



**Arrestee Drug
Abuse Monitoring
(ADAM II)**

**Request for
OMB Review**

Part A

**Contract #TPD-NDC-10-K-
00002**

Draft

December 14, 2012

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Table of Contents

Part A. Justification..... 1

A.1 Circumstances That Make Collection of Data Necessary.....1

A.2 Purposes and Uses of the Data.....2

A.3 Use of Improved Information Technology to Reduce Burden.....2

A.4 Efforts to Identify and Avoid Duplication.....3

A.5 Efforts to Minimize Burden on Small Businesses or Other Entities.....4

A.6 Consequences If the Information Is Not Collected or Is Collected Less Frequently.....4

A.7 Special Circumstances Requiring Collection of Information in a Manner
Inconsistent with Section 1320.5(d)(2) of the Code of Federal Regulations.....4

A.8 Public Comment Received on Federal Register Notice.....4

A.9 Incentives to Respondents.....5

A.10 Assurances of Confidentiality Provided to Respondents.....5

A.11 Justification for Questions of a Sensitive Nature.....6

A.12 Estimate of Information Collection Burden.....6

A.13 Estimate of Total Annual Cost Burden.....6

A.14 Estimates of Annualized Costs.....7

A.15 Change in Annual Reporting Burden.....7

A.16 Plans for Analysis and Publication of Results.....8

A.17 OMB Expiration Date.....9

A.18 Exceptions to Certification Statement.....9

Part A. Justification

A.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 bellwether 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, seriously 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 publications, *What America's Users Spend on Illegal Drugs*¹ and *Drug Availability Estimates in the United States*². ADAM II's 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 appreciably expanding eastward from cities where meth use has been endemic for decades.

ADAM II's sentinel sites are crucial for monitoring use of new drugs of abuse, as well as for understanding local drug use trends. For instance, ADAM II data indicate that in 7 of the 10 sites, crack was the most commonly reported form of cocaine use in 2011. In the other three sites, cocaine was reported as used in crack or powder form by equal proportions of arrestees reporting recent use.

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 five of sites that have participated in the program since 2006. The reduction in number of sites is strictly due to budgetary constraints and not the utility of the data. This continuation will continue to provide ONDCP, 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 five sentinel sites. The five sites are: New York, NY (Borough of Manhattan); Atlanta, GA (Fulton County); Chicago, IL (Cook County); Denver, CO (Denver County) and Sacramento, CA (Sacramento County).

¹ http://www.whitehouse.gov/sites/default/files/page/files/wausid_report_final_1.pdf

² http://www.whitehouse.gov/sites/default/files/page/files/daeus_report_final_1.pdf

A.2 Purposes and Uses of the Data

With ADAM II in 2007, 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 the county areas studied 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 through 2011 have been published in annual reports by ONDCP. Publication of the 2012 data is forthcoming. In 2013, ADAM II will also meet the objectives to monitor trends in drug use and drug markets by:

- Obtaining data consistent with 2000–2003 ADAM and 2007-2012 ADAM II data in 5 U.S. counties;
- Developing validated estimates of drug use over time;
- Supporting statistical trend analysis in 5 U.S. counties;
- The annual reports are available online from ONDCP:

<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2011.pdf>;

<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2010.pdf>;

<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2009.pdf>;

<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2008.pdf>;

<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2007.pdf>;

A.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.³ Various electronic data capture strategies were considered when ONDCP reinstated the ADAM II program in 2007, 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.

³ The study team refers to ONDCP and its subcontractor, Abt Associates, Inc. and Abt's wholly-owned subsidiary, Abt SRBI. Abt SRBI manages ADAM II survey field operations and data preparation.

- 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.
- Electronic equipment may be perceived differently by respondents and impact their answers. Given the complexity and size of the ADAM II instrument, existing tablets or other handheld devices might complicate data collection because the screens are too small to readily encompass the calendar that is central to all ADAM II data collection. Further, electronic computing devices like tablets 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; the program 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 in ADAM II include the use of character recognition software to scan the calendar portion of the interview instrument and scannable barcoded labels to allow interviewers to maintain confidentiality while easily matching interview data with urinalysis samples.

A.4 Efforts to Identify and Avoid Duplication

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

From 2000–2003 and 2007–2012, the ADAM system has provided a unique route to estimating chronic drug use and examining market behaviors by capturing information on a critical segment of the user population—the users who are often the most drug-involved and who interact with the criminal justice system. Many of the drug users are 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 may not be included 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. ADAM II is the only data collection effort that supports statistical trend analysis of drug use in this population at each site. *Interviewing this population represents an important, complementary, not duplicative, effort.*

The ADAM program has also been the only 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. In 2013, ADAM II will continue to replicate this data collection and maintain drug use trends for five sentinel sites.

A.5 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.

A.6 Consequences if the Information Is Not Collected or Is Collected Less Frequently

ADAM series data are the only information collected on a multi-site scale that adequately access the heaviest, most problematic users in the areas targeted. These data facilitate informed decision making about policies and priorities, as well as assist The Office of National Drug Control Policy meet objectives for the Nation's drug control program.

Due to federal budget cuts beginning in the 2012 cycle, the number of sites was reduced to five and a single 21-day data collection period was instituted. While these changes were not ideal, it was important to maintain a presence in as many sites as possible. ONDCP has a need for the continued results of the ADAM series study. 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 II 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.⁴ In fact, ADAM II data from 2007 and 2008 indicated that methamphetamine continued to be a problem drug in several cities, especially Sacramento and Portland, but that the market for the drug was more highly localized than anticipated. ADAM II 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. Going forward, ADAM II data are anticipated to be particularly crucial for Denver, where the recreational use of marijuana was recently legalized. The ADAM II data will allow policymakers to compare market prices and acquisition patterns for marijuana in Denver before and after legalization. The importance of these data cannot be overstated in an era of evolving drug laws and policy responses to drug use.

A.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.

A.8 Public Comment Received on Federal Register Notice

Public comment period is complete.

⁴ Hunt, D., Kuck, S. and Truitt, L. (2006). *Methamphetamine: Lessons Learned*, U.S. Department of Justice, NIJ Report, 20973, February.

A.9 Incentives to Respondents

As in the original ADAM study, in ADAM II, 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).

A.10 Assurances of Confidentiality Provided to Respondents

At each site,⁵ 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 2016. 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.

There is a distinction between confidentiality and privacy and the consent form read to the respondent for the 2012 collection has been altered slightly to remove the word “confidential” (other than in the phrase “certificate of confidentiality”) and to add text referencing that collected information will be kept private to the extent permissible by law under the PSA.

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 2013 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 have continuing annual review and approval. 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

⁵ Again, in 2013, an ADAM II “site” comprises the sample of facilities (or single intake facility) that represent the targeted county. We will use the term “site” to refer to the county areas.

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 II questionnaire. The back of the ADAM II facesheet 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 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.

A.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 five 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 115,334 arrestees have been interviewed successfully.

A.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
<i>Arrestee Drug Abuse Monitoring (ADAM) II Survey 2013</i>	350	5	1	26.23	765.04
Total request for 2013	1750				765.04

A.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.

A.14 Estimates of Annualized Costs

The estimated annualized cost for the 2013 Arrestee Drug Abuse Monitoring II (ADAM II) Program is \$677,996. The total amount includes the following:

Exhibit 2. Estimated Annualized Cost Burden

Tasks	Labor Hours	Labor Costs (less MOBIS rate discount)	Operations, Direct, and Indirect Costs	Total
<i>Implement Data Collection in Selected Sites</i>	4749	\$274,728	\$170,972	\$445,700
<i>Manage Multi-site Data Linkages and Processing</i>	360	\$50,494	\$1,835	\$52,329
<i>Analysis and Dissemination of Results</i>	545	\$95,730	\$2,779	\$98,509
<i>Reporting, Meetings and Briefings</i>	436	\$75,360	\$6,098	\$81,458
Total request for 2013	6090	\$496,312	\$181,684	\$677,996

A.15 Change in Annual Reporting Burden

This request is for a continuation of the ADAM II Information Collection, OMB control # 3201-0013. The decrease in Annual Burden from 1856 to 765 reflects modifications in the number of sites and in other procedures, as well as the introduction of new questions.

Due to budgetary constraints, ADAM II will have fewer sentinel sites than past ADAM data collections in 2007–2012; ADAM II will study five sites. Other procedural changes are limited to a shorter total number of days for the data collection period (21 days instead of 28 days) and the elimination of one of the collection cycles (one quarter of collection instead of two quarters). Allowing for comparisons with the 2000–2003 and 2007–2012 time periods, in 2013 the program will use the same template for sampling and data collection across all sites as ADAM did. Similarly, the general approach to sampling facilities within a county (the estimation catchment area) and arrestees within each facility will remain the same. Neither sampling methodology nor general approach require revisions moving to the one-time administration in 2013.

The questions we propose adding to the ADAM II data collection instrument reflect changing drug use patterns since the original ADAM instrument was developed in 2000. While prescription drug abuse was a concern at the time, drug policymakers and law enforcement agencies were more concerned with the still-high levels of cocaine and other street drugs. Today, prescription drug abuse is believed to be more widespread and identifying sources and prices of illegally obtained prescription medication is of interest to researchers and law enforcement professionals. In response, ONDCP has developed several questions designed to estimate the market price of prescription drugs obtained illicitly, and identify the sources of those drugs obtained by arrestees. These questions are modeled after existing ADAM II drug market questions that collect similar information on street drugs.

The ONDCP ADAM II team has also added two questions designed to correct an omission in the original ADAM instrument. Though ADAM collects information on prior arrest and incarceration, no information has ever been gathered about ADAM respondents' time on probation, parole, or other community supervision. We have added two questions, modeled after similar questions in the National Survey on Drug Use and Health, which gather information on community supervision from ADAM respondents.

Finally, ONDCP has added a question on military veteran status designed to estimate whether ADAM respondents are eligible for VA benefits. These questions were also modeled after a NSDUH survey question, though we supplemented information on National Guard veteran status for respondents who may be eligible for benefits due to combat zone deployment. We anticipate these questions will add approximately 4 minutes per interview, which will result in an overall burden increase of approximately 117 annual hours.

Proposed new questions/changes to questions are attached to this document in Appendix A.

A.16 Plans for Analysis and Publication of Results

Abt Associates will prepare ADAM II 2013 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,⁶ 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 in-depth 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. The procedure described in Part B, 2 and in the attached technical documentation report 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 annual 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,

⁶ <http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2011.pdf>
<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2010.pdf>
<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2009.pdf>
<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2008.pdf>
<http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/adam2007.pdf>

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.

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 2000-2013 is discussed in sections that follow.

A.17 OMB Expiration Date

All data collection instruments will include the OMB expiration date.

A.18 Exceptions to Certification Statement

No exceptions are requested.