

**ATTACHMENT C: DACCC Privacy Protection Statement**

**DACCC Individual Commitment to Confidentiality**

The Data Coordination and Consolidation Center (DACCC) was established by the Center for Substance Abuse Prevention (CSAP) as a centralized resource for substance abuse prevention data management and analysis. The work performed by the employees and contractors associated with the DACCC often requires that individuals be given access to data that contain confidential information.

The *E-Government Act of 2002* (Public Law 107-347) provides a framework of measures governing how confidential statistical data shall be used. *Section 512 (Limitations on Use and Disclosure of Data and Information)* and *Section 513(Fines and Penalties)* of the Act are reproduced in Appendix A of this agreement.

By signing this agreement, you agree to observe the limitations imposed by section 512 of the E-Government Act of 2002 in relation to all confidential data gathered, used or maintained by the DACCC (the DACCC datasets).

Further, by signing this agreement, you give the following specific assurances with respect to the DACCC datasets:

- You will not use nor permit others to use DACCC data in any way except for public health surveillance and associated aggregate statistical reporting.
- You will not release nor permit others to release any information that identifies persons, directly or indirectly.
- You will not attempt to use nor permit others to use the DACCC data sets to learn the identity of any person included in any set.
- You will not contact nor permit others to contact persons for whom data are included in the data sets to question, verify, or discuss data in the DACCC database.
- You will make no statements nor permit others to make statements indicating or suggesting that interpretations drawn from the data are those of data suppliers.
- You will not release in any public forum any data or estimates from DACCC data sets that have not received prior approval for release by the U.S. Department of Health and Human Services and SAMHSA/CSAP.

*Your signature below indicates that you have carefully read and understood the above statements and you agree to comply with the above-stated requirements. You sign this agreement with the knowledge that deliberately making a false statement in any matter within the jurisdiction of any department or agency of the Federal Government violates 18 U.S.C. 1001 and is punishable by a fine of up to \$10,000 or up to 5 years in prison.*

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date