

DATE: September 8, 2010
TO: OMB Desk Officer
FROM: SAMHSA Clearance Officer
SUBJECT: Additional Burden for 2011 National Survey on Drug Use and Health

The 2010 - 2011 National Surveys on Drug Use and Health (NSDUH) (OMB No. 0930-0110) were approved on September 4, 2009. This approval expires on January 31, 2012. As part of the 2010 NSDUH, 500 respondents will complete a Mental Health Surveillance Study (MHSS) interview. These respondents represented a sub-sample of the NSDUH respondents and were selected using the K-6 and the WHODAS impairment scale. Interviews were completed over the telephone by mental health clinicians using the Structured Clinical Interview for DSM-IV (SCID).

Through the use of American Recovery and Reinvestment Act of 2009 (Recovery Act) funds, the National Institute of Mental Health (NIMH) has funded activities that will expand the MHSS sample and analytic capabilities. This expansion will allow for the production of analytic and methodological reports on a variety of topics that would otherwise not be possible with the smaller sample. At this time, SAMHSA is requesting an amendment to the current clearance to increase the MHSS sample by an additional 1,000 SCID interviews -- bringing the total number to 1,500 interviews in 2011.

With this increased SCID sample, SAMHSA will be able to refine the predictive models used to produce the serious mental illness (SMI) and any mental illness (AMI) estimates. A methodological analysis may be conducted using the data from the MHSS and extended mental health surveillance sample (EMHSS) to validate these estimates. For example, combined MHSS and EMHSS data could be used to compare statistical models used for the estimation of SMI in order to validate current SMI estimates. Data from the MHSS and EMHSS also will be used to refine methods used to **more** precisely estimate the proportion of the population with SMI. Furthermore, the collection of MHSS and EMHSS data over time will allow for the examination of trends in estimates of SMI in order to determine whether true variations in SMI exist over multiple time points.

The EMHSS will also provide sufficient sample sizes to allow for the development of direct estimates of specific DSM-IV disorders such as Anxiety Disorder, Depression, and other mood disorders. In order to produce reliable disorder-specific estimates, both the MHSS and EMHSS are needed to provide a sufficient sample size. Since these disorders affect only a small portion of the population, this analysis will also require the use of combined years of data collected from the 2008 to 2011 SCID interviews. Once the disorder-specific estimates have been produced, they will be compared to existing estimates of specific disorders from other national surveys,

such as the National Comorbidity Survey Replication (NCS-R) and the National Epidemiological Survey on Alcohol and Related Conditions (NESARC).

Recognizing the NSDUH as one of the primary sources of estimates of mental health in the U.S., NIMH provided the funding for the sample increase and is collaborating with SAMHSA on a number of analyses based on these data. These analyses will continue and expand once data collection is complete and initial results are examined.

The original burden table covering the 2010 NSDUH including the 500 interviews for the MHSS (for which OMB approval has been received) is below. The second table below summarizes the revised 2011 NSDUH burden including the additional 1,000 SCID interviews, for a total of 1,500 MHSS interviews. The only differences are in the rows for the Clinical Follow-up Certification and Clinical Follow-up Interview.

No changes have been made to the NSDUH survey or the SCID instruments or data collection protocol (as described in the Supporting Statement that received final OMB approval on September 4, 2009).

Estimated Burden for 2010 NSDUH

<i>Instrument</i>	<i>No. of Respondents</i>	<i>Responses per respondent</i>	<i>Hours per response</i>	<i>Total burden hours</i>	<i>Hourly Wage rate</i>	<i>Total costs</i>
Household Screening	190,800	1	0.083	15,836	\$14.64	\$231,839
Interview	67,500	1	1.000	67,500	\$14.64	\$988,200
Clinical Follow-up Certification	24	1	1.000	24	\$14.64	\$351
Clinical Follow-up Interview	500	1	1.000	500	\$14.64	\$7,320
Screening Verification	5,400	1	0.067	362	\$14.64	\$ 5,300
Interview Verification	10,125	1	0.067	678	\$14.64	\$9,926
TOTAL:	190,824			84,900		\$ 1,242,936

Estimated Burden for 2011 NSDUH

<i>Instrument</i>	<i>No. of Respondents</i>	<i>Responses per respondent</i>	<i>Hours per response</i>	<i>Total burden hours</i>	<i>Hourly Wage rate</i>	<i>Total costs</i>
Household Screening	190,800	1	0.083	15,836	\$14.64	\$231,839
Interview	67,500	1	1.000	67,500	\$14.64	\$988,200
Clinical Follow-up Certification	90	1	1.000	90	\$14.64	\$1,318
Clinical Follow-up Interview	1,500	1	1.000	1,500	\$14.64	\$21,960
Screening Verification	5,400	1	0.067	362	\$14.64	\$5,300
Interview Verification	10,125	1	0.067	678	\$14.64	\$9,926
TOTAL:	190,890			85,966		\$1,258,542