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3		Science to Practice:
4 5	Perspectives of and	Attitudes Towards a Marketing Strategy for Preventing Alcohol-related
6		Problems in College Communities
7 8		
o 9		CDC ID# 0920-12OG
10		CDC 1D# 0520-1200
10		
11		SUPPORTING STATEMENT A
12		
13		
14		Submitted by:
15		
16		
17		Department of Health and Human Services
18		Center for Disease Control and Prevention
19		National Center for Injury Prevention and Control
20 21		Division of Unintentional Injury Prevention
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32		
33	Date:	July 1, 2013
34		
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TABLE OF CONTENTS

36 37

41

- 40 Abstract
 - **JUSTIFICATION** A.
 - Circumstances Making the Collection of Information Necessary 1.
 - 2. Purpose and Use of Information Collection
 - 3. Use of Information Technology and Burden Reduction
- 42 4. Efforts to Identify Duplication and Use of Similar Information
- Impact on Small Business or other Small Entities 43 5.
- Consequences of Collecting Information Less Frequently 44 6.
- 45 7. Special Circumstances Relating to the Guidelines of 5CFR 1320.5
- 8. Comments in Response to Federal Register and Efforts to Consult Outside the Agency 46
- Explanation of Any Payments or Gifts to Respondents 47 9.
- 48 Assurance of Confidentiality Provided to Respondents 10.
- 49 11. Justification for Sensitive Questions
- Estimates of Annualized Burden Hours, and Costs 50 12.
- Estimates of Other Total Annual Cost Burden to Respondents or Record keepers 51 13.
- 52 14. Annualized Costs to the Federal Government
- 53 15. **Explanation for Program Changes or Adjustments**
- Plans for Tabulation, Publication, and Project Time Schedule 54 16.
- Reason(s) Display of OMB Expiration Date Inappropriate 55 17.
- Exceptions to Certification for Paperwork Reduction Act Submissions 56 18.
- 57 58
- 59 LIST OF ATTACHMENTS

60

- 61 Attachment A. Authorizing Legislation - Public Health Service Act: Sections 301 (42 62 U.S.C. 241)
- Published 60-Day Federal Register Notice 63 Attachment B.
- 64 Attachment C. **CDC** Questionnaire
- **Public Comment** 65 Attachment D.
- Local IRB Approval 66 Attachment E.
- Email invitation letter
- 67 Attachment F.
- 68 Attachment G. **CDC** Questionnaire Screenshots
- 69 70

71 A. JUSTIFICATION

72 73

A.1. Circumstances Making the Collection of Information Necessary

74

75 Background

76

The Centers for Disease Control and Prevention (CDC) requests a new information collection for
a period of 18 months as part of the contract entitled, "Science to Practice: Developing and
Testing a Marketing Strategy for Preventing Alcohol-related Problems in College Communities."
The approach for developing and testing the marketing strategy is broadly based on work by the
CDC (Sogolow, Sleet, & Saul, 2007), the NIH and health communication theorists such as

82 (Maibach & Bloodgood, 2006) who promote using concepts from the marketing arena to gain

- 83 wide adoption of evidence-based public health strategies.
- 84

85 This marketing strategy is being developed and tested for the prevention program, Safer

- 86 Campuses and Communities (SCC). SCC combines alcohol management policies and
- 87 enforcement with a publicity campaign targeting student drinking at private parties in residences,
- 88 (including fraternity and sorority houses) in college communities. The program is based on
- 89 previous work conducted by Pacific Institute for Research and Evaluation (PIRE) with funding
- 90 from the National Institute for Alcohol Abuse and Alcoholism (NIAAA). PIRE designed the
- 91 original prevention program, Safer California Universities, and tested it on 14 California
- 92 university campuses and surrounding communities (Saltz et al., 2010). The Safer California
- 93 Universities program reduced episodes of off-campus drinking and drinking and driving among
- students. Upon learning of the efficacious prevention program, CDC sought to collaborate with
- 95 PIRE and NIAAA to design and test a strategy to adapt and market the program to universities
- 96 and surrounding communities across the United States. Slight adaptions to the "Safer California
- 97 Universities" program were made, and the program was renamed "Safer Campuses and
- 98 Communities" (SCC) so that it could be marketed at the national level.
- 99
- 100 The entire marketing strategy is comprised of four phases. This Request for New Information
- 101 Collection relates to the data collection necessary to implement Phase Four of the strategy. The
- 102 four phases are:
- 103
- 104 1) Conduct focus groups understand how to best customize the Safer Campuses and
- 105 Communities materials to appeal to different campus and community stakeholders who may lead 106 the program (OMB #0920-0798);
- 107
- 108 2) Design a marketing strategy based on the results of the focus group sessions. A primary
- 109 component of the strategy is a website that thoroughly describes the program and provides
- 110 downloadable materials in the form of a "toolkit" and video testimonials from the professional
- 111 staff at the campuses that have already implemented the program.
- 112
- 113 3) Execute the marketing strategy with a national sample of 160 4-year colleges and universities.
- 114 The goal of the marketing strategy is to use an organic process to identify one or more
- 115 champions at each campus, give them effective information and resources to encourage adoption
- of SCC, and then move a core group to action. To implement the strategy, a sample will be

118 U.S., the Institutional Data Archive of American Higher Education (IDA). University administrators and other campus stakeholders at the 160 sampled institutions will be contacted 119 120 via email and introduced to the SCC program. The email will request that recipient both visit the SCC website to confirm their interest in reducing alcohol problems among their students and 121 share the email with other campus and community stakeholders who are interested in reducing 122 alcohol-related harms among students in their community. The recipients who go to the website 123 124 and express their interest will constitute the key informants to be surveyed in Phase Four of the 125 marketing strategy. 126 127 4) Evaluate the reach of and key informants' response to the marketing strategy by conducting an online survey of the key informants described above in Phase Three. The survey is tentatively 128 129 scheduled to be administered during the spring and fall semester of the 2013 and 2014 academic years. The primary goals of survey are to assess the level of interest in adoption of SCC and 130 131 identify initial steps that have been taken to adopt the program. 132 133 The first two phases of the marketing have been completed. The final two phases will be 134 completed upon approval of this Request for Information Collection. This request summarizes 135 how the marketing strategy will be implemented (Phase Three) and details the Phase Four data 136 collection activities. 137 138 The purpose of this Information Collection Request is to evaluate the reach of and key 139 informants' response to the marketing strategy for the Safer Campuses and Communities project. 140 141 The data collection in Phase Four is authorized under Section 301 of the Public Health Service 142 Act (42 U.S.C. 241) (Attachment A). The marketing strategy is responsive to the National Center for Injury Prevention and Control's (NCIPC) research priority to "Evaluate strategies to 143 implement and disseminate known, effective interventions to reduce alcohol-impaired driving 144 145 and test the effectiveness of new, innovative strategies." 146 147 Rational for the need for Safer Campuses and Communities (SCC) 148 149 Each year, 1,700 college students die and more than 1.4 million are injured as a result of alcohol-

drawn from a database containing information on 384 colleges and universities from across the

117

- related incidents. Despite the enormous public health burden of college-age alcohol misuse, there
- 150 related incidents. Despite the enormous public health burden of college-age alcohol misuse, the 151 have been few rigorous evaluations of environmental strategies to address alcohol misuse in
- 151 nave been rew rigorous evaluations of environmental strategies to address alcohol misuse in 152 college settings. Environmental strategies typically involve implementing and enforcing policies
- 152 college settings. Environmental strategies typically involve implementing and enforcing policies
- that change the environments that influence alcohol-related behavior and subsequent harm. Such
- 154 strategies require collaboration among various sectors of the college community including
- 155 college administrators, college and community polices forces, and community stakeholders such 156 as elected officials and community leaders. They are more time- and resource- intensive than
- more common but unproven approaches such as requiring all freshmen students to attend an
- 158 alcohol education class. Further, studies show that the typical lag time between identifying
- 159 effective interventions and obtaining widespread adoption can stretch to well over a decade
- 160 (Balas & Noren, 2000). Given the number of students harmed, there is an urgent need to develop
- 161 more efficient and timely strategies for moving effective science to widespread practice. To help
- address this need, CDC and NIAAA contracted the Pacific Institute for Research and Evaluation

(PIRE) to develop and test the marketing strategy for the proven efficacious program SaferCampuses and Communities (SCC).

- 165
- 166167 Privacy Impact Assessment

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1 mpuet Assessment

169

Overview of the Data Collection System

170
171 The Safer Campuses and Communities (SCC) program is designed to reduce intoxication and
172 other alcohol-related harms associated with drinking in off-campus homes and apartments The
173 Pacific Institute for Research Evaluation (PIRE) pioneered the program with funding from
174 NIAAA. CDC and NIAAA are now funding PIRE to develop and test a national marketing

- 175 strategy for SCC.
- 176

177 PIRE has subcontracted with the Silver Gate Group (SGG) to collaborate on portions of the

178 project, including the data collection and analysis for Phase Four of the project, evaluating the

179 reach (were appropriate campus and community members recruited through requesting that the

180 campus officials share the email) of and response to the marketing strategy (did the respondent

follow up by forwarding the email, printing materials from the website, meeting with a group to

182 discuss adopting SCC, etc) (see Attachment C). SGG is a California-based organization that 183 specializes in dissemination campaigns on issues related to public health and safety in colleges

- 184 and universities.
- 185

186 SGG has access to the data base that will provide the sample of 160 colleges and universities that

187 will participate in the evaluation of the marketing strategy. The data base, the Institutional Data188 Archive on American Higher Education (IDA), consists of data on 384 institutions of higher

189 education drawn from 24 separate data sets. Further details about the IDA are supplied in

190 Supporting Statement B. Briefly, the IDA data base includes information on administrators and

191 key university staff members, including contact information, and census information surrounding

- 192 the colleges and universities.
- 193

194 Phase Three: Execute the marketing strategy

195 Based on information obtained from focus groups conducted in Phase One and experience with

implementing the Safer Californian Universities project, PIRE developed a marketing plan that

- 197 has the following objectives:
- To maximize the chances of finding one or more "internal champions" for the
 intervention, understanding that that person may be a university staff/administrator, a city
 employee, a politician or a local community leader;
- To provide cogent and compelling information for that person or those persons so that
 they not only feel confident in advocating for the program, but also have materials to
 share with those they wish to recruit; and

To overcome inertia by facilitating at least one meeting of interested parties at each targeted campus.

206 To meet these objectives, a random sample of 160 colleges and universities will be selected from the IDA; the sample will be restricted to 4-year schools with at least 5,000 undergraduates 207 because schools with large number of undergraduates living in close proximity to the campus are 208 209 thought to be the likeliest candidates for adopting SCC. Upon selection of the 160 schools, 210 names and email addresses of key university administrators and staff (e.g., Dean of Students; Director of Health Services; campus police or security; Housing Director) from the selected 211 212 schools will be extracted from the IDA. A colorful email will be sent to each person on the list 213 that announces the availability of a tool kit and supporting materials for implementing SCC. A 214 link to the SCC website will be provided along with a request that all interested recipients to click to the website to provide their emails. Most critically, the email will also ask the recipient 215 to forward a copy of the email to person who they know have interest in or responsibility for the 216 217 problems arising from student drinking in off-campus settings. The expectation is that this strategy will result in local elected officials, police, neighborhood leaders, local business people, 218

- 219 or other unofficial but potentially critical supporters being identified.
- 220 Once the core group of people at each campus has identified themselves by their interest in the
- 221 problem, PIRE will send a follow-up email with a more detailed description of the intervention,
- again, a link to the SCC website, and a request that PIRE would be able to share their contact
- 223 information with others in their community. The request to share their information is tied to the
- last key objective. PIRE will send a contact list out to the self-identified core group and ask
- them to arrange a meeting among themselves to discuss the SCC program. The group will also be asked to identify a lead contact for PIRE, if possible. This will facilitate following up with
- 227 either more information or to answer questions that may have arisen as the core group was
- 228 meeting. The marketing campaign will be rolled out over a 6-month period of time so as to
- enable PIRE to make adjustments and improvements as necessary, and also to enable PIRE to
- 230 best manage requests for information and our interaction in support of the core group meetings.
- 231 In sum, the marketing strategy is to use an organic process to identify one or more champions at
- each campus, give them effective information and resources to urge adoption of SCC, and then
- 233 move a core group to action. This strategy is believed to be an innovation in comparison to a
- 234 more passive distribution of materials only.
- 235 Phase Four: Evaluate the reach of and response to the marketing strategy
- As described above, an initial group of campus administrators and staff, as well as city staff and
- 237 officials from the selected schools will receive an email that will direct them to the SCC website
- and will also ask them to forward the email to individuals on or off campus who might be
- 239 interested in participating and gaining more information. A small mailing list will be built for
- each campus community, including internal champions, neighborhood association leadership,
- city officials, police departments, health services, etc. Approximately 6-12 people will be
- initially contacted on each campus. These individuals will constitute the key informants to besurveyed in Phase Four, the evaluation of the marketing strategy. Each key informant will
- receive an email invitation (Attachment F) to complete the online survey (Attachment C).

245 Reminder emails will be sent to non-responders at 5, 9, and 14 day intervals after the initial

invitation. The emails will include contact information for the survey staff for any individual

247 who may wish to have more information about the survey. The emails will stress that

248 participation is entirely voluntary, and individual questions can be skipped if desired (although

the questionnaire will not include any items asking about personal behavior or any of a sensitive

- 250 nature). Identifiers from the Institutional Data Archive on American Higher Education (IDA)
- will only be used to contact respondents by email.
- 252 253
- (ii) Description of Information to be Collected

Information to be collected via the online survey (Attachment C) includes respondents'

256 perspectives and attitudes about the marketing strategy. Collected information includes

respondents' awareness of SCC and recall of the materials used to promote its adoption at

258 campuses. Specifics about the respondents understanding of the program, attitudes and

259 perceptions about the efficacy and benefits of the prevention strategies and the resilience of the

- 260 current campus culture will also be collected on the survey. Individually identifiable information
- 261 collected will be limited to the name, job title and email address of each individual identified in262 the Institutional Data Archive on American Higher Education (IDA).
- 262 263

264 A.2. Purpose and Use of the Information Collection

265

266 The primary purpose of this project is to test a marketing strategy that would encourage adoption 267 of the SCC by colleges and universities throughout the U.S. Lenk and colleagues (2012) found 268 that institutions of higher education were slow to adopt recommendations in a report on college 269 student drinking by the National Institute on Alcohol Abuse and Alcoholism (2002). The 270 content of the survey questionnaire is designed to follow the hypothesized steps that the 271 respondents (key informants) may have taken in response to receiving the email message that 272 introduced the Safer Campuses and Communities program. They will be asked if they remember 273 receiving the invitation, whether they forwarded it to others, whether they saw value in the SCC 274 website and materials supplied, what attitudes they have about SCC and their perception of 275 support from others in their community. The items in the survey are also guided by theory of 276 adoption and dissemination. Thus, the questionnaire includes items about the perceived "fit" of 277 the program to the campus and the surrounding community, the perceived complexity and cost of 278 the program.

279 They will also be able to look at various characteristics of the colleges and universities (e.g.,

280 public vs. private) and gain some insight into who may become a "champion" for the

intervention, either by position (e.g., elected official) or by their perceptions or attitudes.

282

283

284

285 A.2 Privacy Impact Assessment

- 286 Identifiers provided from the IDA database will include name, title and email address. At no
- time will CDC have any access to identifiable data. PIRE will only provide summary data to
- 288 CDC in the form of a final report. PIRE will not share any information obtained from the IDA
- 289 with CDC. In order to characterize the composition of the respondents, the professional
- affiliations and characteristics of the colleges represented will be shared with CDC as part of the
- analysis performed for the summary report. The survey database of responses will use numerical
- identifiers and the contact information will be separated from the responses. Personal identifiers,
- including contact information will be stored in a separate database, which will be destroyed
 within 6 months of completing the survey. The de-identified response data will be maintained
- 294 Within 6 months of completing the survey. The de-identified response data will be ma
- 295 for 3 years after completion of the project.
- 296 Only persons who respond back to PIRE after receiving the marketing email in Phase 3 will be
- 297 invited to complete the evaluation survey. The survey questionnaire will not ask respondents
- 298 questions regarding personal behavior, only professional affiliation data will be collected;
- 299 therefore the impact on respondent's privacy will be minimal to none.

300 A.3. Use of Improved Information Technology and Burden Reduction

301

302 Electronic emails will be used to inform key personnel at the campus and surrounding

303 community of the SCC program, as well as provide a link to a website that gives more detailed

- 304 information organized around the key issues that likely determine a school's interest in the
- 305 program (e.g., information on cost, complexity, impact, etc.). Finally, an online survey with
- 306 these same key personnel will be conducted over the internet to further reduce the burden on

307 subjects. All responses collected will be via the same electronic survey questionnaire

308 (Attachment C). No aspect of the project will involve printed materials.

309 A.4. Efforts to Identify Duplication and Use of Similar Information

310

311 Literature searches (conducted via PubMed, ISI Web of Knowledge and Google Scholar), and

312 consultations with experts in college student drinking prevention and research indicates that there

313 has been no study or data collection effort to determine the perspectives of different campus and

314 community stakeholders with respect to the variety of barriers and challenges that colleges and

universities may face as they consider adopting the SCC to reduce alcohol-related problems in

316 their community.317

318 A.5. Impact on Small Businesses or Other Small Entities

319

320 One target audience of the survey will be community leaders. Community leaders will comprise 321 a mix of participants from both small and large sized organizations and businesses. The burden

322 on community leaders representing small businesses or other small entities will be minimal.

323

324 A.6. Consequences of Collecting the Information Less Frequently

325

326 All respondents in the online survey will be asked to provide information only once for this

- 327 study. There is a need to develop more efficient and timely strategies for moving effective
- 328 science to the widespread practice of preventing alcohol abuse on college campuses throughout
- 329 the United States. The online survey will assess the reach of and response to the newly

330 331 332 333 334	developed marketing materials, which may aid in the dissemination of a comprehensive environmental alcohol prevention program on college campuses. This work is essential toward meeting the goal of reducing intoxication, alcohol-impaired driving, and other alcohol harms among college students.				
335 336	A.7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5				
337	This request fully complies with the regulation 5 CFR 1320.5.				
338 339 340	A.8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside Agency				
341 342 343 344	A. The 60-day Federal Register Notice was published in the Federal Register on July 24, 2012, vol. 77, No. 142; pp. 43287-88 (see Attachment B). One non-substantive public comment was received (See Attachment D). CDC's standard response was sent.				
345 346 347	B. Researchers familiar with college student prevention and translational research were consulted over a period from late 2011 through early 2012. Those experts included the following:				
348	Robert Saltz, Ph.D.				
349	Prevention Research Center, PIRE				
350	510 883-5733				
351	<u>saltz@prev.org</u>				
352	William DeJong, Ph.D.				
353	Boston University				
354	617 414-1393				
355	wdejong@bu.edu				
356	Toben Nelson, Ph.D.				
357	University of Minnesota				
358	612-626-9791				
359	<u>tfnelson@umn.edu</u>				
360	Mark Wolfson, Ph.D.				
361	Wake Forest University				
362	336-716-0380				
363	mwolfson@wfubmc.edu				
364	Ralph Hingson, ScD.				
365	National Institute on Alcohol Abuse and Alcoholism				
366	301-443-1274				
367	<u>rhingson@mail.nih.gov</u>				
368	Barbara Ryan				
369	Silver Gate Group				

370 (619) 294-3319

371 <u>bryan@silvergategroup.com</u>

There were no significant problems in obtaining their judgment and advice concerning
the proposed data collection.

375 **A.9. Explanation of Any Payment or Gift to Respondents.**

376

There will be no monetary incentive or payment to respondents. We will offer to send results ofthe survey to those who may be interested in receiving them.

379

380 A.10. Assurance of Confidentiality Provided to Respondents.

381 382 The Silver Gate Group will maintain the database containing names, positions, and addresses of 383 participants and securely store the information gathered from the online survey. No identifiers 384 will be stored with the survey data, and the (separate) database of contact information for survey 385 participants will be destroyed six months after the survey has been completed. The de-identified 386 response data will be maintained for 3 years after completion of the project.

387

388 While respondents will be known by name and email address in order to send them a link to the

- 389 on-line survey questionnaire, the contact information will be kept separate from the responses to
- the questionnaire. It will not be possible to link a response to a subject's identity from noting the department or agency they work in. None of the questions in the survey ask about the subject's
- 392 own personal behavior, so the risk of harm to respondents is very low.
- 393

394 Data will be treated in a secure manner and will not be disclosed, unless otherwise compelled by 395 law. De-identified responses will be owned and stored by the Pacific Institute for Research and

396 Evaluation (PIRE) and accessed only by the research staff assigned to this project. None of the

397 staff will have access to the dataset that links responses to the contact information. Thus, it will

398 be impossible for anyone at PIRE to know the identity of any specific respondent's responses.

399

400 A copy of the Local IRB approval notice is included as **Attachment E**.

401 A.10 Privacy Impact Assessment Information

- 402 A. This project is not subject to the Privacy Act. A system of records will not be maintained
 403 by the contractor beyond the life of the project.
- B. Collected data will be stored on password-protected computers. The contractor and
 subcontractor will store personal identifiable information and response data in separate
 databases. No contact information will be transmitted to CDC. The file that links contact
 information to arbitrary identification numbers in the dataset of responses will only be
 available to the subcontractor (not to PIRE) and will be destroyed within 6 months of
 when data collection is complete.
- 410
- 411 C. Data will be treated in a secure manner and will not be disclosed, unless otherwise
- 412 compelled by law

- 413
- D. Respondents will be informed of the intended purpose of the collected data and assured that information will be treated in a secure manner. Respondents will also be informed of the voluntary nature of the study and their ability to withdraw from the study the study at any time. All respondents have a right to refuse to answer any questions contained in the survey (Attachment F).
- 419420 E. Consent will not be sought for this study.
- 421

422 **A.11. Justification for Sensitive Questions**

- 423 The online survey does not contain questions of a sensitive nature.
- 424

425 A.12. Estimates of Annualized Burden Hours and Cost

- 426 This data collection for the evaluation of the marketing strategy involves an electronic online427 survey with reminders to non-respondents.
- 428 The SCC marketing strategy recruits key informants who are interested in reducing alcohol-
- 429 related harm among college students in their communities. To evaluate the reach of and
- 430 response to the marketing strategy, individuals from 160 selected colleges and surrounding
- 431 communities who expressed an interest in reducing alcohol-related harm in their community will
- 432 be invited to complete an online survey.
- 433
- The respondents targeted are upper-level administrators such as vice-presidents; campus and
- 435 municipal police, and community leaders. A maximum 12 individuals will be invited to
 436 participate from each of the 160 selected colleges or universities, with a maximum of 1800 t
- participate from each of the 160 selected colleges or universities, with a maximum of 1800 total
 survey participants. Contacts will be limited to on-campus administrators, city officials, and
- 438 community leaders. The amount of time required for a respondent to take part in the online
- 439 survey is estimated to be 20 minutes.
- 440

441 A.12.A. Burden

- 442
- 443 Table A.12- Estimate of Annual Burden Hours.
- 444

Type of	Form Name	Number of	Number of	Average	Total Burden
Respondent		Respondents	Responses per	Burden per	Hours
			Respondent	Respondent	
				(in hours)	
College	CDC				
Administrator	Questionnaire	600	1	20/60	200
	(Attachment C)				
Police officer	CDC				
	Questionnaire	600	1	20/60	200
	(Attachment C)				
Community	CDC	600	1	20/60	200
Leader	Questionnaire				

	(Attachment C)		
Total burden			600
hours			600

445

- 446 A.12.B. Estimated Annualized Burden Cost
- 447
- 448 In total, we expect that 600 college administrators, 600 police officers, and 600 community
- 449 leaders will complete the online survey, resulting in a burden of 600 hours. Hourly wages are
- 450 estimated to be as follows: college administrators (\$44.00), police officers (\$38.00), and
- 451 community leaders (\$24.00), resulting in a total respondent cost of \$21,200. The total estimated
- 452 annualized cost is \$61,517. Our calculations were made based on the average hourly wage rates
- 453 presented in Table A.12.B. Source: Bureau of Labor Statistics, U.S. Department of Labor, May
- 454 2012 http://www.bls.gov/oes/oes_data.htm
- 455

Type of	Form Name	Total Burden	Hourly Wage	Total
Respondent		Hours	Rate	Respondent
				Cost
College	CDC			
Administrator	Questionnaire	200	\$44.00	\$8,800
	(Attachment C)			
Police Officer	CDC			
	Questionnaire	200	\$38.00	\$7,600
	(Attachment C)			
Community	CDC			
Leader	Questionnaire	200	\$24.00	\$4,800
	(Attachment C)			
Total burden	CDC			
cost	Questionnaire			\$21,200
	(Attachment C)			

456

457 **A.13. Estimates of Other Total Annual Cost Burden to Respondents or Record keepers.**

458

There are no costs to respondents other than their time for participating in the online survey.

461 A.14. Annualized Cost to the Government.

462

463 The one-time cost for the online survey includes web page development, instrument design and implementation, data collection, data analysis and reporting. Web page development, instrument 464 465 design, data analysis and reporting will be implemented by PIRE and overseen by CDC. Data collection will be accomplished via the website maintained by the Silver Gate Group and 466 overseen by PIRE and the CDC technical monitor. The online survey and analyses will be 467 conducted over the next 12 months following the OMB review. The costs to the government 468 469 include the costs of the contractor, the CDC Technical Monitor and the CDC Project Officer, both of whom will oversee the contractor's efforts. The estimated costs reflect the costs outlined 470

470 both of whom will oversee the contractor's enorts. The estimated costs reflect the costs outlined 471 in the contractor's budget and 48 hours of a CDC FTE (average grade 13/15) for oversight of the

472 data collection. The costs are as follows:

473

474	Table A.14A.	Annualized Cost (one-time data collection from online survey responses)
475		

	Hours	Hourly Rate	Cost at Hourly Rate	Other Costs	Total
Silver Gate Group	550	\$71.44	\$39,292	\$3,426	\$42,718
PIRE Project Director	120	\$84.15	\$10,098	\$6,221	\$16,319
PIRE Research Associate	35	\$25.00	\$875	\$0	\$875
PIRE Program Director	35	\$45.85	\$1,605	\$0	\$1,605
CDC FTE	48	\$55	\$2,640	N/A	N/A
Total	788		\$54,510	\$9,647	\$61,517

476

477 A.15. Explanation for Program Changes or Adjustments

478

479 This is a new data collection.480

481 **A.16.** Plans for Tabulation and Publication and Project Time Schedule.

482 A.16.A. Tabulation and Analysis Plan

The analyses of the survey data will provide information that may determine where, along the hypothesized sequence of steps to adoption, the marketing strategy may have succeeded or failed. PIRE will also be able to look at various characteristics of the campuses (e.g. public vs. private) that may influence adoption. Finally, they hope to gain some insight into who may become a "champion" for the intervention, either by position (e.g., elected official) or by their perception or attitudes.

489

490 After an inspection of response patterns to identify errors in coding or file creation, the

491 substantive questions will be addressed through a set of regression analyses. A preliminary

492 model will be built to identify the type of respondent most likely to be a "champion" of the

493 intervention. PIRE is specifically interested in which departments may be most or least

494 favorable to the intervention, but whether non-college respondents may have a greater interest in

495 the intervention than college/university staff. The model would look for respondent

496 characteristics that would predict more favorable attitudes toward the intervention.

497

498

- 499 Table A.16-A 1. Time Schedule
- 500

Month 1-2 after OMB approval	Launch emails to random subset of 12	
	IHEs. Follow up as needed.	
Months 2-4 after OMB approval	Launch emails to 50 campuses.	

Months 4-6 after OMB approval	Launch remaining emails (N=98).
	Conduct evaluation survey with first set
	two sets of IHEs (N=62).
Months 7-9 after OMB approval	Conduct evaluation survey with remaining
	campuses.
Months 9-18 after OMB approval	Conduct analysis of entire survey data and
	write evaluation report.

501

503

505

507

502 CDC is requesting an 18-month OMB Approval.

504 A.17. Reason(s) Display of OMB Expiration Date is Inappropriate

506 The display of the OMB expiration date is not inappropriate.

508 **A.18. Exceptions to Certification for Paperwork Reduction Act Submissions.**

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- 510 There are no exceptions to the certification.
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513 <u>References</u>

- 514
- 515 Balas, E.A. & Noren, S.A. (2000). Managing clinical knowledge for health care improvement.
- 516 In J. Bemmel & A.T. McCray (Eds) Yearbook of Medical Informatics 2000: Patient-Centered 517 Systems, pp. 65-70. Stuttgart, Germany: Schattauer.
- 518
- Lenk, K.M, Erickson, D.J., Nelson, T.F., Winters, K.C., and Toomey, T.L. (2012). Alcohol
- 520 Policies and Practices Among Four-Year Colleges in the United States: Prevalence and Patterns.
- 521 J. Stud. Alcohol Drugs, 73, 361–367.
- 522
- 523 Maibach EW, Van Duyn MAS, Bloodgood B. A marketing perspective on disseminating
- evidence-based approaches to disease prevention and health promotion. Prev Chronic Dis [serialonline] 2006 Jul [4 Feb 2009]. Available from: URL:
- 525 Olimitej 2006 Jul [4 Feb 2009]. Available from: ORL:
- 526 http://www.cdc.gov/pcd/issues/2006/jul/05_0154.htm.
- 527 528
- 529 Saltz, R.F., Paschall, M.J., McGaffigan, R.P., & Nygaard, P.M.O. (2010) Alcohol Risk
- 530 Management in College Settings: The Safer California Universities Randomized Trial. American 531 Journal of Preventive Medicine, 39(6) 491–499.
- 532
- 533 Sogolow, E S, Sleet, DA, Saul, J. Dissemination, implementation and widespread use of injury
- 534 prevention interventions. In Doll L, Bonzo S, Mercy J, Sleet D (Eds). Handbook of injury and
- violence prevention. New York: Springer, 2007. p. 493-510.