

Assessment of the Underage Drinking Prevention Education Initiatives State/Territory Videos Project

Supporting Statement

A. Justification

A.1 CIRCUMSTANCES OF INFORMATION COLLECTION

The Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Prevention (SAMHSA/CSAP) is requesting Office of Management and Budget (OMB) approval of three new data collection instruments—

- State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1);
- State/Territory Videos Project – Dissemination Update Form (see Attachment 2); and
- Video Viewers Feedback Form (see Attachment 3).

This new information collection is for a process assessment of the Underage Drinking Prevention Education Initiatives State/Territory Videos project.

This initiative focuses on underage drinking, which is a significant problem across the country:

- In 2009, slightly more than half (51.9 percent) of Americans aged 12 or older reported being current drinkers of alcohol. This percentage translates into 130.6 million people, which is similar to the 2008 estimate of 129.0 million people (51.6 percent) (National Survey on Drug Use and Health [NSDUH], 2010).
- In 2009, rates of current alcohol use were 3.5 percent among persons aged 12–13, 13.0 percent of persons aged 14–15, 26.3 percent of persons aged 16–17, 49.7 percent of persons aged 18–20, and 70.2 percent of persons aged 21–25. These estimates are similar to rates reported in 2008 (NSDUH, 2010).
- The rate of current alcohol use among youths aged 12–17 was 14.7 percent in 2009, which is similar to the 2008 rate of 14.6 percent. Youth binge and heavy drinking rates in 2009 (8.8 and 2.1 percent, respectively) were also similar to rates in 2008 (8.8 and 2.0 percent, respectively) (NSDUH, 2010).
- In 2009, over 40 percent (41.8 percent) of 9th- to 12th-grade students nationwide reported current alcohol use. Prevalence rates were similar across State and local surveys. Rates ranged from 18.2 to 47.5 percent across State surveys with a median of 39.3 percent. Rates ranged from 23.6 to 44.2 percent across local surveys with a median of 36.4 percent (Youth Risk Behavior Surveillance, 2010).

In 2007, the Surgeon General issued a *Call to Action To Prevent and Reduce Underage Drinking* to highlight the nature and extent of underage drinking. The *Call to Action* focused the attention of the public on this enduring problem and on research indicating that the developing adolescent brain may be particularly susceptible to long-term consequences from alcohol use (U.S.

Department of Health and Human Services [HHS], 2007). Research shows that alcohol consumption has the potential to trigger long-term biological changes that may have detrimental effects on the developing adolescent brain, including neurocognitive impairment (HHS, 2007).

Following the Surgeon General's *Call to Action*, SAMHSA/CSAP conducted a pilot with four States to produce videos highlighting the underage drinking prevention efforts of the States (see Attachment 4, Report on Underage Drinking Prevention Videos: A Four-State Pilot Project). Based upon the success of those videos in showcasing the States' underage drinking prevention activities, 10 additional States and 1 Territory were provided funds to produce underage drinking prevention videos in 2009. The State/Territory points of contact commented that they had positive experiences in developing and disseminating these videos. From 2010 through 2013, SAMHSA/CSAP will invite approximately 45 additional States/Territories to produce their own underage drinking prevention video.

Over the next 4 years (2011-2014), SAMHSA/CSAP plans to conduct a process assessment of the State/Territory Videos project. There are three phases to the assessment—

The first phase involves the point of contact for each State/Territory. After the underage drinking prevention video is finalized, the State/Territory point of contact will be asked to submit feedback online through the State/Territory Videos Project – Point of Contact Feedback Form. The feedback form collects information on the State's/Territory's experience in producing the underage drinking prevention video, the dissemination efforts of the video, and technical assistance received from the video production team. This phase will only include those videos produced from 2010 through 2013 (total of 45).

The second phase will occur 6 months after the feedback form is completed. The State/Territory point of contact will be sent an email asking him/her to update the dissemination efforts of the State/Territory video using the Web-based State/Territory Videos Project – Dissemination Update Form. The contact will be asked to provide an update on the dissemination efforts every 6 months. This phase will include all videos produced since 2007 (total of 60).

The third phase involves persons that viewed the State's/Territory's video. The purpose of this phase is to gather feedback about a person's views of underage drinking as a public health issue prior to and after watching the State/Territory videos. To the extent possible, web-based systems will be the preferred modality for collecting, processing, and analyzing all satisfaction data (i.e. common and provider-specific). However, the decision whether to or not to use web-based systems for collecting these data will be based on a number of factors such as respondent accessibility and venue. Nevertheless, SAMHSA/CSAP will ensure that all data collection efforts are readily accessible to employees, government personnel, and members of the public with disabilities. Lastly, understanding that all data collection will be voluntary, participants who do not wish to provide information via a web-based system will be provided, to the extent possible, with alternative participation options (e.g., telephone interview or paper-based questionnaires) to ensure high response rates. This phase will include all videos produced since 2007 (total of 60).

CSAP is responsible for improving the accessibility to and the quality of substance abuse prevention services. It provides national leadership in the development of policies, programs, and services to prevent the onset of illegal drug use, as well as underage alcohol and tobacco use, and to reduce the negative consequences of using these substances. Under Section 515(b) of the Public Health Service Act (42 USC 290bb-21), CSAP is directed to develop effective alcohol abuse prevention literature and to ensure the widespread dissemination of prevention materials among States, political subdivisions, and school systems. This information collection is being implemented under authority of Section 501(d)(4) of the Public Health Service Act (42 USC 290aa).

A.2 PURPOSE AND USE OF INFORMATION

SAMHSA/CSAP intends to support the production of the State/Territory underage drinking prevention videos annually. The information collected will be used by SAMHSA/CSAP to 1) ascertain whether the videos produced under the State/Territory Videos project are assisting States and Territories in communicating effectively about their underage drinking prevention initiatives, goals, and objectives; 2) document the dissemination efforts of the videos; and 3) enhance the technical assistance that is provided by the video production team in producing the videos.

Additionally, the information collected will support performance measurement for SAMHSA programs under the Government Performance Results Act. Data specifically related to technical assistance and information dissemination will be collected and submitted for the Science and Service budget line item of the Congressional Justification report. The tables below provide a crosswalk of the questions on the instruments to the measures in which the Science and Service contracts are being asked to gather and report collectively.

State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1)

Measure: Technical Assistance	
Number of persons provided technical assistance services	Count is based on the number of State/Territory videos produced.
Percentage of technical assistance recipients who reported that they are very satisfied with the technical assistance received	q20-Overall, how satisfied are you with the TA your State/Territory received [from the video production team]? <i>Response options: Very satisfied, Somewhat satisfied, Somewhat dissatisfied, Very dissatisfied</i>
Percentage of technical assistance recipients who reported that their ability to provide effective prevention services improved a great deal as a result of the services they received	q21-To what extent has the TA you received [from the video production team] improved your State's/Territory's capacity to provide effective (underage drinking) prevention services? <i>Response options: A great deal, Somewhat, Not very much, Not at all, Not applicable</i>
Percentage of technical assistance recipients who reported that the technical assistance recommendations have been fully implemented	q22-To what extent have the TA recommendations your State/Territory received most recently [from the video

	<p>production team] been fully implemented?</p> <p><i>Response options: Fully, Partially, Not yet begun</i></p>
Measure: Information Dissemination	
Number of persons receiving prevention information directly	<p>q3-Has the video been disseminated?</p> <p><i>Response options: Yes, No</i></p> <p>If yes → Please indicate how the video was disseminated from the categories listed below and provide dissemination numbers (e.g., # of views/downloads, viewers or copies distributed) for each category utilized.</p> <p><i>Response options: Town hall meeting/public forum presentations - # of viewers/session attendees; Conference presentations - # of viewers/ session attendees; Other (Please specify) & #</i></p>
Number of persons receiving prevention information indirectly from advertising, broadcast, or website	<p>q3-Has the video been disseminated?</p> <p><i>Response options: Yes, No</i></p> <p>If yes → Please indicate how the video was disseminated from the categories listed below and provide dissemination numbers (e.g., # of views/downloads, viewers or copies distributed) for each category utilized.</p> <p><i>Response options: Website (agency) - # of views (or downloads); Website (partner) - # of views (or downloads); YouTube - # of views, Other social media (Please specify) & # of views (or downloads); Distributed to partner community organizations/coalitions - # copies distributed; Mailed DVDs (excluding those mentioned above) - # copies distributed; TV (including cable & local public access) - # times broadcast & viewership #; Other (Please specify) & #</i></p>

State/Territory Videos Project – Dissemination Update Form (see Attachment 2)

Measure: Technical Assistance	
Number of persons provided technical assistance services	<p>q9-In the past 6 months, did your State/Territory receive technical assistance (TA) from the video production team?</p> <p><i>Response options: Yes, No</i></p>
Percentage of technical assistance recipients who reported that they are very satisfied with the technical assistance received	<p>q11-Overall, how satisfied are you with the TA your State/Territory received [from the video production team]?</p> <p><i>Response options: Very satisfied, Somewhat satisfied, Somewhat dissatisfied, Very dissatisfied</i></p>

Measure: Technical Assistance, continued	
Percentage of technical assistance recipients who reported that their ability to provide effective prevention services improved a great deal as a result of the services they received	<p>q12-To what extent has the TA you have received [from the video production team] improved your State's/Territory's capacity to provide effective (underage drinking) prevention services?</p> <p><i>Response options: A great deal, Somewhat, Not very much, Not at all, Not applicable</i></p>
Percentage of technical assistance recipients who reported that the technical assistance recommendations have been fully implemented	<p>q13-To what extent have the TA recommendations your State/Territory received most recently [from the video production team] been fully implemented?</p> <p><i>Response options: Fully, Partially, Not yet begun</i></p>
Measure: Information Dissemination	
Number of persons receiving prevention information directly	<p>q1-Please indicate the total dissemination efforts of your State's/Territory's video in each applicable category for the past 6 months:</p> <p><i>Response options: Town hall meeting/public forum presentations - # of viewers/session attendees; Conference presentations - # of viewers/session attendees; Other (Please specify) & #</i></p>
Number of persons receiving prevention information indirectly from advertising, broadcast, or website	<p>q1-Please indicate the total dissemination efforts of your State's/Territory's video in each applicable category for the past 6 months:</p> <p><i>Response options: Website (agency) - # of views (or downloads); Website (partner) - # of views (or downloads); YouTube - # of views; Other social media (Please specify) & # of views (or downloads); Distributed to partner community organizations/coalitions - # copies distributed; Mailed DVDs (excluding those mentioned above) - # copies distributed; TV (including cable & local public access) - # times broadcast & viewership #; Other (Please specify) & #</i></p>

Video Viewers Feedback Form (see Attachment 3)

Measure: Information Dissemination	
Demographics of number served/reached (<i>estimates for numbers served and demographics if actual counts are not available</i>)	<p>What is your gender?</p> <p><i>Response options: Male, Female</i></p> <p>How old are you? (Select the most appropriate category.)</p> <p><i>Response options: under 12 years old, 12 to 14 years old, 15 to 17 years old, 18 to 20 years old,</i></p>

	<i>21 to 24 years old, 25 to 44 years old, 45 to 64 years old, 65 years old or older</i>
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Measure: Information Dissemination, continued	
Demographics of number served/reached (<i>estimates for numbers served and demographics if actual counts are not available</i>)	<p>What is your ethnicity? <i>Response options: Hispanic or Latino, Not Hispanic or Latino</i></p> <p>What is your race? (Mark one or more race.) <i>Response options: American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, White</i></p>

The State/Territory Videos Project – Point of Contact Feedback Form includes 25 items, among which are included the following:

- Objectives of the video;
- Targeted audiences of the video;
- Dissemination efforts of the video;
- Point of contact perceptions of the State/Territory video product;
- Usefulness of the preplanning materials and activities; and
- Assessment of the technical assistance received.

The State/Territory Videos Project – Dissemination Update Form includes 14 items, among which are included the following:

- Dissemination efforts of the video in the past 6 months;
- Feedback received on the video in the past 6 months;
- Unintended outcomes from the video in the past 6 months; and
- Assessment of technical assistance received in the past 6 months.

The Video Viewers Feedback Form includes 10 items, among which are included the following:

- Indication of which video was watched;
- Indication of level of concern with underage drinking as a public health issue;
- Indication of becoming involved in underage drinking prevention efforts; and
- Demographics of the viewers.

SAMHSA/CSAP will be responsible for collecting, compiling, analyzing, and reporting on the information requested through these data collection instruments.

A.3 USE OF INFORMATION TECHNOLOGY

Automated technology will be used to collect data in all three phases. Information will be gathered through Web-based forms that are completed by the State/Territory points of contact (see State/Territory Videos Project – Point of Contact Feedback Form, Attachment 1 and State/Territory Videos Project – Dissemination Update Form, Attachment 2) and viewers of the State/Territory videos (see Video Viewers Feedback Form, Attachment 3). There are several reasons for using this data collection approach:

- The efficiency of tracking adherence to the data submission requirement;
- The limited amount of information to be collected;
- For consistency in the data collection mode between phases; and
- The use of a method to collect information that is similar to how the product was provided.

The Web-based application will comply with the requirements of Section 508 of the Rehabilitation Act to permit accessibility to people with disabilities.

A.4 EFFORTS TO IDENTIFY DUPLICATION

The information is collected only for this initiative and is not available elsewhere.

A.5 INVOLVEMENT OF SMALL ENTITIES

No small businesses will be involved, but some States/Territories may be considered small entities. No matter the size of the States/Territories, all points of contact will be asked to participate in the feedback and/or dissemination update phases of the assessment (Phases I and II, respectively). The phase that may be the most burdensome for the States/Territories is the dissemination update phase. In this phase, State/Territory points of contact are asked to update the dissemination efforts of the video every 6 months. The form used for the update is the State/Territory Videos Project – Dissemination Update Form (see Attachment 2). This Web-based form contains 14 questions with automatic skips programmed. It is estimated that it will take the points of contact approximately 10 minutes to complete the form.

A.6 CONSEQUENCES IF INFORMATION IS COLLECTED LESS FREQUENTLY

The State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1) will be completed only once. Updated dissemination information will be collected every 6 months, using the State/Territory Videos Project – Dissemination Update Form (see Attachment 2).

A.7 CONSISTENCY WITH THE GUIDELINES IN 5 CFR 1320.5(d) (2)

The information collection fully complies with 5 CFR 1320.5(d) (2).

A.8 CONSULTATION OUTSIDE THE AGENCY

The 60-day *Federal Registry Notice* was published on 05/04/2011 (Vol. 76, No. 86, pg. 25359-25361). No comments were received in response to the notice.

Consultations were conducted with individuals in several organizations who have agreed to participate in the State/Territory Videos project. These consultations focused on the burden of completing the State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1) and the State/Territory Videos Project – Dissemination Update Form (see Attachment 2) and on how the participating States/Territories might use the findings, should SAMHSA/CSAP decide to share those findings with them. Consultations were held with the following individuals:

Debbie Synhorst
Prevention Consultant
Iowa Dept. of Public Health
321 East 12th Street
Lucas State Office Building
Des Moines, IA 50319-0075
Phone: (515) 281-4404

Christine D. Camacho
Public Information Officer
Dept. of Mental Health and Substance Abuse
790 Governor Carlos G. Camacho Road
Tamuning, GU 96913
Phone: (671) 477-2301

Craig L. PoVey, L.C.S.W.
Program Administrator
Utah Dept. of Human Services
Div. of Substance Abuse and Mental Health
195 North 1950 West
Salt Lake City, UT 84116
Phone: (801) 538-4354

Consultations were also conducted with three local community members to determine the clarity and burden of the process to complete the Video Viewers Feedback Form (see Attachment 3).

A.9 PAYMENT TO RESPONDENTS

Pending the availability of funds, SAMHSA/CSAP will support the production of the State/Territory underage drinking prevention videos. In exchange for the SAMHSA/CSAP's support of the videos, State/Territory points of contact will participate in the feedback and dissemination update phases of the assessment (Phases I and II, respectively). State/Territory points of contacts and viewers of the videos will not receive an incentive or payment from SAMHSA/CSAP to complete the data collection instruments.

A.10 ASSURANCE OF CONFIDENTIALITY

For the State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1), data will not be associated with individual names but rather with State/Territory video through a coded link. Additionally, the IP address used to complete the feedback form is captured and is associated with the coded link. The coded link is used to track whether a State/Territory point of contact has responded to the request for feedback. Once **Done** is clicked, the data will be stripped of its association to the coded link and the IP address used to complete the form. An ID code will be assigned to the data and will be used as a running tally of the number of forms received.

For the State/Territory Videos Project – Dissemination Update Form (see Attachment 2), data will not be associated with individual names but rather with the State/Territory video through a coded link. Additionally, the IP address used to complete the form is captured and is associated with the coded link. The coded link is used to track whether a State/Territory point of contact has responded to the request to complete the form. Once **Done** is clicked, the data will be stripped of its association to the coded link and the IP address used to complete the form. An ID code will be assigned to the data and will be used as a running tally of the number of forms received.

For the Video Viewers Feedback Form (see Attachment 3), the IP address used to complete the form is captured by the host site of the form; however, it is not linked to the feedback form responses and is therefore considered to be anonymous. Each form will be assigned an ID code that will be used as a running tally of the number of forms received.

All data will be reported in aggregate. On December 10, 2010, the Institutional Review Board (IRB) of ICF Macro determined that the State/Territory points of contacts feedback and dissemination update phases (Phases I and II, respectively) of the project were exempt from IRB review. On the same date, approval was granted by the IRB to obtain feedback from the viewers of the videos (see Attachment 5). This phase of the study (Phase III) will be reviewed annually by the IRB.

A.11 SENSITIVE QUESTIONS

Most SAMHSA/CSAP data collections gather sensitive information on substance abuse and mental health. The purpose of this data collection is to gather information about the State/Territory underage drinking prevention videos supported by SAMHSA/CSAP. Underage drinking is an important topic that could be considered sensitive. Demographic information is requested from viewers of the video, which could also be considered sensitive. It is expected that the vast majority of persons completing the Video Viewers Feedback Form (see Attachment 3) will be over the age of 18; however, because of the possibility that persons under the age of 18 may have viewed the videos, SAMHSA/CSAP does not want to lose useful feedback on the videos that they viewed.

The informed consent statement for the State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1) will appear on the opening page of the feedback form and will—

- congratulate contacts for participating in the SAMHSA/CSAP project;
- remind contacts that as a participant in the project, they agreed to provide feedback on behalf of their State/Territory;
- mention approximately how long it will take to complete the feedback form;
- describe how the information collected will be used;
- state that responses will not be associated with respondent or State/Territory names in any reports to SAMHSA/CSAP;
- mention that the findings given to SAMHSA/CSAP will be in group form;
- note that information provided may be shared with the production team to improve service delivery and to update the dissemination plans identified in the outline for the State/Territory video;
- provide an email address and phone number to call if contacts have questions or concerns about completing the feedback form;
- state that by continuing, contacts are consenting to provide feedback on behalf of the State/Territory; and
- thank respondents.

A brief paragraph will appear on the opening page of the State/Territory Videos Project – Dissemination Update Form (see Attachment 2) and will—

- remind State/Territory points of contact that they previously completed a feedback form about the dissemination of the State’s/Territory’s video and that the video was supported by SAMHSA;
- remind contacts that they agreed to be recontacted;
- describe how long it will take to complete the form;
- provide an email address and phone number to call if contacts have questions or concerns about completing the form;
- state that by continuing, respondents agree to complete the online form; and
- thank respondents.

The informed consent statement will appear on the opening page of the Video Viewers Feedback Form and will—

- indicate SAMHSA/CSAP as the sponsor of the underage drinking prevention video;
- provide the purpose of the form;
- describe how the feedback will be used;
- describe how long it will take to complete the form;
- ask respondents to complete one form for each video watched;
- mention that participation is voluntary;
- state that respondents can answer some or all of the questions;
- note that the answers are very important;
- ask respondents to not include their name or contact information anywhere on the form;

- provide an email address and phone number to call if respondents have questions or concerns about completing the form;
- state that by continuing, respondents are consenting to complete the feedback form; and
- thank respondents.

A.12 ESTIMATES OF ANNUALIZED HOUR BURDEN

The assessment includes three phases—1) State/Territory point of contact feedback, 2) dissemination updates, and 3) video viewers feedback. The burden for each phase is discussed below.

Phase I - State/Territory Point of Contact Feedback

By 2014, the State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1) will be completed by an estimated 45 designated State/Territory points of contact for videos produced from 2010 through 2013. It will take an average of 20 minutes (0.333 hours) to read the informed consent statement and complete the form. The burden estimate is based on the interviews that were conducted with the pilot sites in 2007. For the burden estimate, an hourly wage of \$28.85 is used; it is based on an average annual salary of \$60,000 for respondents who work 2,080 hours per year. The estimated average annual hourly cost of this phase of the assessment is \$144.15.

Phase II - Dissemination Updates

The State/Territory Videos Project – Dissemination Update Form will be completed by State/Territory points of contact every 6 months through 2014. A total of 226 updates are expected by 2014. It will take an average of 10 minutes (0.167 hours) to review instructions and complete the online form. The burden estimate is based on comments from several potential respondents who reviewed the form and provided comments on how long it would take them to respond to it. For the burden estimate, an hourly wage of \$28.85 is used; it is based on an average annual salary of \$60,000 for respondents who work 2,080 hours per year. The hour burden is expected to vary because of differences in when the videos were produced and the number of updates [responses] that are expected through 2014. The estimated hour burden for all 4 years of the assessment (2011-2014) ranges from 2.00 to 11.02. The estimated average annual hourly cost of this phase of the assessment is \$272.20.

Phase III - Video Viewers Feedback

The Video Viewers Feedback Form (see Attachment 3) will be used to collect feedback from persons that view the State/Territory videos. It is estimated that by 2014, a total of 12,224.40 viewers will complete the online form, which will take an average of 5 minutes (0.083 hours) to review the informed consent statement, instructions, and complete the form. The average completion time is based on comments from several potential respondents who reviewed the form and provided comments on how long it would take them to respond to it. Viewers of the video are assumed to be persons in the health education field or members of the general public (25 and 75 percent, respectively). For the burden estimate, an average hourly wage of \$23.59 is used for the health educators; it is based on an average annual salary of \$49,060 for respondents who work 2,080 hours per year (Department of Labor, Bureau of Labor Statistics, 2009). The current Federal minimum wage of \$7.25 is used for the general public. The hour burden is

expected to vary because of the difference in viewers. The estimated average annual hour burden is 63.42 for health educators and 190.24 for the general public, with a total average hour burden of 253.66. The estimated average annual hourly cost is \$2,875.22.

Estimated Burden Table by Phase – All Four Years (2011-2014)

Phases	Number of respondents (production year of video)	Responses per respondent	Total responses	Hours per response	Total hour burden	Hourly wage cost	Total hour cost
Phase I - State/Territory Point of Contact Feedback	45	1	45	0.333	14.99	\$28.85	\$432.46
Subtotal-Phase I	45	---	45	---	14.99	---	\$432.46
Phase II - Dissemination Updates	4 (2007)	6	24	0.167	4.01	\$28.85	\$115.69
	11 (2009)	6	66		11.02		\$317.93
	8 (2010)	6	48		8.02		\$231.38
	13 (2011)	4	52		8.68		\$250.42
	12 (2012)	2	24		4.01		\$115.69
	12 (2013)	1	12		2.00		\$57.70
Subtotal-Phase II	60	---	226	---	37.74	---	\$1,088.81
Phase III - Video Viewers Feedback	3,056.10	1	3,056.10	0.083	253.66	\$23.59	\$5,983.84
	9,168.30	1	9,168.30		760.97	\$7.25	\$5,517.03
Subtotal-Phase III	12,224.40	---	12,224.40	---	1,014.63	---	\$11,500.87
Total-all Phases	12,329.40	---	12,495.40	---	1,067.36	---	\$13,022.14

Estimated Averaged* Annualized Burden Table

Form name	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden	Hourly wage cost	Total hour cost
State/Territory Videos Project – Point of Contact Feedback Form	15	1	15	0.333	5.00	\$28.85	\$144.15
State/Territory Videos Project - Dissemination Update Form	15	6.25	56.50	0.167	9.44	\$28.85	\$272.20
Video Viewers Feedback Form	764.03	1	764.03	0.083	63.42	\$23.59	\$1,495.96
	2,292.08	1	2,292.08		190.24	\$7.25	\$1,379.26
Total	3,086.11	--	3,127.61	--	268.10	---	\$3,291.57

*The numbers reflected in this table are averaged across all 4 years of the assessment, except for the State/Territory Videos Project – Point of Contact Feedback Form which is averaged across 3 years. The hours per response and hourly wage cost rates are actual not average figures. Figures in this table may be off slightly from figures in the Estimated Burden Table by Phase – All Four Years (2011-2014) due to rounding.

A.13 ESTIMATES OF ANNUALIZED COST BURDEN TO RESPONDENTS

No capital, startup, or operational maintenance costs will be associated with this project.

A.14 ESTIMATES OF ANNUALIZED COST TO THE GOVERNMENT

Costs for this data collection include personnel for designing the online form and conducting the data collection, which encompasses analyzing the data and preparing a summary report. Total contractor cost for this data collection is approximately \$40,000. In addition, there are government staff costs of approximately 8 percent of a GS-13 project manager, totaling approximately \$6,689 (assuming a Step 6). The average annual cost of this assessment is \$11,672.25 (\$40,000 contractor cost + \$6,689 government staff cost = \$46,689/4 years).

A.15 CHANGES IN BURDEN

This is a new project.

A.16 TIME SCHEDULE, PUBLICATION AND ANALYSIS PLANS

Time Schedule—Assessment of the State/Territory Videos project will occur in 2011-2014. The following table provides the assessment schedule, which commences in 2011.

Activity	Date
Obtain OMB approval	November 2011
Send an email to State/Territory points of contact about the need for feedback (starting with contacts for videos produced in 2010)	Beginning December 2011
Send an email requesting that State/Territory points of contact enter dissemination updates (starting with contacts for videos produced in 2007-2009)	Beginning December 2011
Verify data entered	Beginning January 2012
Submit data to the SAMHSA/CSAP Data Analysis Coordination and Consolidation Center	May and November, yearly
Conduct data analysis	August, yearly
Produce annual report	September, yearly
Prepare and submit draft summary report to SAMHSA/CSAP	August 2014
Prepare and submit finalized summary report to SAMHSA/CSAP	September 2014

Analysis Plan

Only descriptive statistical procedures will be used, including frequency counts and percentages. Some cross-tabulations will be used to help identify patterns within responses. The following are sample shells for data analysis.

Targeted Audience of State/Territory Video	N	Total %
Parents/Adults		
Youth		
General audience		
Policymakers		
Community stakeholders		
Local coalitions		
Community partners		
Other		

Dissemination Method	N	Total %	Total Dissemination Counts
Website (agency)			# views/downloads
Website (partner)			# views/downloads
YouTube			# views
Other social media			# views/downloads
Distributed to partner community organizations/coalitions			# copies distributed
Mailed DVDs (excluding partners)			# copies distributed
TV (including cable & local public access)			# times broadcast Viewership #
Town hall meeting/public forum presentations			# viewers/session attendees
Conference presentations			# viewers/session attendees
Other			#

How Community Members Planned To Become Involved In Underage Drinking Prevention Efforts After Watching the Video	N	Total %
Talk with my child/family/friends about the dangers of underage drinking.		
Alter/change personal practices related to serving alcohol to and alcohol consumption.		
Join a coalition or organization working to prevent and reduce underage drinking.		
Contact policy and lawmakers to advocate for changes and/or recommend enhanced enforcement of existing laws and policies.		
Other		
Did not think that they would become involved in underage drinking prevention efforts.		

The qualitative information collected will be used to highlight important response patterns in the quantitative data.

Findings Report

Reports summarizing the assessment will be prepared for the internal use of SAMHSA/CSAP. All data will be reported in aggregate form. Data from the assessment may be presented at internal meetings and professional conferences, such as the National Prevention Network, American Public Health Association, and the Society for Prevention Research. A summarized report of viewer feedback may be provided to the State/Territory for which data were received. No other reports or publications are currently planned.

A.17 DISPLAY OF EXPIRATION DATE

The expiration date will be displayed.

A.18 EXCEPTIONS TO CERTIFICATION STATEMENT

This collection of information involves no exception to the Certification for Paperwork Reduction Act Submissions.

B. Statistical Methods

B.1 RESPONDENT UNIVERSE AND SAMPLING METHODS

The process assessment of the State/Territory Videos project relies in part on a convenience sampling strategy. The sample includes all States and Territories that had videos produced under the project between 2007 and 2013, and viewers of the videos between 2011 and 2014. A summary of the sample by phase is provided below.

Phase I - State/Territory Point of Contact Feedback

In 2011-2014, approximately 45 feedback forms will be completed by points of contacts for State/Territory videos that were produced in 2010-2013 (see the table below). No data will be collected on the characteristics of the State/Territory points of contact. The anticipated response rate for this phase is 85 percent.

Phase I – State/Territory Point of Contact Feedback during 2011-2014

Production year of videos	Number of videos produced	Assessment year(s)	Total number of feedback form completes by 2014
2010	8	2011	8
2011	13	2011-2012	13
2012	12	2012-2013	12
2013	12	2013-2014	12
Total:	45	Total:	45

Phase II - Dissemination Updates

State/Territory points of contact for all videos produced since the project began in 2007 will be asked to update the dissemination activities of their State's/Territory's video every 6 months, beginning in 2011. A total of 15 videos were produced between 2007 and 2009. These State/Territory points of contact provided initial details of the dissemination activities of their

State's/Territory's video to the video production team during the post-production phase of the video. They will be included in this data collection phase to determine if the video continues to be utilized to as an effective tool to highlight the State's/Territory's underage drinking prevention activities. If all expected States and Territories produce a video by the end of the project (2014), there will be approximately 60 State/Territory points of contact and 226 dissemination updates (see the table below). No data will be collected on the characteristics of State/Territory points of contact. The anticipated response rate for this phase is 75 percent.

Phase II - Dissemination Updates during 2011-2014

Production year of videos	Number of videos produced	Assessment year(s) (Estimated number of updates)	Total number of updates (x) Number of videos
2007	4	2011 (1), 2012 (2), 2013 (2), 2014 (1)	24
2009	11	2011 (1), 2012 (2), 2013 (2), 2014 (1)	66
2010	8	2011 (1), 2012 (2), 2013 (2), 2014 (1)	48
2011	13	2012 (1), 2013 (2), 2014 (1)	52
2012	12	2013 (1), 2014(1)	24
2013	12	2014 (1)	12
Total:	60	Total:	226

Phase III - Video Viewers Feedback

Persons are able to view the video produced by the State/Territory in at least three ways—1) in-person (e.g., at a meeting hosted by State Departments of Health or at a professional conference), 2) online (e.g., www.stopacoholabuse.gov, SAMHSA's YouTube channel, or the State/Territory agency's website), and 3) electronically (e.g., on DVD or public access television). By 2014, it is estimated that 12,224.40 viewers will complete the Video Viewers Feedback Form. To the extent possible, web-based systems will be the preferred modality for collecting, processing, and analyzing third phase data. However, the decision whether to or not to use web-based systems for collecting these data will be based on a number of factors such as respondent accessibility and venue.

Phase III - Video Viewers Feedback Form Completes during 2011-2014

Production year of videos	Number of videos produced	Number of potential yearly feedback form completes	Number of assessment year(s)	Total number feedback form completes
2007	4	73.20	4 (2011, 2012, 2013, 2014)	1,171.20
2009	11		4 (2011, 2012, 2013, 2014)	3,220.80
2010	8		4 (2011, 2012, 2013, 2014)	2,342.40
2011	13		3 (2012, 2013, 2014)	2,854.80
2012	12		2 (2013, 2014)	1,756.80
2013	12		1 (2014)	878.40
Total:	60		Total:	12,224.40

Demographic information is collected on the viewers; however, these data will be reported in aggregate to SAMHSA. The anticipated response rate for this phase is approximately 75 percent.

B.2 INFORMATION COLLECTION PROCEDURES

Prior to the assessment, a “teaser email” is sent individually to all National Prevention Network (NPN) members whose State/Territory had not previously participated in the State/Territory Videos project. The email is sent under the name of the project’s Government Project Officer with a subject line of—Creating State/Territory Videos on Underage Drinking Prevention. This teaser email announces that an ‘official invitation to produce a video’ will follow, provides frequently asked questions about participating in the State/Territory Videos project, and asks NPN members to consider joining an upcoming conference call so that other questions they may have can be answered. Conference call information is provided at the end of the email as well as contact information for a member of the video production team. A few days prior to the scheduled conference call, a “reminder email” is sent en masse to the NPN members (see Attachment 6, Videos Project Communications Sent Prior to Assessment). It is during these calls that additional details on participating in the project are provided, including information about the assessment.

During the informational conference calls, NPN members and additional State/Territory representatives (e.g., the identified State/Territory points of contact [they are usually on the call]), are informed of the following regarding the assessment—

We intend to conduct a process assessment of the State/Territory Videos project, pending Institutional Review Board and Office of Management and Budget approval. There are three phases to the assessment. The first phase involves the designated State/Territory contact completing a feedback form once the video is finalized. The feedback form collects information about your State’s/Territory’s experience in producing the underage drinking prevention video, the dissemination efforts of the video, and technical assistance received from the video production team. It is estimated that the feedback form will take approximately 20 minutes to complete.

The second phase will occur 6 months after the feedback form is completed. Your designated contact will be sent an email asking him/her to update the dissemination

efforts of the video using an online form. It is estimated that it will take 10 minutes to update the dissemination efforts using this online form. We are also asking that the dissemination efforts be updated every 6 months until the end of this project, which is in 2014.

The third phase involves persons that viewed your State's/Territory's video. The purpose of this phase is to gather feedback about a person's views of underage drinking as a public health issue prior to and after watching your State's/Territory's video. To the extent possible, web-based systems will be the preferred modality for collecting, processing, and analyzing third phase data. However, the decision whether to or not to use web-based systems for collecting these data will be based on a number of factors such as respondent accessibility and venue. Nevertheless, SAMHSA/CSAP will ensure that all data collection efforts are readily accessible to employees, government personnel, and members of the public with disabilities. Lastly, understanding that all data collection will be voluntary, participants who do not wish to provide information via a web-based system will be provided, to the extent possible, with alternative participation options (e.g., telephone interview or paper-based questionnaires) to ensure high response rates. We will process and share aggregated viewer feedback with you on your video. It is estimated that it will take viewers about 5 minutes to complete the feedback form. We will process and share aggregated viewer feedback with you on your video. It is estimated that it will take viewers about 5 minutes to complete the feedback form.

Following the conference call, an "official invitation" to participate in the State/Territory Videos project is sent to the NPN members. NPN members RSVP whether they intend to participate in the project, select which year (2011, 2012, or 2013) would work best to produce the video; and indicate the primary contact person for this project. The name, email address, and phone number of the primary contact person will be forwarded by the video production team to the assessment team.

Phase I - State/Territory Point of Contact Feedback

The State/Territory point of contact will be emailed within 45 days after the final copy of the video is provided (this timeframe will be off schedule for the videos finalized in 2010 and those produced in 2011), with instructions on how to access the State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1). As respondents complete each page of the feedback form and click **Next**, data entered will be automatically saved. Contacts will be allowed to return to the form until they click **Done**. Once the form is submitted (i.e., **Done** is clicked), contacts will not be allowed to go back into the form to make changes. The data will be stripped of its association to the coded link and the IP address used to complete the form. An ID code will be assigned to the data and will be used as a running tally of the number of forms received. At the end of the feedback form, the contact is thanked and reminded that they will be contacted in about 6 months to update the dissemination efforts of their State's/Territory's video.

Feedback from the State/Territory points of contacts will be collected according to the schedule in the table below.

Phase I – Schedule of Feedback Collection during 2011-2014

Production year of videos	Number of videos produced	Collection year(s)
2010	8	2011
2011	13	2011-2012
2012	12	2012-2013
2013	12	2013-2014
Total:	45	

If the point of contact is not reached on the initial attempt, a voicemail message will be left. The assessor will also email the point of contact. If several attempts to reach the contact are unsuccessful, the assessor will use other methods to reach the contact such as communicating with the NPN.

Phase II - Dissemination Updates

At about 6 months after the feedback form is completed, the State/Territory points of contact will be sent an email from the assessment team detailing the need to update the dissemination efforts of the video for the past 6 months. The email will include a coded link to the State/Territory Videos Project – Dissemination Update Form (see Attachment 2). This coded link is used to track whether a State/Territory point of contact has responded to the request to complete the form. State/Territory points of contact that do not update the dissemination efforts of their State's/Territory's video more than 30 days following the email will be sent a reminder e-mail requesting them to complete the dissemination update form by a defined date. If contacts are unresponsive to emails, the assessor will use other methods to reach the contact such as communicating by phone or contacting the NPN.

As contacts complete each page of the form and click **Next**, data entered will be automatically saved. Contacts will be allowed to return to the form until they click **Done**. Once the form is submitted (i.e., **Done** is clicked), contacts will not be allowed to go back into the form to make changes. The data will be stripped of its association to the coded link and the IP address used to complete the form. An ID code will be assigned to the data and will be used as a running tally of the number of forms received. At the end of the dissemination update form, the contact is thanked and reminded that they will be recontacted in about 6 months to update the dissemination efforts of their State's/Territory's video.

Following OMB clearance, an email will be sent to the State/Territory points of contact for videos produced in 2007-2009 noting that OMB clearance has been received and asking them to update the dissemination efforts of the video for the past 6 months for the assessment of the State/Territory Videos project. These State/Territory points of contact provided initial details of the dissemination activities of their State's/Territory's video to the video production team during the post-production phase of the video. The aforementioned procedures also apply to these contacts.

Dissemination updates will be collected according to the schedule in the table below.

Phase II – Schedule of Dissemination Updates Collection during 2011-2014

Production year of videos	Number of videos produced	Collection year(s) (Estimated number of updates)
2007	4	2011 (1), 2012 (2), 2013 (2), 2014 (1)
2009	11	2011 (1), 2012 (2), 2013 (2), 2014 (1)
2010	8	2011 (1), 2012 (2), 2013 (2), 2014 (1)
2011	13	2012 (1), 2013 (2), 2014 (1)
2012	12	2013 (1), 2014(1)
2013	12	2014 (1)
Total:	60	

Phase III - Video Viewers Feedback

To the extent possible, web-based systems will be the preferred modality for collecting, processing, and analyzing all satisfaction data (i.e. common and provider-specific). However, the decision whether to or not to use web-based systems for collecting these data will be based on a number of factors such as respondent accessibility and venue. Nevertheless, SAMHSA/CSAP will ensure that all data collection efforts are readily accessible to employees, government personnel, and members of the public with disabilities. Lastly, understanding that all data collection will be voluntary, participants who do not wish to provide information via a web-based system will be provided, to the extent possible, with alternative participation options (e.g., telephone interview or paper-based questionnaires) to ensure high response rates.

On line completion of the Video Viewers Feedback Form is optional and viewers can cancel out of the survey at any time. If viewers choose to submit feedback, they are asked to complete one feedback form for each video viewed. Once viewers select which video they viewed in question 2 of the feedback form, the name of that State/Territory is automatically filled in for the remaining questions that note the name of the State/Territory. As viewers complete each page of the feedback form and click **Next**, data entered will be automatically saved. Since there is no way to associate a form with a particular viewer, viewers will not be allowed to return to the form that they are completing once the form is submitted (i.e., **Done** is clicked) or if they exit the URL. The IP address used to complete the form is captured by the host site of the form; however, it is not linked to the feedback form responses. Each form will be assigned an ID code that will be used as a running tally of the number of forms received.

Video viewer feedback will be collected according to the schedule in the table below.

Phase III – Schedule of Video Viewer Feedback Collection during 2011-2014

Production year of videos	Number of videos produced	Number of potential yearly feedback form completes per video	Collection year(s)
2007	4	73.20	2011, 2012, 2013, 2014
2009	11		2011, 2012, 2013, 2014
2010	8		2011, 2012, 2013, 2014
2011	13		2012, 2013, 2014
2012	12		2013, 2014
2013	12		2014
Total:	60		

B.3 METHODS TO MAXIMIZE RESPONSE RATES

The State/Territory points of contact will be emailed within 45 days after the final copy of the video is provided. Additional emails will be sent to the contact if the feedback form is not completed within two weeks of the initial email. Phone calls may also be made to the State/Territory points of contact if the contact has not been responsive to the emails. At the end of the feedback form, contacts are reminded that they will be contacted in about 6 months to update the dissemination efforts of the video.

At about 6 months after the feedback form is completed, State/Territory points of contact will be sent an email from the assessment team detailing the need to update the dissemination efforts of the video for the past 6 months. State/Territory points of contact that do not update the dissemination efforts of their State’s/Territory’s video more than 30 days following the email will be sent a reminder e-mail requesting them to complete the dissemination update form by a defined date. If contacts are unresponsive to emails, assessors will use other methods to reach contacts such as communicating by phone or contacting the NPN. At the end of the dissemination update form, the contact is reminded that they will be recontacted in about 6 months to update the dissemination efforts of their State’s/Territory’s video.

The anticipated response rate for Phase I and II of the assessment is 85 percent and 75 percent, respectively. States/Territories are considered partners in this effort. From inception to conclusion, the State/Territory points of contact are involved in the production process of their State’s/Territory’s video. The response rate for Phase III of the assessment is approximately 75 percent. Given the exposure the videos have on SAMHSA’s YouTube channel and www.stopalcoholabuse.gov, and the number of views on SAMHSA’s YouTube channel in just over a two month period, it is anticipated that many persons will take the time to provide feedback on the videos.

B.4 TESTS OF PROCEDURES

In 2007, a pilot-test of the State/Territory Videos Project – Point of Contact Feedback Form (see Attachment 1) was conducted with four States that produced a underage drinking prevention video (see Attachment 4, Report on Underage Drinking Prevention Videos: A Four-State Pilot Project). A total of five* State/Territory points of contact were interviewed by phone (*one State had two contacts). In 2010, a draft of the State/Territory Videos Project – Dissemination Update

Form (see Attachment 2) was sent to three State/Territory points of contact. Additionally, the Video Viewers Feedback Form (see Attachment 3) was sent to three local community members. All individuals were asked to identify any question that they did not understand or thought they would not be able to answer. They were also asked to report the amount of time it took them to complete the instruments. For the feedback form, the assessor noted how long it took to complete the form. All of the questions were easily understood by those individuals, and no questions were identified as being difficult to answer. In light of this input and the simple straightforward nature of the testing procedures, pretesting is not necessary.

B.5 STATISTICAL CONSULTANTS

The following individuals provided statistical consultation in development of the data collection instruments and methodology:

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References

Centers for Disease Control and Prevention. *Youth Risk Behavior Surveillance—United States, 2009*. Surveillance Summaries, June 4, 2010. MMWR 2010; 59 (No. SS-5).

Department of Labor, Bureau of Labor Statistics. (2009). *2009 National Occupational Employment and Wage Estimates*. Washington, DC: Government Printing Office. Retrieved from http://www.bls.gov/oes/current/oes_nat.htm

Substance Abuse and Mental Health Services Administration. (2010). *Results from the 2009 National Survey on Drug Use and Health: Volume I. Summary of the National Findings* (Office of Applied Studies, NSDUH Series H-38A, HHS Publication No. SMA 10-4586Findings). Rockville, MD.

U.S. Department of Health and Human Services. (2007). *The Surgeon General's call to action to prevent and reduce underage drinking*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General.

List of Attachments

1. State/Territory Videos Project – Point of Contact Feedback Form
2. State/Territory Videos Project – Dissemination Update Form
3. Video Viewers Feedback Form
4. Report on Underage Drinking Prevention Videos: A Four-State Pilot Project
5. ICF Macro Institutional Review Board IRB Review Findings Form
6. State/Territory Videos Project Communications Sent Prior to Assessment