

SAMHSA Disaster Technical Assistance Center Disaster Behavioral Health Needs Assessment and Customer Satisfaction Survey Supporting Statement

B. Statistical Methods

B1. Respondent Universe and Sampling Methods

Disaster Behavioral Health Needs Assessment Survey—State/Territory Version. State and territory disaster behavioral health coordinators from all 50 states, the U.S. territories, and the District of Columbia will be asked to participate in the **NAS—State/Territory Version**, which will be administered first.

Disaster Behavioral Health Needs Assessment Survey—Local Provider Version. SAMHSA DTAC will ask all state and territory coordinators to provide contact information for up to 10 local providers from their jurisdictions. All local providers for whom contact information is provided will be asked to participate in the **NAS—Local Provider Version**.

Disaster Behavioral Health Needs Assessment Follow-Up Interviews. Up to 25 state and territory disaster behavioral health coordinators who are invited to participate in the **NAS—State/Territory Version** will be asked to participate in the **NAFI**, and up to 25 local providers who are invited to participate in the **NAS—Local Provider Version** will be asked to participate in the **NAFI**. These individuals will be selected in such a manner as to obtain representation from various participants of various state and territory demographics, such as geographic region or frequency of disasters.

SAMHSA DTAC Customer Satisfaction Survey. Participation in the **CSS** will be solicited from all 50 states, the U.S. territories, and the District of Columbia. Prior to data collection, the SAMHSA DTAC database will be reviewed to generate a list of participants. The initial **CSS** and one followup **CSS** were administered under the current OMB approval. Respondents for subsequent administrations of the **CSS** will include those who have requested TA within the 6 months prior to survey administration and those who are subscribed to SAMHSA DTAC's e-communication resources, the *SAMHSA DTAC Bulletin* or *The Dialogue*, at the time of survey administration. Individuals who participated in the previous administration will be excluded from the data collection, so as to minimize respondent burden by not requesting participation in two consecutive survey administrations; participation in a previous administration of the **CSS** (i.e., any administration except for the most recent one prior to the current administration) will not make an individual ineligible to participate in the current administration. The sample contact list will be checked before each survey administration to ensure that such individuals are removed from the list prior to sending any communication to the study sample regarding the survey.

B2. Procedures for Collection of Information

The SAMHSA DTAC survey team will be responsible for managing all data collection instruments.

Disaster Behavioral Health Needs Assessment Survey—State/Territory Version. The SAMHSA DTAC survey team will update the participant contact database prior to survey administration. Two weeks prior to launch, the SAMHSA DTAC Federal Project Officer will send an email to all prospective participants, informing them of the survey. SAMHSA DTAC will send

an email invitation to all prospective participants, with a link to the web survey and information on the purpose of the survey. The first page of the survey will contain the consent to participate form that participants will be required to read and agree to before participating. This form will contain language about voluntary participation. Only participants who agree to participate by checking the “Start Survey” box on the survey landing page will be directed to the survey. Followup reminder emails will be sent to study participants who have not yet completed the survey, as needed during the data collection period.

The population size for the **NAS—State/Territory Version** is 77, and the entire population will be administered the survey (i.e., it will be a census). State and territory DBH coordinators are state/territory employees who, among other responsibilities, are involved in DBH planning and response. It is anticipated that survey participants will complete the survey during work hours and while sitting in their workspaces. The decision to take a census rather than a sample was influenced by the small size of this population and the frequency with which coordinator contact information is updated (monthly).

Disaster Behavioral Health Needs Assessment Survey—Local Provider Version. Following the **NAS—State/Territory Version**, the SAMHSA DTAC survey team will follow up with all coordinators who complete the survey to request contact information for up to 10 local providers from their jurisdictions. This new contact information will be stored in a limited-access database and used to repeat the survey administration process for the **NAS—Local Provider Version**. Two weeks prior to launch, the SAMHSA DTAC Federal Project Officer will send an email to all prospective participants, informing them of the survey. SAMHSA DTAC will send an email invitation to all prospective participants, with a link to the web survey and information on the purpose of the survey. The first page of the survey will contain the consent to participate form that participants will be required to read and agree to before participating. This form will contain language about voluntary participation. Only participants who agree to participate by checking the “Start Survey” box on the survey landing page will be directed to the survey. Followup reminder emails will be sent to study participants who have not yet completed the survey, as needed during the data collection period.

The population for the **NAS—Local Provider Version** is greater than 1,000; however, SAMHSA DTAC expects to administer the assessment to a sample of 150–300 participants, depending on the number of contacts received from state and territory coordinators. Local providers are employees of for-profit or not-for-profit organizations who are involved with, among other responsibilities, DBH preparedness and response. Contact information for this sample will be obtained from the DBH programs in the states/territories in which the local providers operate. All state and territory coordinators who complete the **NAS—State/Territory Version** will be asked to provide contact information for up to 10 local providers from their jurisdictions. It is anticipated that survey participants will complete the survey during work hours and while sitting in their workspaces. Based on the previous administration, SAMHSA DTAC anticipates some state and territory coordinators providing contact information for several local providers, with others providing information for only one local provider. Taking this into account, SAMHSA DTAC anticipates receiving contact information for around 250 local providers. This contact information will be used to administer the **NAS—Local Provider Version**.

Disaster Behavioral Health Needs Assessment Follow-Up Interview. Up to 25 state and territory disaster behavioral health coordinators who are invited to participate in the **NAS—State/Territory Version** will be asked to participate in the **NAFI**, and up to 25 local providers who are invited to participate in the **NAS—Local Provider Version** will be asked to participate in the **NAFI**. These individuals will be selected in such a manner as to obtain representation

from various participants of various state/territory demographics, such as geographic region or frequency of disasters. Potential participants will be contacted by telephone and email and asked to participate in a 30–45 minute interview. Confirmation and reminder emails will be sent once the interview has been scheduled. Interviews will be scheduled during work hours. It is anticipated that participants will complete the interviews while sitting in their workspaces. Interviews will be conducted by telephone using a toll-free call-in number. In addition to the interviewer and the participant, another member of the SAMHSA DTAC survey team will be on the line to record the conversation. If participants provide consent to record, a recording of the interview will also be used. The interview will begin with language regarding the purpose of the survey and voluntary participation. Participants will be required to provide verbal consent to participate before continuing with the interview. Only participants who agree to participate will be allowed to continue with the interview.

SAMHSA DTAC Customer Satisfaction Survey. The **CSS** will be a census of those who have requested TA within the pre-determined timeframe and of those subscribed to SAMHSA DTAC's e-communication resources, the *SAMHSA DTAC Bulletin* or *The Dialogue*, with the removal of those who participated in the preceding administration of the **CSS**. The lists of potential respondents will be generated from the SAMSHA DTAC TA database and lists of subscribers to the *SAMHSA DTAC Bulletin* and *The Dialogue*. The two lists will be compared, and duplicate entries will be removed. One week prior to launch, a SAMHSA DTAC Federal Project Officer will send a pre-notification email to all prospective participants, informing them of the upcoming survey. Upon survey launch, an email will be sent to all prospective participants, with a link to the web survey and information on the purpose of the survey. The first page of the survey will contain the consent to participate form that participants will be required to read and agree to before participating. This form will contain language about voluntary participation. Only participants who agree to participate by checking the "Start Survey" box on the survey landing page will be directed to the survey. Followup reminder emails will be sent to study participants who have not yet completed the survey, as needed during the data collection period.

B3. Methods to Maximize Response

Disaster Behavioral Health Needs Assessment Survey—State/Territory Version. Several steps will be taken to increase the survey response rate. These include email notifications and reminder emails, a customized introductory email with the survey link, functionality to start and stop the survey without losing responses, and a survey helpdesk to assist with technical questions. To maximize accessibility, the assessment will remain open for one month. A paper version of the survey will be available to anyone who requests it. Throughout the period that the survey is open, a survey helpdesk email address (DTACsurvey@icfi.com) will be available to respondents to address any questions they may have as they are completing the survey.

Based on the previous administrations of these surveys, a 50 percent response rate (39 participants) is expected for the **NAS—State/Territory Version**. This estimate accounts for the heavy workload associated with the state and territory coordinator positions and the responsibilities that many of these individuals have beyond DBH.

Disaster Behavioral Health Needs Assessment Survey—Local Provider Version. Several steps will be taken to increase the survey response rate. These include email notifications and reminder emails, a customized introductory email with the survey link, functionality to start and stop the survey without losing responses, and a survey helpdesk to assist with technical questions. To maximize accessibility, the assessment will remain open for one month. A paper version of the survey will be available to anyone who requests it. Throughout the period that the

survey is open, a survey helpdesk email address (DTACsurvey@icfi.com) will be available to respondents to address any questions they may have as they are completing the survey.

Based on the previous administrations of these surveys, a 20 percent response rate (50 participants) is expected for the **NAS—Local Provider Version**. This estimate accounts for the heavy workload associated with the local provider positions and the responsibilities that many of these individuals have beyond DBH.

Disaster Behavioral Health Needs Assessment Follow-Up Interviews. To maximize participation, the interviews will be scheduled over a one-month period. Confirmation and reminder emails will be sent to potential respondents to increase participation rates. Interviews will be scheduled Monday through Friday, from 8:00 a.m. to 5:30 p.m. ET to accommodate the business hours of most potential participants. Requests for other interview times will be handled on a case-by-case basis. Potential participants will be contacted by telephone and email and asked to participate in a 30–45 minute interview. Those contacted via email will be provided a telephone number and an email address to use in scheduling the interviews. Multiple contact attempts will be made. An individual will be available to respond to phone and email requests from 8:00 a.m. to 5:30 p.m. ET, Monday through Friday, and a voicemail will be set up to accommodate calls during non-business hours.

SAMHSA DTAC Customer Satisfaction Survey. To maximize accessibility, the survey will remain open for one month. Customized introductory emails with a survey link, functionality to start and stop the survey without losing responses, and reminder emails will be used to increase participation rates. A paper version of the survey will be available to anyone who requests it. Throughout the period that the survey is open, a survey helpdesk email address (DTACsurvey@icfi.com) will be available to participants to address any questions they may have as they are completing the survey.

B4. Tests of Procedures

The **NAS—State/Territory Version**, the **NAS—Local Provider Version**, and the **CSS** were all piloted by the ICF Survey Research Center with participants in similar environments and settings to the intended respondents. At that point, the data collection tools were refined to make them as clear as possible. In addition, all survey data collection, including recruitment notifications, have been reviewed by survey research methodologists and TA specialists for content and methodological review. All components were tested to determine average burden estimates. Questions in the **NAFI** that are specifically tied to **NAS** results will be developed after the data from the **NAS** administrations have been analyzed. The **NAFI** instrument will be piloted by the ICF Survey Research Center with participants similar to intended respondents and in similar environments and settings prior to administration.

B5. Statistical Consultants

SAMHSA DTAC has full responsibility for the development of the overall statistical design and assumes oversight responsibility for data collection and analysis. The individuals responsible for overseeing instrument design and data collection are the following:

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List of Attachments

Attachment A – Disaster Behavioral Health Needs Assessment

- A1 – Disaster Behavioral Health Needs Assessment Survey—State/Territory Version
- A2 – Disaster Behavioral Health Needs Assessment Survey—Local Provider Version
- A3 – Disaster Behavioral Health Needs Assessment Follow-Up Interview Guide

Attachment B – Customer Satisfaction Survey

- B1 – Customer Satisfaction Survey