure".

Please read through these materials and let me know when you are finished.

WHEN THE PARTICIPANT INDICATES HE/SHE IS FINISHED READING THROUGH THE CONTACT MATERIALS SAY:

The following information is read to all participants of the National Survey on Drug Use and Health before starting the interview:

"This year, we are interviewing about 70,000 people across the nation. You have been randomly chosen to take part. You will represent over 1,000 young people in this country who are similar to you. You may choose not to take part in this study, but no one else can take your place. We will pay you \$30 when you finish the interview.

This study asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health issues. It takes about one hour. You will answer most of the questions on the computer, so I will not see your answers. Your answers will never be seen by either your parents or your school. We are only interested in the combined responses from all 70,000 people, not just one person's answers. This is why we do not ask for your name and we keep your answers separate from your address. RTI may contact you by phone or mail to ask a few questions about the quality of my work. This is why we ask for your phone number and mailing address at the end of the interview.

While the interview has some personal questions, federal law keeps your answers private. We hope that protecting your privacy will help you to give accurate answers. You can quit the interview at any time and you can refuse to answer any questions.

If it is all right with you, let's get started."

AFTER THE INFORMED CONSENT STATEMENT HAS BEEN READ TO THE PARTICIPANT SAY:  
Now I will show you a short 2-minute video of a typical interaction between an interviewer and a contacted participant.

PLAY VIDEO.

Based on the information you have read and heard, and the video you have seen, please answer the following questions.

**Q1** If your parent or legal guardian were the person contacted in the video and he or she gave the interviewer permission to interview you, how likely would you be to agree to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to participate, and 5 means you would be *very likely* to participate:

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF



Was there anything in the materials you just read and heard that would influence how likely you would be to agree to participate in the interview? If yes, what?

**Q2** As a reminder, the survey being presented in the materials you have read asks about drug use or non-use. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about drug use or non-use honestly? If yes, what?

**Q3** The survey being presented in the materials you have read also asks about mental health. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about mental health honestly? If yes, what?

GIVE PARTICIPANT OTHER VERSION OF THE FOLLOWING CONTACT MATERIALS (BASED ON RANDOM ASSIGNMENT SPREADSHEET):

- STUDY DESCRIPTION
- QUESTION AND ANSWER BROCHURE

Here is another version of the materials. Again, these materials are presented to people who are contacted to participate in the National Survey on Drug Use and Health. Please read through these materials and let me know when you are finished.

WHEN THE PARTICIPANT INDICATES HE/SHE IS FINISHED READING THROUGH THE CONTACT MATERIALS SAY:

Again, the following information is read to all participants of the National Survey on Drug Use and Health before starting the interview:

"This year, we are interviewing about 70,000 people across the nation. You have been randomly chosen to take part. You will represent over 1,000 young people in this country who are similar to you. You may choose not to take part in this study, but no one else can take your place. We will pay you \$30 when you finish the interview.

This study asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health issues. It takes about one hour. You will answer most of the questions on the computer, so I will not see your answers. Your answers will never be seen by either your parents or your school. We are only interested in the combined responses from all 70,000 people, not just one person's answers. This is why we do not ask for your name and we keep your answers separate from your address. RTI may contact you by phone or mail to ask a few questions about the quality of my work. This is why we ask for your phone number and mailing address at the end of the interview.

While the interview has some personal questions, federal law keeps your answers private. We hope that protecting your privacy will help you to give accurate answers. You can quit the interview at any time and you can refuse to answer any questions.

If it is all right with you, let's get started."

THEN SAY:

Based only on the version of the materials you have just read and heard, please answer the following questions.

**Q4** If your parent or legal guardian were the person contacted and he or she gave the interviewer permission to interview you, how likely would you be to agree to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to participate, and 5 means you would be *very likely* to participate:

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to agree to participate in the interview? If yes, what?

**Q5** As a reminder, the survey being presented in the materials you have just read asks about drug use or non-use. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about drug use or non-use honestly? If yes, what?

**Q6** The survey being presented in the materials you have just read also asks about mental health. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about mental health honestly? If yes, what?

KEEP OUT COPIES OF BOTH SETS OF MATERIALS WHEN ASKING THE PARTICIPANT THE FOLLOWING QUESTIONS.

Based on the two versions of the materials you have read, please answer the following questions.

F1 IS NOT ASKED FOR PARTICIPANTS 12 to 17.

**F2** *Did you notice any differences between the STUDY DESCRIPTION you read at the beginning of this interview and the one you just read?*

*If yes, what differences did you notice?*

**F3** *Did you notice any differences between the QUESTION AND ANSWER BROCHURE you read at the beginning of this interview and the one you just read?*

*If yes, what differences did you notice?*

**F4a (IF F2 or F3=YES)**

*Is one version of the materials more convincing in getting someone to respond to the survey being presented?*

*If yes, which version and why? If no, why?*

*Did you include the study description AND the question and answer brochure when telling me which version of the contact materials is more convincing?*

*(If not both): How did you decide which material(s) to tell me about?*

**F4b (IF F2 and F3=NO) Were the materials convincing in getting someone to respond to the survey being presented?**

*Why?*

*Did you include the study description AND the question and answer brochure when telling me whether the materials were convincing?*

*(If not both): How did you decide which material(s) to tell me about?*

**F5a (IF F2 or F3=YES) If you agreed to participate in the survey, would either version of the materials make you more or less likely to give honest answers to the questions in the survey about drug use or non-use?**

*If yes, which version(s) and why? If no, why?*

*Did you include the study description AND the question and answer brochure when telling me which version would make you more or less likely to give honest answers?*

*(If not both): How did you decide which material(s) to tell me about?*

**F5b (IF F2 and F3=NO) If you agreed to participate in the survey, would the materials make you more or less likely to give honest answers to the questions in the survey about drug use or non-use?**

*Why?*

*Did you include the study description AND the question and answer brochure when telling me whether the materials would make you more or less likely to give honest answers?*

*(If not both): How did you decide which material(s) to tell me about?*

**F6a (IF F2 or F3=YES) If you agreed to participate in the survey, would either version of the materials make you more or less likely to give honest answers to the questions in the survey about mental health?**

*If yes, which version(s) and why? If no, why?*

*Did you include the study description AND the question and answer brochure when telling me which version would make you more or less likely to give honest answers?*

*(If not both): How did you decide which material(s) to tell me about?*

**F6b (IF F2 and F3=NO) If you agreed to participate in the survey, would the materials make you more or less likely to give honest answers to the questions in the survey about mental health?**

*Why?*

*Did you include the study description AND the question and answer brochure when telling me whether the materials would make you more or less likely to give honest answers?*

*(If not both): How did you decide which material(s) to tell me about?*

Now I'm going to read out loud different sections of the materials you read earlier. After each section I'm going to ask you some questions about your understanding of various phrases within these materials.

U1 IS NOT ASKED FOR PARTICIPANTS 12 to 17.

READ 1<sup>st</sup> PARAGRAPH OF STUDY DESCRIPTION (THIS IS THE SAME IN BOTH VERSIONS)

**U2** *What did the phrase "randomly chosen" mean to you as used in this Study Description?*

READ 2<sup>nd</sup> PARAGRAPH OF ORIGINAL STUDY DESCRIPTION

**U3** *What did the phrase "research purposes" mean to you as used in this Study Description?*

READ 2<sup>nd</sup> PARAGRAPH OF REVISED STUDY DESCRIPTION

**U4** *What did the phrase "statistical purposes" mean to you as used in this Study Description?*



READ REMAINING SECTIONS OF THE REVISED STUDY DESCRIPTION (INCLUDING THE CIPSEA REFERENCE AT THE BOTTOM)

**U5** *In your own words, can you tell me what type of information is collected by the National Survey on Drug Use and Health? Do you think this type of information is important to research? Why?*

**U6** *Would you be convinced to do the interview for \$30? Why or why not?*

**U7** *What did the phrase "any project staff or authorized data user" mean to you as used in this Study Description?*

**U8** *What did the phrase "your confidentiality" mean to you as used in this Study Description?*

**U9** *In your own words, can you tell me what the penalty is for "any project staff or authorized data user who violates CIPSEA"?*

**U10** *What does it mean for someone to "violate CIPSEA"? (PROBE FOR EXAMPLES OF WHAT PARTICIPANT CONSIDERS TO BE VIOLATIONS)*

READ THE "WHY SHOULD I PARTICIPATE" SECTION OF THE QUESTION AND ANSWER BROCHURE (THIS IS THE SAME IN BOTH VERSIONS)

**U11** *What did the phrase "accurate policy decisions" mean to you as used in this Question and Answer Brochure?*

**U12** *Thinking about both versions of the Study Description and Question and Answer Brochures that you read earlier in this interview, are there any other terms or phrases in these materials that are unfamiliar or confusing to you? If yes, what are they and why?*

**D1** Let me confirm that you are \_\_\_\_\_ years old.

**D2** And let me confirm that you are a [MALE/FEMALE]?

- 1 MALE
- 2 FEMALE

**D3** What is the highest level of education you have completed?

- 1 Less than high school (includes no schooling through 11<sup>th</sup> grade)
- 2 High school graduate (includes GED)
- 3 Some college
- 4 College graduate (at least a 4-year degree)

**D4** What is your race? You may identify more than one category. Would you say you are . . .  
[Multiple responses allowed]

- 1 White or Caucasian
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander, or
- 5 American Indian or Alaskan Native?
- 6 Other (specify \_\_\_\_\_)

**D5** Are you of Hispanic, Latino, or Spanish origin or descent?

- 1 YES
- 2 NO

GIVE THE RESPONDENT A \$40 GIFT CARD AND A COPY OF THE SIGNED 'RECEIPT FOR PARTICIPATION' AND THANK HIM/HER FOR THEIR HELP WITH THE INTERVIEW.



**Participants – Parents or Legal Guardians of 12-17 Year Olds**



**Protocol for Cognitive Testing  
(Participants - Parents or Legal Guardians of 12-17 Year Olds)**

**National Survey on Drug Use and Health (NSDUH)**

**Date of Interview**\_\_\_\_\_

**Time Interview Started:**\_\_\_\_\_

*ENTER AFTER INTERVIEW COMPLETION:*

**Interviewer Initials**\_\_\_\_\_

**Time Interview Ended:** \_\_\_\_\_

*NOTE TO INTERVIEWER:*

READ (OR PARAPHRASE) THE FOLLOWING TO THE SUBJECT AFTER THE INFORMED CONSENT IS SIGNED:

(Thank you for participating in our study. The National Survey on Drug Use and Health is a large survey given to about 70,000 people across the country every year. It collects information on many health-related issues. The aim is to better serve all segments of the American population. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study.)

During this process, I will give you some materials to read through, show you a short video of an interaction between an interviewer and a potential respondent, and ask you some questions about the materials. My job is to take a lot of notes and to figure out how potential respondents think about these materials. There are no right or wrong answers to the questions I ask. Our main goal is to make sure that the materials make sense and tell people what they need to know about the study. You can help us by pointing out anything in the materials you find confusing or unclear. If something doesn't make sense, tell me that. Or, if you're not sure about your response, tell me that, too. When we're done you'll receive a \$40 gift card for participation.

Do you have any questions? Let's begin.

GIVE PARTICIPANT ONE VERSION OF THE FOLLOWING CONTACT MATERIALS (BASED ON RANDOM ASSIGNMENT SPREADSHEET):

- LEAD LETTER TO SELECTED DWELLING UNITS
- STUDY DESCRIPTION
- QUESTION AND ANSWER BROCHURE

The following materials are presented to people who are contacted to participate in the National Survey on Drug Use and Health. People who are contacted by this survey will first receive a "Lead Letter" in the mail to introduce them to the survey and notify them that an RTI interviewer will be in their neighborhood to provide them with additional information. When the interviewer arrives at their door, the contacted participants are asked to read the "Study Description" describing the survey. If the contacted participants have further questions regarding the survey, they can be provided with a "Question and Answer Brochure".

Please read through these materials and let me know when you are finished.

WHEN THE PARTICIPANT INDICATES HE/SHE IS FINISHED READING THROUGH THE CONTACT MATERIALS SAY:

The following information is read to all participants aged 18 or older of the National Survey on Drug Use and Health before starting the interview:

"This year, we are interviewing about 70,000 people across the nation. You have been randomly chosen to take part. You will represent over 3,000 other people who are similar to you. You may choose not to take part in this study, but no one else can take your place. We will pay you \$30 when you finish the interview.

This study asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health issues. It takes about an hour. You will answer most of the questions on the computer, so I will not see your answers. We are only interested in the combined responses from all 70,000 people, not just one person's answers. This is why we do not ask for your name and we keep your answers separate from your address. RTI may contact you by phone or mail to ask a few questions about the quality of my work. This is why we ask for your phone number and mailing address at the end of the interview.

While the interview has some personal questions, federal law keeps your answers private. We hope that protecting your privacy will help you to give accurate answers. You can quit the interview at any time and you can refuse to answer any questions.

If it is all right with you, let's get started."

THEN SAY:

The following information is read to all parents or legal guardians of 12-17 year old participants of the National Survey on Drug Use and Health before starting the interview.

"Your (AGE) year-old child has been selected to be in this study. Your child's participation is voluntary. This interview asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health related issues. All of your child's answers will be confidential and used only for [research (IF ORIGINAL VERSION)/statistical (IF REVISED VERSION)] purposes. Since your child will answer most of the questions on the computer, I will never see the answers, and you are not allowed to see them either. If it is all right with you, we'll get started."

AFTER THE INFORMED CONSENT STATEMENTS HAVE BEEN READ TO THE PARTICIPANT SAY:  
Now I will show you a short 2-minute video of a typical interaction between an interviewer and a contacted participant.



PLAY VIDEO.

Based on the information you have read and heard and the video you have seen, please answer the following questions.

**Q1(Parent)**

If you were the contacted participant in the video, how likely would you be to agree to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to participate, and 5 means you would be *very likely* to participate:

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to agree to participate in the interview? If yes, what?

**Q1(As Parent of Child)**

If you were the person contacted in the video, how likely would you be to agree to allow your 12-17 year old child to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to allow him/her to participate, and 5 means you would be *very likely* to allow him/her to participate:

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to agree to allow your 12-17 year old child to participate in the interview? If yes, what?

**Q2** As a reminder, the survey being presented in the materials you have read asks about drug use or non-use. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about drug use or non-use honestly? If yes, what?

**Q3** The survey being presented in the materials you have read also asks about mental health. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about mental health honestly? If yes, what?

GIVE PARTICIPANT OTHER VERSION OF THE FOLLOWING CONTACT MATERIALS (BASED ON RANDOM ASSIGNMENT SPREADSHEET):

- LEAD LETTER TO SELECTED DWELLING UNITS
- STUDY DESCRIPTION
- QUESTION AND ANSWER BROCHURE

Here is another version of the materials. Again, these materials are presented to people who are contacted to participate in the National Survey on Drug Use and Health. Please read through these materials and let me know when you are finished.

WHEN THE PARTICIPANT INDICATES HE/SHE IS FINISHED READING THROUGH THE CONTACT MATERIALS SAY:

Again, the following information is read to all participants aged 18 or older of the National Survey on Drug Use and Health before starting the interview:

"This year, we are interviewing about 70,000 people across the nation. You have been randomly chosen to take part. You will represent over 3,000 other people who are similar to you. You may choose not to take part in this study, but no one else can take your place. We will pay you \$30 when you finish the interview.

This study asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health issues. It takes about an hour. You will answer most of the questions on the computer, so I will not see your answers. We are only interested in the combined responses from all 70,000 people, not just one person's answers. This is why we do not ask for your name and we keep your answers separate from your address. RTI may contact you by phone or mail to ask a few questions about the quality of my work. This is why we ask for your phone number and mailing address at the end of the interview.

While the interview has some personal questions, federal law keeps your answers private. We hope that protecting your privacy will help you to give accurate answers. You can quit the interview at any time and you can refuse to answer any questions.

If it is all right with you, let's get started."

THEN SAY:

The following information is read to all parents or legal guardians of 12-17 year old participants of the National Survey on Drug Use and Health before starting the interview with the child.

"Your (AGE) year-old child has been selected to be in this study. Your child's participation is voluntary. This interview asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health related issues. All of your child's answers will be confidential and used only for [research (IF ORIGINAL VERSION)/statistical (IF REVISED VERSION)] purposes. Since your child will answer most of the questions on the computer, I will never see the answers, and you are not allowed to see them either. If it is all right with you, we'll get started."

THEN SAY:

Based only on the version of the materials you have just read and heard, please answer the following questions.

**Q4(Parent)**

If you were the contacted participant, how likely would you be to agree to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to participate, and 5 means you would be *very likely* to participate:

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to agree to participate in the interview? If yes, what?

**Q4(As Parent of Child)**

If you were the person contacted, how likely would you be to agree to allow your 12-17 year old child to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to allow him/her to participate, and 5 means you would be *very likely* to allow him/her to participate:

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to agree to allow your 12-17 year old child to participate in the interview? If yes, what?

**Q5** As a reminder, the survey being presented in the materials you have just read asks about drug use or non-use. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about drug use or non-use honestly? If yes, what?

**Q6** The survey being presented in the materials you have just read also asks about mental health. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about mental health honestly? If yes, what?

KEEP OUT COPIES OF BOTH SETS OF MATERIALS WHEN ASKING THE PARTICIPANT THE FOLLOWING QUESTIONS.

Based on the two versions of the materials you have read, please answer the following questions.

**F1** *Did you notice any differences between the LEAD LETTER you read at the beginning of this interview and the one you just read?*

*If yes, what differences did you notice?*

**F2** *Did you notice any differences between the STUDY DESCRIPTION you read at the beginning of this interview and the one you just read?*

*If yes, what differences did you notice?*

**F3** *Did you notice any differences between the QUESTION AND ANSWER BROCHURE you read at the beginning of this interview and the one you just read?*

*If yes, what differences did you notice?*

**F4a (Parent)**

**(IF F1or F2 or F3=YES)**

***Is one version of the materials more convincing in getting someone to respond to the survey being presented?***

***If yes, which version and why? If no, why?***

***Did you include the lead letter, study description, AND the question and answer brochure when telling me which version of the contact materials is more convincing?***

***(If not all three): How did you decide which material(s) to tell me about?***

**F4b (Parent)**

**(IF F1 and F2 and F3=NO) *Were the materials convincing in getting someone to respond to the survey being presented?***

***Why?***

***Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials were convincing?***

***(If not all three): How did you decide which material(s) to tell me about?***

**F4a (As Parent of Child)**

**(IF F1 or F2 or F3=YES) Is one version of the materials more convincing in getting a parent to allow his/her 12-17 year old child to respond to the survey being presented?**

*If yes, which version and why? If no, why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version of the contact materials is more convincing?*

*(If not all three): How did you decide which material(s) to tell me about?*

**F4b (As Parent of Child)**

**(IF F1 and F2 and F3=NO) Were the materials convincing in getting a parent to allow his/her 12-17 year old child to respond to the survey being presented?**

*Why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials were convincing?*

*(If not all three): How did you decide which material(s) to tell me about?*



**F5a (IF F1or F2 or F3=YES) If you agreed to participate in the survey, would either version of the materials make you more or less likely to give honest answers to the questions in the survey about drug use or non-use?**

*If yes, which version(s) and why? If no, why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version would make you more or less likely to give honest answers?*

*(If not all three): How did you decide which material(s) to tell me about?*

**F5b (IF F1 and F2 and F3=NO) If you agreed to participate in the survey, would the materials make you more or less likely to give honest answers to the questions in the survey about drug use or non-use?**

*Why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials would make you more or less likely to give honest answers?*

*(If not all three): How did you decide which material(s) to tell me about?*

**F6a (IF F1 or F2 or F3=YES) If you agreed to participate in the survey, would either version of the materials make you more or less likely to give honest answers to the questions in the survey about mental health?**

*If yes, which version(s) and why? If no, why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version would make you more or less likely to give honest answers?*

*(If not all three): How did you decide which material(s) to tell me about?*

**F6b (IF F1 and F2 and F3=NO) If you agreed to participate in the survey, would the materials make you more or less likely to give honest answers to the questions in the survey about mental health?**

*Why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials would make you more or less likely to give honest answers?*

*(If not all three): How did you decide which material(s) to tell me about?*

Now I'm going to read out loud different sections of the materials you read earlier. After each section I'm going to ask you some questions about your understanding of various phrases within these materials.

READ 1<sup>st</sup> PARAGRAPH OF LEAD LETTER (THIS IS THE SAME IN BOTH VERSIONS)

**U1 *What did the phrase "health-related issues" mean to you as used in this letter?***

READ 1<sup>st</sup> PARAGRAPH OF STUDY DESCRIPTION (THIS IS THE SAME IN BOTH VERSIONS)

**U2 *What did the phrase "randomly chosen" mean to you as used in this Study Description?***

READ 2<sup>nd</sup> PARAGRAPH OF ORIGINAL STUDY DESCRIPTION

**U3 *What did the phrase "research purposes" mean to you as used in this Study Description?***

READ 2<sup>nd</sup> PARAGRAPH OF REVISED STUDY DESCRIPTION

**U4 *What did the phrase "statistical purposes" mean to you as used in this Study Description?***

READ REMAINING SECTIONS OF THE REVISED STUDY DESCRIPTION (INCLUDING THE CIPSEA REFERENCE AT THE BOTTOM)

**U5** *In your own words, can you tell me what type of information is collected by the National Survey on Drug Use and Health? Do you think this type of information is important to research? Why?*

**U6** *Would you be convinced to do the interview for \$30? Why or why not?*

**U7** *What did the phrase "any project staff or authorized data user" mean to you as used in this Study Description?*

**U8** *What did the phrase "your confidentiality" mean to you as used in this Study Description?*

**U9** *In your own words, can you tell me what the penalty is for "any project staff or authorized data user who violates CIPSEA"?*

**U10** *What does it mean for someone to "violate CIPSEA"? (PROBE FOR EXAMPLES OF WHAT PARTICIPANT CONSIDERS TO BE VIOLATIONS)*

READ THE "WHY SHOULD I PARTICIPATE" SECTION OF THE QUESTION AND ANSWER BROCHURE (THIS IS THE SAME IN BOTH VERSIONS)

**U11** *What did the phrase "accurate policy decisions" mean to you as used in this Question and Answer Brochure?*

**U12** *Thinking about both versions of the Lead Letter, Study Description, and Question and Answer Brochures that you read earlier in this interview, are there any other terms or phrases in these materials that are unfamiliar or confusing to you? If yes, what are they and why?*

**D1** Let me confirm that you are \_\_\_\_\_ years old.

**D2** And let me confirm that you are a [MALE/FEMALE]?

- 1 MALE
- 2 FEMALE

**D3** What is the highest level of education you have completed?

- 1 Less than high school (includes no schooling through 11<sup>th</sup> grade)
- 2 High school graduate (includes GED)
- 3 Some college
- 4 College graduate (at least a 4-year degree)

**D4** What is your race? You may identify more than one category. Would you say you are . . .  
[Multiple responses allowed]

- 1 White or Caucasian
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander, or
- 5 American Indian or Alaskan Native?
- 6 Other (specify \_\_\_\_\_)

**D5** Are you of Hispanic, Latino, or Spanish origin or descent?

- 1 YES
- 2 NO

GIVE THE RESPONDENT A \$40 GIFT CARD AND A COPY OF THE SIGNED 'RECEIPT FOR PARTICIPATION' AND THANK HIM/HER FOR THEIR HELP WITH THE INTERVIEW.

## **Participants Aged 18 or Older**





**Protocol for Cognitive Testing  
(Participants Aged 18 or Older)**

**National Survey on Drug Use and Health (NSDUH)**

**Date of Interview**\_\_\_\_\_

**Time Interview Started:**\_\_\_\_\_

*ENTER AFTER INTERVIEW COMPLETION:*

**Interviewer Initials**\_\_\_\_\_

**Time Interview Ended:** \_\_\_\_\_

*NOTE TO INTERVIEWER:*

READ (OR PARAPHRASE) THE FOLLOWING TO THE SUBJECT AFTER THE INFORMED CONSENT IS SIGNED:

(Thank you for participating in our study. The National Survey on Drug Use and Health is a large survey given to about 70,000 people across the country every year. It collects information on many health-related issues. The aim is to better serve all segments of the American population. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study.)

During this process, I will give you some materials to read through, show you a short video of an interaction between an interviewer and a potential respondent, and ask you some questions about the materials. My job is to take a lot of notes and to figure out how potential respondents think about these materials. There are no right or wrong answers to the questions I ask. Our main goal is to make sure that the materials make sense and tell people what they need to know about the study. You can help us by pointing out anything in the materials you find confusing or unclear. If something doesn't make sense, tell me that. Or, if you're not sure about your response, tell me that, too. When we're done you'll receive a \$40 gift card for participation.

Do you have any questions? Let's begin.

GIVE PARTICIPANT ONE VERSION OF THE FOLLOWING CONTACT MATERIALS (BASED ON RANDOM ASSIGNMENT SPREADSHEET):

- LEAD LETTER TO SELECTED DWELLING UNITS
- STUDY DESCRIPTION
- QUESTION AND ANSWER BROCHURE

The following materials are presented to people who are contacted to participate in the National Survey on Drug Use and Health. People who are contacted by this survey will first receive a "Lead Letter" in the mail to introduce them to the survey and notify them that an RTI interviewer will be in their neighborhood to provide them with additional information. When the interviewer arrives at their door, the contacted participants are asked to read the "Study Description" describing the survey. If the contacted participants have further questions regarding the survey, they can be provided with a "Question and Answer Brochure".

Please read through these materials and let me know when you are finished.

WHEN THE PARTICIPANT INDICATES HE/SHE IS FINISHED READING THROUGH THE CONTACT MATERIALS SAY:

The following information is read to all participants of the National Survey on Drug Use and Health before starting the interview:

"This year, we are interviewing about 70,000 people across the nation. You have been randomly chosen to take part. You will represent over 3,000 other people who are similar to you. You may choose not to take part in this study, but no one else can take your place. We will pay you \$30 when you finish the interview.

This study asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health issues. It takes about an hour. You will answer most of the questions on the computer, so I will not see your answers. We are only interested in the combined responses from all 70,000 people, not just one person's answers. This is why we do not ask for your name and we keep your answers separate from your address. RTI may contact you by phone or mail to ask a few questions about the quality of my work. This is why we ask for your phone number and mailing address at the end of the interview.

While the interview has some personal questions, federal law keeps your answers private. We hope that protecting your privacy will help you to give accurate answers. You can quit the interview at any time and you can refuse to answer any questions.

If it is all right with you, let's get started."

AFTER THE INFORMED CONSENT STATEMENT HAS BEEN READ TO THE PARTICIPANT SAY:  
Now I will show you a short 2-minute video of a typical interaction between an interviewer and a contacted participant.

PLAY VIDEO.

Based on the information you have read and heard and the video you have seen, please answer the following questions.

**Q1** If you were the contacted participant in the video, how likely would you be to agree to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to participate, and 5 means you would be *very likely* to participate:

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to agree to participate in the interview? If yes, what?

**Q2** As a reminder, the survey being presented in the materials you have read asks about drug use or non-use. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about drug use or non-use honestly? If yes, what?

**Q3** The survey being presented in the materials you have read also asks about mental health. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about mental health honestly? If yes, what?

GIVE PARTICIPANT OTHER VERSION OF THE FOLLOWING CONTACT MATERIALS (BASED ON RANDOM ASSIGNMENT SPREADSHEET):

- LEAD LETTER TO SELECTED DWELLING UNITS
- STUDY DESCRIPTION
- QUESTION AND ANSWER BROCHURE

Here is another version of the materials. Again, these materials are presented to people who are contacted to participate in the National Survey on Drug Use and Health. Please read through these materials and let me know when you are finished.

WHEN THE PARTICIPANT INDICATES HE/SHE IS FINISHED READING THROUGH THE CONTACT MATERIALS SAY:

Again, the following information is read to all participants of the National Survey on Drug Use and Health before starting the interview:

"This year, we are interviewing about 70,000 people across the nation. You have been randomly chosen to take part. You will represent over 3,000 other people who are similar to you. You may choose not to take part in this study, but no one else can take your place. We will pay you \$30 when you finish the interview.

This study asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health issues. It takes about an hour. You will answer most of the questions on the computer, so I will not see your answers. We are only interested in the combined responses from all 70,000 people, not just one person's answers. This is why we do not ask for your name and we keep your answers separate from your address. RTI may contact you by phone or mail to ask a few questions about the quality of my work. This is why we ask for your phone number and mailing address at the end of the interview.

While the interview has some personal questions, federal law keeps your answers private. We hope that protecting your privacy will help you to give accurate answers. You can quit the interview at any time and you can refuse to answer any questions.

If it is all right with you, let's get started."

THEN SAY:

Based only on the version of the materials you have just read and heard, please answer the following questions.

**Q4** If you were the contacted participant, how likely would you be to agree to participate in the interview? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to participate, and 5 means you would be *very likely* to participate:

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to agree to participate in the interview? If yes, what?

**Q5** As a reminder, the survey being presented in the materials you have just read asks about drug use or non-use. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about drug use or non-use honestly? If yes, what?

**Q6** The survey being presented in the materials you have just read also asks about mental health. If you agreed to participate in the survey, how likely would you be to answer these questions honestly? Indicate a number from 1 to 5, where 1 means you would be *not at all likely* to answer honestly, and 5 means you would be *very likely* to answer honestly.

INTERVIEWER – CIRCLE THE RESPONDENT'S ANSWER

1      2      3      4      5      DK/REF

Was there anything in the materials you just read and heard that would influence how likely you would be to answer questions about mental health honestly? If yes, what?

KEEP OUT COPIES OF BOTH SETS OF MATERIALS WHEN ASKING THE PARTICIPANT THE FOLLOWING QUESTIONS.

Based on the two versions of the materials you have read, please answer the following questions.

**F1** *Did you notice any differences between the LEAD LETTER you read at the beginning of this interview and the one you just read?*

*If yes, what differences did you notice?*

**F2** *Did you notice any differences between the STUDY DESCRIPTION you read at the beginning of this interview and the one you just read?*

*If yes, what differences did you notice?*

**F3** *Did you notice any differences between the QUESTION AND ANSWER BROCHURE you read at the beginning of this interview and the one you just read?*

*If yes, what differences did you notice?*

**F4a (IF F1or F2 or F3=YES)**

*Is one version of the materials more convincing in getting someone to respond to the survey being presented?*

*If yes, which version and why? If no, why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version of the contact materials is more convincing?*

*(If not all three): How did you decide which material(s) to tell me about?*

**F4b (IF F1 and F2 and F3=NO) Were the materials convincing in getting someone to respond to the survey being presented?**

*Why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials were convincing?*

*(If not all three): How did you decide which material(s) to tell me about?*

**F5a (IF F1or F2 or F3=YES) If you agreed to participate in the survey, would either version of the materials make you more or less likely to give honest answers to the questions in the survey about drug use or non-use?**

*If yes, which version(s) and why? If no, why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version would make you more or less likely to give honest answers?*

*(If not all three): How did you decide which material(s) to tell me about?*

**F5b (IF F1 and F2 and F3=NO) If you agreed to participate in the survey, would the materials make you more or less likely to give honest answers to the questions in the survey about drug use or non-use?**

*Why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials would make you more or less likely to give honest answers?*

*(If not all three): How did you decide which material(s) to tell me about?*



**F6a (IF F1 or F2 or F3=YES) If you agreed to participate in the survey, would either version of the materials make you more or less likely to give honest answers to the questions in the survey about mental health?**

*If yes, which version(s) and why? If no, why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me which version would make you more or less likely to give honest answers?*

*(If not all three): How did you decide which material(s) to tell me about?*

**F6b (IF F1 and F2 and F3=NO) If you agreed to participate in the survey, would the materials make you more or less likely to give honest answers to the questions in the survey about mental health?**

*Why?*

*Did you include the lead letter, study description, AND the question and answer brochure when telling me whether the materials would make you more or less likely to give honest answers?*

*(If not all three): How did you decide which material(s) to tell me about?*

Now I'm going to read out loud different sections of the materials you read earlier. After each section I'm going to ask you some questions about your understanding of various phrases within these materials.

READ 1<sup>st</sup> PARAGRAPH OF LEAD LETTER (THIS IS THE SAME IN BOTH VERSIONS)

**U1 *What did the phrase "health-related issues" mean to you as used in this letter?***

READ 1<sup>st</sup> PARAGRAPH OF STUDY DESCRIPTION (THIS IS THE SAME IN BOTH VERSIONS)

**U2 *What did the phrase "randomly chosen" mean to you as used in this Study Description?***

READ 2<sup>nd</sup> PARAGRAPH OF ORIGINAL STUDY DESCRIPTION

**U3 *What did the phrase "research purposes" mean to you as used in this Study Description?***

READ 2<sup>nd</sup> PARAGRAPH OF REVISED STUDY DESCRIPTION

**U4 *What did the phrase "statistical purposes" mean to you as used in this Study Description?***

READ REMAINING SECTIONS OF THE REVISED STUDY DESCRIPTION (INCLUDING THE CIPSEA REFERENCE AT THE BOTTOM)

**U5** *In your own words, can you tell me what type of information is collected by the National Survey on Drug Use and Health? Do you think this type of information is important to research? Why?*

**U6** *Would you be convinced to do the interview for \$30? Why or why not?*

**U7** *What did the phrase "any project staff or authorized data user" mean to you as used in this Study Description?*

**U8** *What did the phrase "your confidentiality" mean to you as used in this Study Description?*

**U9** *In your own words, can you tell me what the penalty is for "any project staff or authorized data user who violates CIPSEA"?*

**U10** *What does it mean for someone to "violate CIPSEA"? (PROBE FOR EXAMPLES OF WHAT PARTICIPANT CONSIDERS TO BE VIOLATIONS)*

READ THE "WHY SHOULD I PARTICIPATE" SECTION OF THE QUESTION AND ANSWER BROCHURE (THIS IS THE SAME IN BOTH VERSIONS)

**U11** *What did the phrase "accurate policy decisions" mean to you as used in this Question and Answer Brochure?*

**U12** *Thinking about both versions of the Lead Letter, Study Description, and Question and Answer Brochures that you read earlier in this interview, are there any other terms or phrases in these materials that are unfamiliar or confusing to you? If yes, what are they and why?*

**D1** Let me confirm that you are \_\_\_\_\_ years old.

**D2** And let me confirm that you are a [MALE/FEMALE]?

- 1 MALE
- 2 FEMALE

**D3** What is the highest level of education you have completed?

- 1 Less than high school (includes no schooling through 11<sup>th</sup> grade)
- 2 High school graduate (includes GED)
- 3 Some college
- 4 College graduate (at least a 4-year degree)

**D4** What is your race? You may identify more than one category. Would you say you are . . .  
[Multiple responses allowed]

- 1 White or Caucasian
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander, or
- 5 American Indian or Alaskan Native?
- 6 Other (specify \_\_\_\_\_)

**D5** Are you of Hispanic, Latino, or Spanish origin or descent?

- 1 YES
- 2 NO

GIVE THE RESPONDENT A \$40 GIFT CARD AND A COPY OF THE SIGNED 'RECEIPT FOR PARTICIPATION' AND THANK HIM/HER FOR THEIR HELP WITH THE INTERVIEW.



**Appendix H**  
**Recruitment Ads**





## **Recruitment Flyer for Adolescents**

**\*Volunteers needed\***

Pay provided

RTI International, a not-for-profit research organization, is looking for people aged 12-17 to read and provide input on written information for a national study on health-related issues. No medical tests or examinations are involved. Requires about 1 hour. Confidentiality is guaranteed, but we will need to ask permission from a parent or legal guardian. The private interview will be conducted in our XXX office. Participants will be given a \$40 gift card.

Call XXX-XXX-XXXX to learn more.

**Recruitment Flyer for Parents or Legal Guardians of Adolescents**

\*Volunteers needed\*

Pay provided

RTI International, a not-for-profit research organization, is looking for parents or legal guardians of people aged 12-17 to read and provide input on written information for a national study on health-related issues. No medical tests or examinations are involved. Requires about 1 hour. Confidentiality is guaranteed. The private interview will be conducted in our XXX office. Participants will be given a \$40 gift card.

Call XXX-XXX-XXXX to learn more.

## **Recruitment Flyer for Adults**

**\*Volunteers needed\***

Pay provided

RTI International, a not-for-profit research organization, is looking for adults aged 18 or older to read and provide input on written information for a national study on health-related issues. Specifically, we are looking for participants who have either never used illegal drugs OR used illegal drugs in the past 12 months. Confidentiality is guaranteed. No medical tests or examinations are involved. Requires about 1 hour. The private interview will be conducted in our XXX office. Participants will be given a \$40 gift card.

Call XXX-XXX-XXXX to learn more.



**Appendix I**  
**Recruitment Screeners**



**Screener for Adolescents (& Parents or Legal Guardians of Adolescents)**

Date/Time of call \_\_\_\_\_

Thank you for calling about our health study. First, I have a few questions to ask to see if you're eligible to participate.

1. Is the location you are calling from in or near [LOCATION 1] or [LOCATION 2]? \_\_\_\_\_  
CONTINUE WITH CALLER USING THE RECRUITMENT SCHEDULE FOR THE SPECIFIED CITY.

2. How old are you? \_\_\_\_\_

IF CALLER UNDER 12 THEN HE/SHE IS INELIGIBLE. THANK HIM/HER AND TERMINATE CALL.

IF CALLER OVER 17, USE SCREENER FOR ADULTS.

IF CALLER IS 12-17 YEARS OLD AND WE DO NOT CURRENTLY NEED PARTICIPANTS FOR THIS AGE GROUP, PUT HIM/HER ON A WILL CALL LIST , THANK HIM/HER AND TERMINATE CALL.

IF CALLER IS 12-17 YEARS OLD AND WE STILL NEED PARTICIPANTS FOR THIS AGE GROUP, CONTINUE WITH Q3

3. How did you hear about this study?

4. Since you are under 18, I will first need to talk with a parent or guardian and ask them if it is okay for you to participate. I can get your parent or guardian's permission over the phone. Once I get their permission, I'll tell you more about the study, then see if you would be willing to help us with this study.

May I speak with your parent or guardian now to ask if it is okay for you to participate?

1 YES [CONTINUE]

2 NO [INSTRUCT ADOLESCENT TO HAVE PARENT/GUARDIAN CALL RTI. TERMINATE CALL].

5. When I'm talking to your parent or guardian I will need to mention your name so they will know who called about our study. Can you provide me with your first name? \_\_\_\_\_

6. TO PARENT/GUARDIAN: My name is \_\_\_\_\_ from RTI International. (CHILD'S NAME) responded to an advertisement we placed for paid research subjects ages 12-17. We would like to talk with you further about [his/her] participation in this study, but we must first verify that we are speaking with an adult who is responsible for (CHILD'S NAME). Could I have your home phone number and the name that number is listed in? I will be calling Directory Assistance to verify this information, then will call you back at that number to tell you about the study.

PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_

CONFIRM INFORMATION WITH DIRECTORY ASSISTANCE AND CALL PARENT OR GUARDIAN BACK.

-----

7. ONCE RE-CONNECTED WITH THE PARENT OR GUARDIAN, GO THROUGH PARENTAL CONSENT FOR PARTICIPATION AND CLIENT OBSERVATION.
8. HAVE THE PARENTAL CONSENT AND PARENTAL CONSENT FOR OBSERVATION FORMS BEEN COMPLETED?

- 1 YES [CONTINUE]  
2 NO [CHILD IS INELIGIBLE. THANK CALLER AND TERMINATE CALL]

IF WE STILL NEED PARTICIPANTS FOR PARENTS OR LEGAL GUARDIANS OF 12-17 YEAR OLDS, CONTINUE WITH Q9, ELSE CONTINUE WITH Q11.

9. Before I talk to your child again, I wanted to inform you that you, as a parent or guardian of a child aged 12-17, are also eligible to participate in the study.

The interview process would be similar to the interview you have given permission for (CHILD'S NAME) to participate in.

You will meet with an interviewer for about an hour and receive a \$40 gift card in appreciation for the interview. In addition, we would like to audiotape the interactions between you and the interviewer. The audiotape will be heard only by members of the research team to help us make sure we have all the information from you about how our revised materials work. However, having the interview audiotaped is voluntary and you can decline.

Taking part in the interview is strictly voluntary. The interview will be conducted in private to ensure nobody else overhears your answers. All of your answers will be kept private and confidential. We will not share the information you give us with any person outside the project staff, and your name will never be connected to the answers you provide. Federal law requires us to keep your answers confidential and to use your answers only for statistical purposes (the Confidential Information Protection and Statistical Efficiency Act of 2002).

Would you be willing to help us with this study?

- 1 YES TO INTERVIEW AND AUDIOTAPE  
2 YES TO INTERVIEW BUT REFUSED AUDIOTAPE  
3 NO TO INTERVIEW [CALLER INELIGIBLE. CONTINUE WITH Q11]

10. Can you come to [RTI OFFICE] on [DATE]?

- 1 YES [SCHEDULE APPOINTMENT AND GIVE DIRECTIONS TO RTI OFFICE]  
2 NO [OFFER ALTERNATIVES. IF NONE ARE SUITABLE, CONTINUE WITH Q11.]

11. Thank you, now I would like to tell your child more about the study and see if [he/she] would be willing to help with the study.

---

CONTINUE WITH ADOLESCENT

12. Let me tell you about the study. This is for the National Survey on Drug Use and Health. In this study, we talk to around 70,000 people all over the country. We get information about a lot of health issues, so that we can better help everyone in the United States. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study. (RTI is doing this study for the U.S. Public Health Service.)



You will meet with an interviewer for about an hour. During the interview, you will be given some materials to read through, shown a short video of an interaction between an interviewer and a potential respondent, and asked some questions about the materials. We would also like to audiotape you and the interviewer while you answer these questions. Only the people who work on this study will hear the audiotape. It will help us make sure we have all information from you about how the revised materials work. If you don't want us to audiotape you, that's okay.

You can refuse to answer any or all of the questions asked by the interviewer. If you want to take a break at any time, you can just tell the interviewer. Your name will be kept private. No one else will see your answers to any of these questions and no one will know what your answers are. Federal law makes us keep your answers private and also makes sure we only use your answers for statistical purposes (the Confidential Information Protection and Statistical Efficiency Act of 2002). -

When we finish, we will give you a \$40 gift card to thank you for taking time to talk to us. Would you be willing to help us with this study?

- 1 YES TO INTERVIEW AND AUDIOTAPE
- 2 YES TO INTERVIEW BUT REFUSED AUDIOTAPE
- 3 NO TO INTERVIEW [CALLER INELIGIBLE. THANK AND TERMINATE CALL]

13. Can you come to [RTI OFFICE] on [DATE]?

- 1 YES [SCHEDULE APPOINTMENT AND GIVE DIRECTIONS TO RTI OFFICE]
- 2 NO [OFFER ALTERNATIVES. IF NONE ARE SUITABLE, THANK AND TERMINATE.]

## Screener for Adults (&Parents or Legal Guardians of Adolescents)

Date/Time of call \_\_\_\_\_

Thank you for calling about our health study. First, I have a few questions that I'll need to ask you to see if you're eligible to participate.

I want to emphasize that all of your answers to the questions in this call will be kept private and confidential. I will not share the information you give me with any person outside the project staff. Federal law requires us to keep your answers confidential and to use your answers only for statistical purposes (the Confidential Information Protection and Statistical Efficiency Act of 2002).

1. Is the location you are calling from in or near [LOCATION 1] or [LOCATION 2]? \_\_\_\_\_  
CONTINUE WITH CALLER USING THE RECRUITMENT SCHEDULE FOR THE SPECIFIED CITY.
2. How old are you? \_\_\_\_\_  
  
IF CALLER IS UNDER 18 USE SCREENER FOR ADOLESCENTS.  
  
IF CALLER IS 18 YEARS OLD OR OLDER, CONTINUE WITH Q3.
3. How did you hear about this study?

IF CALLER HEARD ABOUT THIS STUDY THROUGH AD FOR 'PARENTS OR LEGAL GUARDIANS OF ADOLESCENTS' AND WE STILL NEED PARTICIPANTS FOR THIS GROUP, CONTINUE WITH Q11.

IF CALLER HEARD ABOUT THIS STUDY THROUGH AD FOR 'PARENTS OR LEGAL GUARDIANS OF ADOLESCENTS' AND WE DO NOT CURRENTLY NEED PARTICIPANTS FOR THIS GROUP,

IF WE NEED PARTICIPANTS FOR THE AGE GROUPS 18-49 or 50+, EXPLAIN TO THE CALLER THAT WE NO LONGER NEED PARTICIPANTS FOR THE SPECIFIC AD THEY WERE CALLING ABOUT BUT HE/SHE MAY BE ELIGIBLE TO PARTICIPATE AS AN ADULT (READ RECRUITMENT AD FOR ADULTS TO CALLER). IF CALLER IS OK WITH THIS, THEN CONTINUE WITH Q4, ELSE PUT HIM/HER ON A WILL CALL LIST, THANK HIM/HER AND TERMINATE CALL.

IF WE DO NOT NEED PARTICIPANTS FOR THE AGE GROUPS 18-49 or 50+, PUT HIM/HER ON A WILL CALL LIST , THANK HIM/HER AND TERMINATE CALL.

IF CALLER HEARD ABOUT THIS STUDY THROUGH AD FOR 'ADULTS' AND WE STILL NEED PARTICIPANTS FOR THE AGE GROUPS 18-49 AND/OR 50+, CONTINUE WITH Q4.

IF CALLER HEARD ABOUT THIS STUDY THROUGH AD FOR 'ADULTS' AND WE DO NOT CURRENTLY NEED PARTICIPANTS FOR THE AGE GROUPS 18-49 or 50+,

IF WE NEED PARTICIPANTS FOR PARENTS OR LEGAL GUARDIANS OF ADOLESCENTS, CONTINUE WITH Q10,

ELSE PUT HIM/HER ON A WILL CALL LIST, THANK HIM/HER AND TERMINATE CALL.

READ BEFORE ASKING Q4: In order to determine your eligibility for participating in this study, I will need to ask you some questions about your use of illegal drugs. Is it ok to continue?

- 1 YES TO CONTINUE [PROCEED TO Q4]
- 2 NO TO CONTINUE [CALLER INELIGIBLE. THANK AND TERMINATE CALL]

4. Have you ever used any of the following illegal drugs?

- |   |   |        |       |
|---|---|--------|-------|
| a | Marijuana   | ___YES | ___NO |
| b | Cocaine   | ___YES | ___NO |
| c | Crack   | ___YES | ___NO |
| d | Heroin  | ___YES | ___NO |
| e | LSD, also called 'acid'   | ___YES | ___NO |
| f | PCP, also called 'angel dust' or phencyclidine  | ___YES | ___NO |
| g | Ecstasy, also known as MDMA   | ___YES | ___NO |
| h | Other hallucinogens such as peyote, mescaline, or psilocybin (found in mushrooms)           | ___YES | ___NO |
| i | An illegal form of methamphetamine (also known as crank, ice, crystal meth, speed or glass) | ___YES | ___NO |

RECRUITING FOR NON-DRUG USERS

IF RESPONDENT ANSWERS "NO" TO ALL ITEMS a THROUGH i IN Q4, AND WE NO LONGER NEED NON-DRUG USER PARTICIPANTS FOR THE AGE GROUPS 18-49 AND 50+, PUT HIM/HER ON A WILL CALL LIST, THANK HIM/HER AND TERMINATE CALL.

IF RESPONDENT ANSWERS "NO" TO ALL ITEMS a THROUGH i IN Q4, AND WE STILL NEED NON-DRUG USER PARTICIPANTS FOR THE AGE GROUPS 18-49 AND/OR 50+, CONTINUE WITH Q7.

DRUG USERS

IF RESPONDENT ANSWERS "YES" TO ANY ITEM a THROUGH i IN Q4, AND WE NO LONGER NEED DRUG USER PARTICIPANTS FOR THE AGE GROUPS 18-49 AND 50+, PUT HIM/HER ON A WILL CALL LIST, THANK HIM/HER AND TERMINATE CALL.

IF RESPONDENT ANSWERS "YES" TO ANY ITEM a THROUGH i IN Q4, AND WE STILL NEED DRUG USER PARTICIPANTS FOR THE AGE GROUPS 18-49 AND/OR 50+, CONTINUE WITH Q5, REPEATING ONLY FOR DRUGS RESPONDENT ANSWERED "YES" TO IN Q4.

5. Have you used [DRUG] in the past 12 months?

- |   |   |                 |        |       |
|---|---|-----------------|--------|-------|
| a | Marijuana   | ___ N/A (Q4=NO) | ___YES | ___NO |
| b | Cocaine   | ___ N/A (Q4=NO) | ___YES | ___NO |
| c | Crack   | ___ N/A (Q4=NO) | ___YES | ___NO |
| d | Heroin  | ___ N/A (Q4=NO) | ___YES | ___NO |
| e | LSD, also called 'acid'   | ___ N/A (Q4=NO) | ___YES | ___NO |
| f | PCP, also called 'angel dust' or phencyclidine  | ___ N/A (Q4=NO) | ___YES | ___NO |
| g | Ecstasy, also known as MDMA   | ___ N/A (Q4=NO) | ___YES | ___NO |
| h | Other hallucinogens such as peyote, mescaline, or psilocybin (found in mushrooms)           | ___ N/A (Q4=NO) | ___YES | ___NO |
| i | An illegal form of methamphetamine (also known as crank, ice, crystal meth, speed or glass) | ___ N/A (Q4=NO) | ___YES | ___NO |

IF ALL ITEMS a THROUGH i IN Q5 ARE EITHER N/A OR "NO", RESPONDENT IS INELIGIBLE, THANK HIM/HER AND TERMINATE CALL.

IF RESPONDENT ANSWERS "YES" TO ANY ITEM a THROUGH i IN Q5, CONTINUE WITH Q6, REPEATING ONLY FOR DRUGS RESPONDENT ANSWERED "YES" TO IN Q5

6. Have you used [DRUG] in the past 30 days?

- |   |  |                        |         |        |
|---|--|------------------------|---------|--------|
| a | Marijuana  | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |
| b | Cocaine  | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |
| c | Crack  | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |
| d | Heroin   | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |
| e | LSD, also called 'acid'  | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |
| f | PCP, also called 'angel dust'<br>or phencyclidine  | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |
| g | Ecstasy, also known as MDMA  | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |
| h | Other hallucinogens such as<br>peyote, mescaline, or psilocybin<br>(found in mushrooms)              | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |
| i | An illegal form of<br>methamphetamine (also known<br>as crank, ice, crystal meth,<br>speed or glass) | ___ N/A (Q5=N/A or NO) | ___ YES | ___ NO |

7. What is the highest level of education you have completed?

- 1 Less than high school (Includes no schooling through eleventh grade)
- 2 High school graduate (Includes GED)

IF RESPONDENT ANSWERS "LESS THAN HIGH SCHOOL" AND WE NO LONGER NEED PARTICIPANTS FOR THIS GROUP, PUT HIM/HER ON A WILL CALL LIST, THANK HIM/HER AND TERMINATE CALL, OTHERWISE, GO TO Q8.

IF RESPONDENT ANSWERS "HIGH SCHOOL GRADUATE" AND WE NO LONGER NEED PARTICIPANTS FOR THIS GROUP, PUT HIM/HER ON A WILL CALL LIST, THANK HIM/HER AND TERMINATE CALL, OTHERWISE, GO TO Q8.

8. You are eligible to participate! Let me tell you about the study. This is for the National Survey on Drug Use and Health, which is a large survey given to about 70,000 people across the country every year. It collects information on many health-related issues. The aim is to better serve all segments of the population in the United States. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study.

This research study is being conducted by RTI International in collaboration with the U.S. Public Health Service. The interview will take about 60 minutes. During the interview, you will be given some materials to read through, shown a short video of an interaction between an interviewer and a potential respondent, and asked some questions about the materials. You will receive a \$40 gift card in appreciation for the interview. In addition, we would like to audiotape the interactions between you and the interviewer. The audiotape will be heard only by members of the research team to help us make sure we have all the information from you about how our revised materials work. However, having the interview audiotaped is voluntary and you can decline.

Taking part in the interview is strictly voluntary. The interview will be conducted in private to ensure nobody else overhears your answers. All of your answers will be kept private and confidential. We will not share the information you give us with any person outside the project staff, and your name will never be

connected to the answers you provide. Federal law requires us to keep your answers confidential and to use your answers only for statistical purposes (the Confidential Information Protection and Statistical Efficiency Act of 2002).

Would you be willing to help us with this study?

- 1 YES TO INTERVIEW AND AUDIOTAPE
- 2 YES TO INTERVIEW BUT REFUSED AUDIOTAPE
- 3 NO TO INTERVIEW [CALLER INELIGIBLE. THANK AND TERMINATE CALL]

9. Can you come to [RTI OFFICE] on [DATE]?

- 1 YES [SCHEDULE APPOINTMENT AND GIVE DIRECTIONS TO RTI OFFICE]
- 2 NO [OFFER ALTERNATIVES. IF NONE ARE SUITABLE, THANK AND TERMINATE.]

10. Are you a parent or legal guardian of a 12-17 year old child? \_\_\_\_\_

IF CALLER IS NOT A PARENT OR LEGAL GUARDIAN OF A 12-17 YEAR OLD CHILD, THANK HIM/HER AND TERMINATE CALL.

IF CALLER IS A PARENT OR LEGAL GUARDIAN OF A 12-17 YEAR OLD CHILD, CONTINUE WITH Q11.

11. You are eligible to participate in this study as a parent or guardian of a 12-17 year old child. Let me tell you about the study. This is for the National Survey on Drug Use and Health, which is a large survey given to about 70,000 people across the country every year. It collects information on many health-related issues. The aim is to better serve all segments of the population in the United States. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study

This research study is being conducted by RTI International in collaboration with the U.S. Public Health Service. The interview will take about 60 minutes. During the interview, you will be given some materials to read through, shown a short video of an interaction between an interviewer and a potential respondent, and asked some questions about the materials. You will receive a \$40 gift card in appreciation for the interview. In addition, we would like to audiotape the interactions between you and the interviewer. The audiotape will be heard only by members of the research team to help us make sure we have all the information from you about how our revised materials work. However, having the interview audiotaped is voluntary and you can decline.

Taking part in the interview is strictly voluntary. The interview will be conducted in private to ensure nobody else overhears your answers. All of your answers will be kept private and confidential. We will not share the information you give us with any person outside the project staff, and your name will never be connected to the answers you provide. Federal law requires us to keep your answers confidential and to use your answers only for statistical purposes (the Confidential Information Protection and Statistical Efficiency Act of 2002).

Would you be willing to help us with this study?

- 1 YES TO INTERVIEW AND AUDIOTAPE
- 2 YES TO INTERVIEW BUT REFUSED AUDIOTAPE
- 3 NO TO INTERVIEW [CALLER INELIGIBLE. THANK AND TERMINATE CALL]

12. Can you come to [RTI OFFICE] on [DATE]?

- 1 YES [SCHEDULE APPOINTMENT AND GIVE DIRECTIONS TO RTI OFFICE]
- 2 NO [OFFER ALTERNATIVES. IF NONE ARE SUITABLE, THANK AND TERMINATE.]

**Appendix J**  
**Parental Informed Consent Forms**





**Script for parental informed consent form to be used for Adolescents**

**Parental Informed Consent**

My name is \_\_\_\_\_ and I work with RTI International, which is conducting the National Survey on Drug Use and Health. The National Survey on Drug Use and Health is a large survey given to about 70,000 people across the country every year. It collects information on many health-related issues. The aim is to better serve all segments of the United States population. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study. We are under contract with the Substance Abuse and Mental Health Services Administration to carry out this survey. [CHILD'S NAME] responded to an advertisement that we placed for research subjects. At present, we are seeking the help of young people like [CHILD'S NAME] to see how our revised materials work. We would like to provide [CHILD'S NAME] with more information about the study, then I would like permission to ask [him/her] to participate. We would interview [CHILD'S NAME] at [INTERVIEW LOCATION] in [LOCATION 1/ LOCATION 2].

The interview will take about 60 minutes. During the interview, [CHILD'S NAME] will be given some materials to read through, shown a short video of an interaction between an interviewer and a potential respondent, and asked some questions about the materials [He/She] will receive a \$40 gift card in appreciation for the interview. In addition, we would like to audiotape the interactions between [CHILD'S NAME] and the interviewer. The audiotape will be heard only by members of the research team to help us make sure we have all the information from [CHILD'S NAME] about how our revised materials work. To protect [his/her] privacy, the audiotape will be transferred to a CD, which will be protected by a password. The password will expire in just a few weeks, and the CD and tape will be destroyed at that time. However, having the interactions audiotaped is voluntary and you can decline for [CHILD'S NAME].

Taking part in the interview is strictly voluntary. [CHILD'S NAME] can skip any portion of the interview [he/she] does not wish to be involved with. There is no penalty if [he/she] chooses to skip any part of the interview. The interview will be conducted in private to ensure nobody else overhears [his/her] answers. All answers will be kept private and confidential. As such, we will not share the information given to us with any person outside the project staff, and [CHILD'S NAME]'s name will never be connected to the answers [he/she] provides. Federal law requires us to keep [CHILD'S NAME]'s answers confidential and to use [his/her] answers only for statistical purposes (the Confidential Information Protection and Statistical Efficiency Act of 2002).

Do we have your permission for [CHILD'S NAME] to participate?

Parent/Guardian permission given to interview:

\_\_\_\_ **Yes**      \_\_\_\_ **No**

Parent/Guardian permission given to audiotape:

\_\_\_\_ **Yes**      \_\_\_\_ **No**

**Date:** \_\_\_\_\_

**Parental Consent for Adolescent to Be Observed During Cognitive Interview**

A representative of the sponsor of this study may be present to observe [CHILD'S NAME]'s interview (in a separate observation room). If you would prefer that the sponsor representative not observe [CHILD'S NAME] during [his/her] interview, [he/she] can still participate, we will simply ask the representative of the sponsor to leave the observation room.

Do we have your permission for the representative of the sponsor to observe [CHILD'S NAME]'s interview?

CHECK ONE OF THE BOXES BELOW. SIGN AND DATE FORM

Sponsor representative may observe [CHILD'S NAME]'s interview

Sponsor representative may not observe [CHILD'S NAME]'s interview.

\_\_\_\_\_  
RTI Staff Member

\_\_\_\_\_  
Date

**Appendix K**  
**Participant Informed Consent Forms**



### Participant Informed Assent (ADOLESCENT)

For the National Survey on Drug Use and Health, we talk to around 70,000 people all over the country. We ask about a lot of health issues, so that we can better help everyone in the United States. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study. RTI is doing this study for the U.S. Public Health Service. You are one of twenty-four participants who will review the materials developed for this national study. You were chosen to participate because you responded to our advertisement and are under 18 years old.

Our talk today will last about an hour. During this talk, I will give you some materials to read through, show you a short video of an interaction between an interviewer and a potential respondent, and ask you some questions about the materials. We would also like to audiotape the interactions between you and the interviewer. Only the people who work on this study will hear the audiotape. It will help us make sure we have understood all the information you give us about how our revised materials work. To make sure your answers stay private, the audiotape will be transferred to a CD, which will be protected by a password. The password will expire in just a few weeks, and the CD and tape will be destroyed at that time. If you don't want us to audiotape you, that's okay.

You can refuse to answer any or all of the questions I have for you today. If you want to take a break at any time, just tell me. Your name will be kept private. No one else will see your answers to any of these questions and no one will know what your answers are. United States law makes us keep your answers private and also makes sure we only use your answers to see how well the revised materials work. The name of this law is the Confidential Information Protection and Statistical Efficiency Act of 2002.

I will give you a copy of this form to keep. When we finish, I will give you a \$40 gift card to thank you for taking time to talk to me.

If you or your parent/guardian have any questions about the study, you can call Stephanie Stolzenberg at 1-866-860-3772. If you or your parent/guardian have any questions about your rights as a participant in this study, you can call RTI's Office of Research Protection at 1-866-214-2043.

RTI Staff Member: \_\_\_\_\_

Date: \_\_\_\_\_

Participant has been asked whether it is okay to audiotape this session. His/her answer is shown below:

\_\_\_\_ Participant will allow this session to be audiotaped.

\_\_\_\_ Participant will NOT allow this session to be audiotaped.

**Participant Assent to Be Observed (ADOLESCENT)**

A person who works with the sponsor of this study is here with us today and would like to watch your interview (in a separate room). We have already talked with your parent or guardian about this, and they have said it is okay to have this person watch the interview. If you don't want this person to watch your interview, you can still do the interview; we will simply ask them to leave the room.

Is it OK for this person to watch your interview?

CHECK ONE OF THE BOXES BELOW. SIGN AND DATE FORM

Sponsor representative may observe the interview.

Sponsor representative may not observe the interview.

\_\_\_\_\_  
RTI Staff Member

\_\_\_\_\_  
Date

**Participant Informed Consent (Parent or Legal Guardian of 12-17 Year Old)**

The purpose of this study is to test some materials that will be used in the National Survey on Drug Use and Health. The National Survey on Drug Use and Health is a large survey given to about 70,000 people across the country every year. It collects information on many health-related issues. The aim is to better serve all segments of the United States population. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study. This research study is being conducted by RTI in collaboration with the U.S. Public Health Service. You are one of twenty-four participants who will review the materials developed for this national study. You were chosen to participate because you responded to our advertisement and told us you are a parent or legal guardian of a 12-17 year old child.

The interview will take about 60 minutes of your time. During this interview, I will give you some materials to read through, show you a short video of an interaction between an interviewer and a potential respondent, and ask you some questions about the materials. You will receive a \$40 gift card in appreciation for the interview. In addition, we would like to audiotape the interactions between you and the interviewer. The audiotape will be heard only by members of the research team to help us make sure we have all the information from you about how our revised materials work. To protect your privacy, the audiotape will be transferred to a CD, which will be protected by a password. The password will expire in just a few weeks, and the CD and tape will be destroyed at that time. However, having the interactions audiotaped is voluntary and you can decline.

Taking part in the interview is strictly voluntary. You can skip any questions you do not wish to answer. There is no penalty if you choose to skip any question or any part of the interview. The interview will be conducted in private to ensure nobody else overhears your answers. All of your answers will be kept private and confidential. As such, we will not share the information you give us with any person outside the project staff, and your name will never be connected to the answers you provide. Federal law requires us to keep your answers confidential and to use your answers only for statistical purposes (the Confidential Information Protection and Statistical Efficiency Act of 2002).

I will give you a copy of this form to keep. If you have any questions about the study, you may call Stephanie Stolzenberg at 1-866-860-3772. If you have any questions about your rights as a research participant in this study, you may contact RTI's Office of Research Protection at 1-866-214-2043.

RTI Staff Member: \_\_\_\_\_

Date: \_\_\_\_\_

Participant has been asked whether it is okay to audiotape this session. His/her answer is shown below:

\_\_\_\_ Participant will allow this session to be audiotaped.

\_\_\_\_ Participant will NOT allow this session to be audiotaped.

**Participant Consent to Be Observed During Cognitive Interview  
(Parent or Legal Guardian of 12-17 Year Old)**

A representative of the sponsor of this study is here with us today and would like to observe your interview (in a separate observation room). If you would prefer that the sponsor representative does not observe you during your interview, you can still participate; we will simply ask the representative of the sponsor to leave the observation room.

Is it OK for this person to watch your interview?

CHECK ONE OF THE BOXES BELOW. SIGN AND DATE FORM

Sponsor representative may observe the interview.

Sponsor representative may not observe the interview.

\_\_\_\_\_  
RTI Staff Member

\_\_\_\_\_  
Date



### Participant Informed Consent (ADULT)

The purpose of this study is to test some materials that will be used in the National Survey on Drug Use and Health. The National Survey on Drug Use and Health is a large survey given to about 70,000 people across the country every year. It collects information on many health-related issues. The aim is to better serve all segments of the United States population. Right now we're interested in changing some of the printed materials like letters and brochures that we use to tell people about the study. Before we do this, we want to see how well people understand these materials and how these changes may affect whether or not people will participate in the study. This research study is being conducted by RTI in collaboration with the U.S. Public Health Service. You are one of twenty-four participants who will review the materials developed for this national study. You were chosen to participate because you responded to our advertisement and told us you have either never used illegal drugs or used illegal drugs sometime in the past 12 months.

The interview will take about 60 minutes of your time. During this interview, I will give you some materials to read through, show you a short video of an interaction between an interviewer and a potential respondent, and ask you some questions about the materials. You will receive a \$40 gift card in appreciation for the interview. In addition, we would like to audiotape the interactions between you and the interviewer. The audiotape will be heard only by members of the research team to help us make sure we have all the information from you about how our revised materials work. To protect your privacy, the audiotape will be transferred to a CD, which will be protected by a password. The password will expire in just a few weeks, and the CD and tape will be destroyed at that time. However, having the interactions audiotaped is voluntary and you can decline.

Taking part in the interview is strictly voluntary. You can skip any questions you do not wish to answer. There is no penalty if you choose to skip any question or any part of the interview. The interview will be conducted in private to ensure nobody else overhears your answers. All of your answers will be kept private and confidential. As such, we will not share the information you give us with any person outside the project staff, and your name will never be connected to the answers you provide. Federal law requires us to keep your answers confidential and to use your answers only for statistical purposes (the Confidential Information Protection and Statistical Efficiency Act of 2002).

I will give you a copy of this form to keep. If you have any questions about the study, you may call Stephanie Stolzenberg at 1-866-860-3772. If you have any questions about your rights as a research participant in this study, you may contact RTI's Office of Research Protection at 1-866-214-2043.

RTI Staff Member: \_\_\_\_\_

Date: \_\_\_\_\_

Participant has been asked whether it is okay to audiotape this session. His/her answer is shown below:

\_\_\_\_ Participant will allow this session to be audiotaped.

\_\_\_\_ Participant will NOT allow this session to be audiotaped.

**Participant Consent to Be Observed During Cognitive Interview (ADULT)**

A representative of the sponsor of this study is here with us today and would like to observe your interview (in a separate observation room). If you would prefer that the sponsor representative does not observe you during your interview, you can still participate; we will simply ask the representative of the sponsor to leave the observation room.

Is it OK for this person to watch your interview?

CHECK ONE OF THE BOXES BELOW. SIGN AND DATE FORM

Sponsor representative may observe the interview.

Sponsor representative may not observe the interview.

\_\_\_\_\_  
RTI Staff Member

\_\_\_\_\_  
Date

**Appendix L**  
**Receipt for Participation**



## Receipt for Participation

The participant has voluntarily taken part in a study to improve the materials used in a national survey on alcohol and drug use, and physical and psychological health. This study is being conducted by RTI International for the U.S. Public Health Service. By my signature below, I confirm that the participant has received a \$40.00 gift card from a member of the project staff in appreciation for his/her participation in this project.

\_\_\_\_\_

\_\_\_\_\_

RTI Staff Signature

\_\_\_\_\_

\_\_\_\_\_

Date

\_\_\_\_\_

