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Arrestee Drug Abuse Monitoring (ADAM II)

Request for OMB Review

Part A - Justification

Date

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Abt Associates Inc. Contents

Part A: Justification

Abstract

This request is for approval to continue the ADAM II Information Collection for a second, three-year period. The current OMB control # is 3201-0013, which expires March 31, 2010. As with the current collection, in accordance with the current Terms of Clearance, and consistent with the limitations of the study design, ONDCP reporting of survey results will indicate that the survey is a purposive, non-probability sample of sentinel sights that is not representative of the US as a whole or individual states or other areas that were not surveyed.

The Office of National Drug Control Policy's (ONDCP's) mission, since its authorization in 1988, has been to establish the Nation's drug control policy, to set priorities for advancing that policy, and to identify and monitor objective measures of that policy's success. The original Arrestee Drug Abuse Monitoring program (ADAM) was a critical source of data for ONDCP in meeting its objectives, and its demise in 2003 left a serious gap in accurate and timely information on trends in drug use.

The first ADAM data collection was instituted in 2000 as a replacement for the Drug Use Forecasting program (DUF), which employed a non-scientific sampling procedure to select primarily felony arrestees in 23 urban areas throughout the country. The year 2000 revision of ADAM instituted a representative sampling strategy among booked male arrestees in an expanded network of 35 sites. The original OMB approval for this collection authorized 100,000 responses and a time burden of 62,500 hours (OMB control # 1121-0137). That authorization expired in 2005.

With ADAM II, ONDCP and its contractor, Abt Associates, Inc., initiated in 2006 a new data collection that replicates the ADAM methodology in order to obtain data comparable to previously established trends in 10 of the prior ADAM sites. ADAM II implements two quarters of data collection in ten sentinel ADAM sites to revive monitoring drug trends, with a particular focus on obtaining valid and reliable information on methamphetamine use. Representing minimal adjustments to the previously approved ADAM survey, the ADAM II survey will collect data about drug use, drug and alcohol dependency and treatment, and drug market participation among booked male¹ arrestees within 48 hours of arrest. As in the original ADAM program, a "site" in ADAM II is defined as a designated city and its surrounding county, e.g., Cook County, Illinois, which contains the city of Chicago, comprises that ADAM site.

Data collection will take place during two back-to-back quarters in each of 10 counties from a county-based representative sample of 250 male arrestees per quarter for a total of 500 arrestees annually, per site or a total of 5000 arrestees across all 10 sites annually. Collection will occur in two cycles at each site to provide estimates for two calendar quarters each year. To maintain data comparability, the first year of collection, analysis and reporting must begin April 1, 2010 and will end March 31, 2011. If additional data collection periods are optioned by ONDCP, subsequent cycles of back-to-back data collection will occur beginning April 1, 2011. Respondent participation is voluntary and confidential, and the procedures will include a personal interview (lasting approximately 22 minutes) and collection of a urine specimen. Though a convenience sample of

ADAM II will obtain data from male arrestees because the adult male component was the most robust segment of the ADAM study.

female and juvenile arrestees was a part of the previous ADAM program, those groups will be excluded from this effort for the purposes of economy. The minimal increase in Annual Burden of 186 hours from 1667 to 1853 reflects modification in the skip patterns for arrestees who report no recent (past twelve months) drug use (see Part A, Section 15 for detailed discussion).

1. Circumstances That Make Collection of Data Necessary

Objective measures of progress in meeting the Nation's drug strategy goals are an essential part of ONDCP's work. Since its inception ONDCP has worked with federal, state and local agencies to create and improve data on the Nation's drug problems. ONDCP also understands that arrestees can be a unique bellweather of drug use trends as they tend to be the first and the heaviest consumers of illegal drugs.

In 1998 the National Institute of Justice began a multi-city data collection program called Drug Use Forecasting (DUF) designed to monitor trends in drug use among the arrestee population. While a landmark effort, the DUF model was based on a non-probability based, convenience sample of counties, booking facilities within counties and respondents, limiting its utility for estimation. In 2000 NIJ commissioned a redesign of the program and created the Arrestee Drug Abuse Monitoring (ADAM) data collection system which created sampling and data collection protocols that allowed scientifically sound prevalence estimation for 35 counties across the country.

From 2000–2003 the original ADAM program provided a route to estimating drug use and examining drug market behaviors for a range of illegal drugs. In its full 35-county form it became the backbone of the ONDCP estimates of nationwide drug consumption and expenditures published in the National strategy and in the ONDCP publication, *What America Spends on Drugs*. ADAM II's 10 sentinel sites are vital to estimating the magnitude and patterns of chronic drug use in local areas, to understanding its connection to crime, and to examining market trends. In particular, ADAM II has helped the government and researchers determine that methamphetamine use and manufacture no longer appear to be expanding eastward from cities where meth use has been endemic for decades. ADAM II sentinel sites are crucial for understanding local drug use trends as well as for monitoring use of new drugs of abuse. For instance, ADAM II data indicate that there are few arrestees who test positive for oxycodone use, though the drug's presence was detected among arrestees in 8 of the ten sites in 2007 and 2008.

The Office of National Drug Control Policy plans to continue the ADAM II data collection, and has awarded Abt Associates Inc. a contract to maintain ADAM II in the ten sites that have participated in the program since 2006. This critical date collection will continue to provide ONDCP and local law enforcement and treatment officials with data on drug use, drug treatment and mental health information, and drug market participation data for a representative sample of arrestees in the ten sentinel sites: New York City, Chicago, Atlanta, Sacramento, Minneapolis, Denver, Charlotte, Indianapolis, Washington DC, and Portland, OR. As with the current collection due to expire March 31, 2010, in accordance with the current Terms of Clearance, and consistent with the limitations of the study design, ONDCP reporting of survey results will indicate that the survey is a purposive, non-probability sample of sentinel sights that is not representative of the US as a whole or individual states or other areas that were not surveyed.

2. Purposes and Uses of the Data

With ADAM II, ONDCP initiated a new data collection that successfully replicated the original ADAM methodology at the site level. The ADAM II team obtained data directly comparable to previously established trends in each of 10 county areas and established new trend estimates of positive drug tests in each site. ADAM II continued ADAM's collection of data regarding drug use and abuse, drug markets, and treatment needs among booked arrestees. These data for 2007, 2008, and 2009 (forthcoming) have been published in annual reports by ONDCP, and have met the objectives of the 2006 ADAM II initiative to monitor trends in drug use and drug markets by:

- Providing data on the prevalence of drug use in 10 US counties;
- Providing data to monitor the possible spread of methamphetamine use into specific areas; and
- Obtaining consistent data to support statistical trend analysis with 2000–2003 ADAM data in those 10 counties.
- The annual reports are available online from ONDCP:
 http://www.whitehousedrugpolicy.gov/publications/pdf/adam2008.pdf;
 http://www.whitehousedrugpolicy.gov/publications/pdf/adam2007.pdf

3. Use of Improved Information Technology to Reduce Burden

Imposing the least burden on ADAM II respondents and security personnel in jail facilities continues to be a significant priority to the study team.² Various electronic data capture strategies were considered when ONDCP developed the ADAM II program, but ultimately the study team settled on continuing to collect this information using paper questionnaire forms, because,

- Paper copies are a more stable medium for confinement facilities where lack of power or Internet connectivity can translate technical problems into lost time and data.
- Paper is a better medium for interacting with respondents who must review their previous calendar responses to recall information in context.
- Technology can impede access to jail populations and create unnecessary tension for security personnel.
 - Even in criminal justice settings where evaluators have agreements to bring technology in, changing circumstances can often result in delays and missed interview shifts. Many booking facilities will not permit electronic equipment to be brought into their holding areas. Many facilities will see laptops, even the smaller notebooks, as intrusive or as security risks.
 - As noted above, there are also issues with accessing power for electronic equipment; that is, no electrical outlets. While interviewers can, and would, carry extra batteries, this approach raises other issues. For example, batteries may be removed from computers both on entering and leaving facilities to insure that no contraband enters or leaves the premises, and power and/or data can be lost with battery removal.

The study team refers to ONDCP and its subcontractor, Abt Associates, Inc. and Abt's wholly-owned subsidiary, Abt SRBI. Abt SRBI manages survey field operations and data preparation.

Electronic equipment may be perceived differently by respondents and impact their
answers. Given the complexity and size of the ADAM instrument, existing PDAs
might complicate data collection because the screens are too small to readily
encompass the calendar that is central to all ADAM data collection. Further, PDAs
are somewhat more fragile and more susceptible to data loss or damage as they are
jostled through security procedures and screening devices.

Data for ADAM and ADAM II have always been collected with paper-and-pencil instruments; ADAM II will continue this methodology to maintain comparability with data from the earlier collections. However, the ADAM II study team of Abt Associates Inc. and Abt's wholly owned subsidiary, Abt SRBI, has worked to improve the data collection, data entry, and data cleaning process to ensure data are dealt with in the most efficient manner. Some improvements made in ADAM II that will be continued for ADAM II include the use of character recognition software to scan the calendar portion of the interview instrument, scannable barcoded labels to allow interviewers to maintain confidentiality while easily matching interview data with urinalysis samples.

4. Efforts to Identify and Avoid Duplication

The Office of National Drug Control Policy have submitted 60-day and 30-day Federal Register notices to solicit public comment on the proposed information collection.

Like the ADAM and ADAM II projects, ADAM II is the only data collection effort that supports statistical trend analysis of drug use in this population at each site. From 2000–2003 and 2006-2009 the ADAM system provided a unique route to estimating chronic drug use and examining market behaviors by capturing information on a critical segment of the user population—those users, often the most drug-involved, who interact with the criminal justice system. Many of the drug users identified at the time of booking are not found in the Nation's other drug use monitoring efforts. Since they are often living in transient housing arrangements, they are not in the National Survey on Drug Use and Health. Many do not access treatment and, consequently, are not in the Substance Abuse and Mental Health Administration's Treatment Episode Data Set. *Interviewing this population represents an important, complementary, not duplicative, effort.*

ADAM has also been the only large scale, multi-site drug study that utilized drug testing (urinalysis). ADAM II has replicated this methodology at the county level to monitor drug trends and provide information on drug use and abuse, drug markets, and treatment needs among booked arrestees missing in these other studies. ADAM II will continue to replicate this data collection and maintain drug use trends for the ten sentinel sites.

Efforts to Minimize Burden on Small Businesses or Other Entities

No small businesses or other entities will be involved as respondents. Respondents are booked male arrestees in police departments and/or county jails.

6. Consequences If the Information Is Not Collected or Is Collected Less Frequently

The Office of National Drug Control Policy has a need for the continued results of the ADAM series study in order to make informed decisions about policies, priorities, and objectives for the Nation's drug control program. ADAM series data are the only information collected on a large scale that adequately access the heaviest, most problematic users in the areas targeted. Without data on chronic drug use and market behaviors, policymakers are not equipped to design policies and programs to reduce illicit drug use, manufacturing, trafficking, crime, violence, and drug-related health consequences. For example, in 2006 ONDCP had a pressing need to monitor methamphetamine use in these sentinel areas; ADAM series data were particularly relevant to this task, where little was known about the nature of the methamphetamine market and what may impact shifts in use.³ In fact, ADAM II data from 2007 and 2008 indicate that methamphetamine continues to be a problem drug in several cities, especially Sacramento and Portland, but that the market for the drug is more highly localized than anticipated. The growth of methamphetamine use eastward appears to have slowed or stopped, and the little methamphetamine use has not been detected in ADAM II cities on the east coast. ADAM series data are crucial indicators of drug use trends, both in terms of detection of new use patterns and in identifying declining use throughout the drug markets of the Nation.

7. Special Circumstances Requiring Collection of Information in a Manner Inconsistent with Section 1320.5(d)(2) of the Code of Federal Regulations

None of the special circumstances listed apply to this data collection.

8. Public Comment Received on Federal Register Notice

No public comments were received by ONDCP during the 60-day public comment period. Public comment to OMB during the 30-day period is pending. The 30-day public comment period to OMB concludes February 2, 2010.

9. Incentives to Respondents

As in the original ADAM study, a small food incentive such as a candy bar, potato chips, and/or water is provided to respondents either during or subsequent to the interview (depending on site regulations).

Hunt, D., Kuck, S. and Truitt, L. (2006). *Methamphetamine: Lessons Learned*, U.S. Department of Justice, NIJ Report, 20973, February.

10. Assurances of Confidentiality Provided to Respondents

At each site,⁴ interviewers trained by Abt Associates and Abt SRBI collect voluntary and confidential interviews and urine specimens from booked adult male arrestees. Names and other personal identifiers are not collected. To preserve anonymity, a common ID number (barcode) is attached to the facesheet interview form and urine specimen container so that self-reported data may be connected to urinalysis results.

Abt Associates frequently collects sensitive data from vulnerable populations and is familiar with the necessary protections that accompany this type of data collection, particularly with populations who may be involved in illegal behaviors. To protect respondents who share their personal information, Abt obtained a National Institute of Health Certificate of Confidentiality to protect all data collected by Abt Associates and its subcontractors from subpoena for ADAM II. This Certificate remains in effect until 2011, although the study team will seek a new Certificate for the ADAM II contract. Abt Associates currently holds Certificates of Confidentiality for several studies, including studies involving children, offenders, and persons undergoing sensitive treatment protocols, and is familiar with the process. The certificate contains language that reinforces the protections of confidentiality to each arrestee and the absence of identifying information on all sample and survey data collection tools. Before each interview, the ADAM II interviewers will inform research participants of the Certificate of Confidentiality and the protection that the certificate provides.

As in the original ADAM work, the Abt Associates IRB has reviewed and approved the ADAM II and is currently reviewing the same protocols for ADAM II data collection. Abt Associates has a standing Institutional Review Board, which holds a Federal Wide Assurance (FWA) from the Office for Human Research Protections (OHRP) and we anticipate approval by January 12. Abt Associates is firmly committed to protecting all human subjects involved in its research, and each Project Director or Principal Investigator at Abt is required to complete Human Subjects training. Training programs for all interviewers also include a discussion of human subjects issues, and all interviewers read and sign a Certificate of Confidentiality for submission to the ADAM II Data Center.

Prior to each interview, interviewers read the consent and confidentiality information contained on the consent sheet and ask the respondent if he wishes to participate in the interview and if he is willing to provide a urine sample (see attached Face Sheet that contains the consent script). All arrestees who provide data for this study are assured, in writing, that the information they provide will not be released in a form that is identifiable. No identifying information is attached to any data supplied to the Office of National Drug Control Policy, law enforcement, other researchers, or any other person or agency.

Unless an arrestee voluntarily agrees to participate, the interview cannot be done. Each study subject must voluntarily agree (with a verbal affirmative) to participate prior to administering the ADAM questionnaire. The back of the ADAM II face sheet provides a consent script to be read to potential respondents. This script has been approved by Abt's IRB for reading to study subjects. It includes two separate consent agreements: one for the interview and one for providing a urine specimen. The subject may agree to the interview and not agree to provide a specimen and still be included in the sample. If the subject consents, the interview is completed. If the subject is unwilling, the reason for

Again, an ADAM II "site," as in ADAM II, comprises the sample of facilities (or single intake facility) that represent the targeted county. We will use the term "site" to refer to these county areas.

refusal will be recorded, the subject is returned to the holding area and all materials (interview form, facesheet and lab supplies) stored. A respondent may participate in the interview and choose not to provide a sample.

Individual-level databases and computer files are protected by restricted use passwords or other techniques to limit access to staff involved in data analysis. All laptops and other equipment that store ADAM series data are encrypted to protect the confidentiality of the data contained on them. No data are ever reported by the contractor in any form where individual respondents can be identified.

11. Justification for Questions of a Sensitive Nature

The intent of the ADAM series is to support the Office of National Drug Control Policy's efforts to estimate trends in drug use and examine drug market behaviors in the 10 targeted counties. Because drug use and illegal activities are potentially sensitive subjects, some questions will be sensitive for the respondents. Arrestees are asked about drug use, drug and alcohol dependency and treatment, and drug market participation. Subjects may skip questions at any time or terminate the interview. Since the initiation of the redesigned ADAM instrument in 2000 of which this instrument is a minor adaptation, over 100,000 arrestees have been interviewed successfully.

12. Estimate of Information Collection Burden

Exhibit 1: Estimated Respondent Burden								
Data Collection Activity	Number of Respondents per Data Collection per Site per Quarter	Number of Sites	Number of Data Collections	Time per Response (minutes)	Total Hour Burden			
Arrestee Drug Abuse Monitoring (ADAM) II Survey Base+ Option 1	250	10	2	22.23	1853			
ADAM II Option 2	250	10	2	22.23	1853			
ADAM II Option 3	250	10	2	22.23	1853			
Total request (all sites; all quarters)	15,000				5559			

13. Estimate of Total Annual Cost Burden

There are no respondent costs associated with this data collection other than the hour burden estimated in item 12.

14. Annualized Costs

The annualized cost for the Arrestee Drug Abuse Monitoring (ADAM) Program II is \$1,754,862. The total amount includes the costs of data collection, analysis and reporting; reviewing the study protocol; site selection and recruiting; urine specimen analysis, and survey materials. The annual cost

for the data collection minus the one-time costs of study protocol review and site selection and recruitment is \$1,653,540.

15. Change in Annual Reporting Burden

This request is for a continuation of the ADAM II Information Collection, OMB control # 3201-0013. The increase in Annual Burden from 1667 to 1853 reflects modification in the skip patterns for arrestees who report no recent (past twelve month) drug use. In the original design of the ADAM instrument, the National Institute of Justice was concerned about administering a lengthy interview to arrestees, and decided to exclude arrestees who report no recent illicit drug use from the longer calendar section. This decision was designed to make the ADAM interview (about 20 minutes) as short as feasible and more similar to the older DUF interview (about 10 minutes). However, this has always introduced two problems: loss of important data on all arrestees (housing stability, arrests, incarcerations, drug and psychiatric treatment over the prior year) and confusion in analysis by local users as to whom they were referring (all arrestees or all arrestees admitting use in the prior 12 months). In addition, the skip often produces errors and hesitations in the interview process as the interviewer pauses to check the validity of the skip.

In ADAM II the removal of this skip will improve data processing procedures, increase the utility and usability of the data by analysts of all programming skill levels, and will result in a more streamlined personal interview. We anticipate this change will add approximately 2 minutes per calendar line completed for those arrestees who report no drug use in the past 12 months (40% of the total ADAM II sample). On average, we estimate that arrestees who report no recent drug use will be required to complete 3 additional calendar lines, which will result in an overall burden increase of 2.23 minutes per interviewed arrestee (186 annual hours.)

16. Plans for Analysis and Publication of Results

Abt Associates will prepare ADAM II study findings for dissemination to a wide range of audiences, including ONDCP, the study sites, drug researchers, practitioners, policy makers, and the interested lay audience. The ADAM II report series, available on the ONDCP website, ⁵ give annualized estimates of drug use in each sentinel site, provides an analysis of trends in drug use and self-reported information on treatment, arrest, housing, demographic, and drug market activity. Detailed information on the statistical estimation and response bias are provided in appendices. A more indepth annual report on the statistical methodology that is used to estimate results is provided with the data through ICPSR, where all ADAM II data are archived in the National Archive of Criminal Justice Data.

As described in detail in Part B, 2 (Analysis Plan: Weighting, Estimation and Analysis of Trends) the ADAM II analysis procedure includes model based estimators to determine sampling probabilities and weight cases appropriately. An important goal of this project has been to determine the significance of trends in drug use, particularly methamphetamine use, over time (from 2000 forward).

http://www.whitehousedrugpolicy.gov/publications/pdf/adam2008.pdf; http://www.whitehousedrugpolicy.gov/publications/pdf/adam2007.pdf

The procedure described in Part B, 2 describes the use of propensity scores in estimating yearly prevalence of use in each site's arrestee population. This regression based approach also allows us to control for both seasonality and any changes in police practices that may influence the distribution of arrests over time; that is, the estimates of drug use for each year are conditioned on these explanatory variables in each site.

The analysis plan also includes tabulations of the interview data summarized on quarterly fact sheets reflecting the proportion of arrestees in each site testing positive for each drug (see attached example) by age and ethnicity, with the appropriate confidence intervals for each estimate. These summary analyses are straightforward frequencies and cross tabulations of the weighted data for each site. They include summaries of such variables as total bookings during the annual data collection period, population characteristics and site-specific response rates. In addition, analysis can include such things as cross tabulation of drug positive respondents (by specific drug) with each offense category (violent crime, property crime, domestic violence, etc.), or with need for treatment (dependency screener); descriptions of aspects of the drug markets for each drug; recent (12 month) and lifetime treatment and arrest history; 12-month residential stability; employment status and insurance coverage. These fact sheets are provided to site level stakeholders within

Unlike the prior ADAM reporting, in ADAM II the analysis includes trend estimates of the significance of trends in drug use (by drug) from year to year. These estimates are developed for each site for each drug and displayed in a trend table in the annual data sheets for easy reference. How these estimates are developed to reflect 2000-2007 is discussed in Part B.

17. OMB Expiration Date

All data collection instruments will include the OMB expiration date.

18. Exceptions to Certification Statement

No exceptions are requested.