

Training and Technical Assistance Campaign Message Testing

A. Product/Activity to be Assessed

The Center for Mental Health Services (CMHS) of the Substance Abuse and Mental Health Services Administration (SAMHSA) is requesting OMB approval for two new interview tools: **IN-DEPTH INTERVIEWS WITH REPRESENTATIVES OF SYSTEM OF CARE ORGANIZATIONS: INTERVIEWER'S GUIDE** (Attachment A) and **FOCUS GROUPS WITH REPRESENTATIVES OF CHILD-SERVING ORGANIZATIONS AND OTHERS: MODERATOR'S GUIDE** (Attachment B).

CMHS is responsible for the Children's Mental Health Initiative (CMHI). This initiative's purpose is to improve the behavioral health outcomes of children and youth with serious emotional disturbances and their families. This initiative supports broad-scale operation, expansion, and integration of systems of care through the creation of sustainable infrastructure that allows for the provision of and access to required services and supports that will allow the values, principles, and practices making up the system of care approach to become the primary way in which children's mental health services are delivered throughout the nation.

CMHS provides funded communities with a range of support, including assistance with social marketing strategies through the Caring for Every Child's Mental Health Campaign (the Campaign). The proposed interview tools will be used to assess the current needs of funded communities with respect to social marketing through in-depth interviews and focus groups. The information gained will provide guidance to CMHS in developing social marketing materials, technical assistance, and training programs for funded communities.

Materials, technical assistance, and training in social marketing are important to the success of systems of care, enabling funded communities to:

- Raise awareness about the importance of children's mental health and demonstrate that positive mental is essential to a child's healthy development;
- Promote the importance and role of children's mental health;
- Promote social inclusion of children, youth, and emerging adults with behavioral health challenges;
- Demonstrate that these behavioral health needs are best met through systems of care; and
- Build community capacity for sustaining system of care values, services, and supports.

TTA Provider	Description of Services	Segment of the Population Served
SAMHSA's Caring for Every Child's Mental Health Initiative	This initiative's purpose is to improve the behavioral health outcomes of children and youth with serious emotional disturbances and their families. This initiative supports broad-scale operation, expansion, and integration of systems of care through the creation of sustainable infrastructure that allows for the provision of and access to required services and supports that will allow the values, principles, and practices making up the system of care approach to become the primary way in which children's mental health services are delivered throughout the nation.	States, Tribes, Jurisdictions (STJ) and their sub-recipient communities

B. Brief Statement of Objectives

The overall goal for the proposed interviews and focus groups is to obtain perspectives from currently funded communities on how the Campaign can best support the communities' social marketing and communications goals and initiatives.

- Specific objectives are to obtain guidance for developing the Campaign's social marketing plan.

The two interview tools are tailored to two different groups within system of care communities:

- System of care organization members (the "internal group"), and
- Community partners and stakeholders with whom the organization works (the "external groups").

The internal group interviewees are the system of care's project director, communications contact, family representative, and youth representative or contact. They will be asked to participate in in-depth interviews. The purpose of those interviews is to assess each organization's capacity, attitudes, and challenges in carrying out social marketing activities.

The external group participants include representatives of faith-based groups and businesses. Faith-based groups and businesses are two groups which have been identified by grantees and program partners as priority groups for outreach. They will be asked to participate in focus groups, the purpose of which is to assess the broader community's knowledge base and level of support for addressing the mental health needs of children, youth, and families through systems of care.

Information gathered from the interviews and focus groups will be recorded and classified as strengths, weaknesses, opportunities, and threats (SWOT). CMHS will then review the SWOT data for:

- Trends, changes, and previously overlooked needs within the experienced system of care communities;
- Situations, barriers, or constraints in system of care communities;
- Resources or capabilities of the communities and the greater environment in which they operate; and
- Weaknesses or limitations that make system of care communities and their social marketing initiatives particularly vulnerable to identified environmental challenges.

The results will be used to revise and tailor activities and materials to the current needs and goals of local system of care communities. CMHS will use the results to draft the Campaign’s social marketing plan and to develop training and technical assistance offerings for funded communities.

C. Overview of Methods to Collect Information

Data Collection Method

The information will be gathered by telephone (in-depth interviews) and online (in-depth interviews and focus groups).

The majority of the in-depth interviews will be conducted by telephone and online via Adobe Connect or a similar software, rather than in person, because of budget constraints. The system of care communities are located around the country, and to obtain data from a cross-section of communities, it is necessary to conduct interviews in many different geographic locations. The cost of travel to many different locations would be prohibitive. In-depth interviews conducted by telephone will take somewhat less time than in-person interviews, and can be scheduled and rearranged with more flexibility than in-person interviews to suit respondents’ needs.

Collecting the information in written form—through the mail or electronically—would both increase the burden on respondents and decrease the practical utility of the information gathered. The information requested is both broad and in-depth and depends on prompts and probes from the interviewer; open-ended questions are used to elicit opinions and reactions. To respond to the survey instrument in writing would require long, essay-type answers, and would be more time-consuming than in-person or telephone interviews.

Identifying respondents

There are currently 90 funded system of care grants, 9 of which are planning grants. From the remaining 81 sites in this respondent universe, CMHS will select 15 sites that provide a cross-section of characteristics; e.g., racial/ethnic populations, geographic location, population density, years of experience with system of care, and types of local partners.

Once communities have been identified, CMHS will work with each one’s project director and communications contact to identify and contact participants. Social marketing technical assistance specialists, who maintain close contact with each of the communities, will work with the system of care’s communications specialist and/or project director to identify and recruit participants for the interviews and focus groups.

In-depth interviews will be conducted by telephone with representatives of system of care organizations (the “internal group” described above).

Telephone interviews will be held with 4 individuals in each of 15 funded communities. Interviewees will be the system of care project director, the communications/social marketing coordinator or contact, the family representative or contact, and the youth representative or contact.

Focus groups will be held by Adobe Connect or a similar software with representatives of child-serving and other organizations in the communities, including business associations and faith-based organizations. The participants in the in-depth interviews from the system of care grants will help select some of the focus group participants.

Frequency of data collection

Each respondent will be asked to respond only once.

Methods for Identifying Duplications

The information needed is specific to this program's social marketing campaign and is not collected anywhere else.

D. Annualized Response Burden Estimate

Participant	Number of respondents	Responses per respondent	Total Number of Responses	Hours/ response	Total hours	Hourly Wage ¹	Total Hour Cost
SOC Interview Participants	60	1	60	1.5	90	28.95	2,605.50
Focus Group Participants	36	1	36	1.5	54	28.95	1,563.30
TOTAL	96		96		144		4,168.80

The estimated annualized cost to respondents for the proposed data collection activities is \$4,168.80. For the purposes of estimating annual cost, it is assumed that the participants will complete each survey once. The average burden was estimated based on independent review of the survey by contractor and Federal staff.

Estimates of Annualized Cost to the Government

The estimate annualized cost to the government for the proposed data collection activities is \$36,362 and includes the cost to the contract as well as the GPO cost.

Position	Percent FTE	Annual Hours	Rate	Total Annual Cost
CMHI GPO		40	\$59.40/hr	\$2,376
Contractor(s) NASMHPD Contract	–	n/a	n/a	\$29,817
Totals	<i>varies</i>	<i>varies</i>	<i>varies</i>	\$32,193

E. Methods used to develop the questions

Questions similar to those in the first interview tools have been asked of a small number (fewer than nine people) of system of care staff members in the course of technical assistance calls.

¹? Hourly Wage: Using one urban, one rural and one Tribal grantee site, average hourly salary for SOC grantees was determined to be \$28.95 an hour, with annual hours based on a 40-hour work week.

². CMHI GPO is Grade 14 at \$59.40 per hour.

The discussion topics in the second interview tool, for use with community partners, are similar to those raised in working groups with community partners in the course of planning social marketing strategies for the Campaign.

F. Consultants within SAMHSA/ CMHS and outside the Agency

The common measures submitted here for OMB approval are the result of lengthy consultation and discussion among SAMHSA/CMHS personnel, and raining and TA contract representatives. See Attachment C for staff and consultants involved. The final selection of these measures was made by SAMHSA/CMHS senior officials.

Statistical Consultants

Project Officer: Lisa Rubenstein, SAMHSA/CMHS/Child, Adolescent and Family Branch,
240-276-1927

Contractor/Project Director: Maria Rodriguez, Vanguard Communications, 202-331-4323

Other Consultation Outside the Agency

The instruments have been submitted to two experts for review:

Barbara Huff
Family Outreach Director, Caring for Every Child's Mental Health Campaign
Federation of Families for Children's Mental Health
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Lacy Kendrick-Burk
Youth Specialist, Caring for Every Child's Mental Health Campaign
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List of Attachments:

**Attachment A: In-Depth Interviews with Representatives of System of Care Organizations:
Interviewer's Guide**

**Attachment B: Focus Groups with Representatives of Child-Serving Organizations and Others:
Moderator's Guide**