# Concept Testing. "Talk. They Hear You" Public Service Announcement (PSAs) for Parents

#### A. Product Activity to be Assessed

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention, is requesting OMB approval for one new focus group tool consisting of the following:

- Focus Group Protocol (Attachment A)
- Focus Group Discussions (FGD) Recruitment and Screening (Attachment B)
- Release and Consent Form (Attachment C)
- FGD Facilitator Guide (Attachment D)

The last decade has seen an increased focus on preventing underage drinking in national and local policy, law enforcement efforts, and through campaigns, including the Substance Abuse and Mental Health Administration's (SAMHSA's) "Talk. They Hear You." Launched in 2013, this campaign helps raise awareness about the dangers of underage drinking, specifically engaging parents and caregivers of children ages 9-15 to take action ("talk to your children about the dangers of underage drinking") and increase their skills with modeling and support resources. This is a national campaign conducting ongoing implementation.

The "Talk. They Hear You." campaign hinges on the insight that a parent or caregiver talking to his/her children about the dangers of alcohol is an important factor in deterring underage alcohol consumption. Studies have shown that parents and other influencers have a significant influence on young people's decisions about alcohol consumption, especially when supportive and nurturing environments are created in which children can make their own decisions. In fact, about 80 percent of children feel that parents should have a say in whether they drink alcohol. A

Current "Talk. They Hear You." promotion channels and resources consist of public service announcements (PSAs); the Campaign's website, www.underagedrinking.samhsa.gov; tip sheets; social media; partnership networks; direct outreach; and a mobile application. These materials show parents using everyday opportunities to talk with their children about alcohol, to help reinforce the importance of starting the conversation about alcohol at an early age.

<sup>&</sup>lt;sup>1</sup> Nash, S. G., McQueen, A., & Bray, J. H. (2005). Pathways to adolescent alcohol use: Family environment, peer influence, and parental expectations. *Journal of Adolescent Health*, *37*(1), 19–28.

<sup>&</sup>lt;sup>2</sup> Barnes, G. M., Reifman, A. S., Farrell, M. P., & Dintcheff, B. A. (2000). The effects of parenting on the development of adolescent alcohol misuse: A six-wave latent growth model. *Journal of Marriage and Family*, *62*(1), 175–186.

<sup>&</sup>lt;sup>3</sup> Jackson, C. (2002). Perceived legitimacy of parental authority and tobacco and alcohol use during early adolescence. *Journal of Adolescent Health*, 31(5), 425–432.

<sup>&</sup>lt;sup>4</sup> Nash, S. G., McQueen, A., and Bray, J. H. (2005). Pathways to adolescent alcohol use: Family environment, peer influence, and parental expectations. *Journal of Adolescent Health*, 37(1), 19–28.

Materials have been created and provided to local organizations and partners to share with parents and community members, and using their feedback materials continue to be adapted for other partner needs including pre-crafted social media messages for account managers, blog posts, infographics, and newsletter articles.

"Talk. They Hear You." PSAs include print, radio, and video formats, with many materials available in both English and Spanish. Since launching in 2013, the campaign has garnered 6.36 billion PSA impressions and more than 6,489 mobile application downloads.

While some reductions in underage drinking rates have been observed in the last decade<sup>5</sup>, underage drinking remains a serious problem. Ten percent of 9- to 10-year-olds have already started drinking,<sup>6</sup> and more than 20 percent of underage drinkers begin drinking before age 13.<sup>7</sup> Studies have shown that underage drinkers tend to drink less often than adults, but they drink more heavily when they do drink: on average, underage drinkers consume 5 drinks per occasion, 5 times a month.<sup>8</sup> Underage drinking cost the citizens of the United States \$56.9 billion in 2013, including include medical care, work loss, and pain and suffering associated with the multiple problems resulting from the use of alcohol by youth.<sup>9</sup>

Our nation is at a turning point in how it addresses substance-related issues. The focal point of federal efforts is stemming the opioid overdose epidemic. Opioids were involved in 33,091 deaths in 2015—with 91 people dying every day—and opioid overdoses have quadrupled since 1999.<sup>10</sup> Marijuana legalization by states is another high-profile issue, especially in the West and Northeast. As of 2017, eight states and the District of Columbia have legalized adult recreational use of marijuana; many more have made medical marijuana legal.<sup>11</sup> The marijuana legalization movement is associated with significant longitudinal changes in adult attitudes and behaviors regarding use of this drug, as well as the forms and availability of marijuana.

Given the ongoing opioid epidemic and widespread changes in state policies on marijuana, SAMHSA will expand its "Talk. They Hear You. "" efforts to include other substances in addition

<sup>&</sup>lt;sup>5</sup> Substance Abuse and Mental Health Services Administration. (2013). Results from the 2012 National Survey on Drug Use and Health: Special Data Analysis. Center for Behavioral Health and Statistics and Quality. Rockville, MD: Substance Abuse and Mental Health Services Administration.

<sup>&</sup>lt;sup>6</sup> Donovan, J. E. (2007). Really underage drinkers: The epidemiology of children's alcohol use in the United States. Prevention Science, 8(3),192-205.

<sup>&</sup>lt;sup>7</sup> Centers for Disease Control and Prevention. (2012). Youth risk behavior surveillance—United States, 2011. Surveillance Summaries. Morbidity and Mortality Weekly Report, 61, SS-4, 1–162.3

<sup>&</sup>lt;sup>8</sup> Substance Abuse and Mental Health Services Administration. (2013c). Results from the 2012 National Survey on Drug Use and Health: Special Data Analysis. Center for Behavioral Health and Statistics and Quality. Rockville, MD: Substance Abuse and Mental Health Services

<sup>&</sup>lt;sup>9</sup> Taylor DM, Miller TR. (2015). Methodology: Underage Drinking Fact Sheets. Calverton, MD: PIRE, http://www.udetc.org/documents/Underage-Cost-Methods-082807.pdf

<sup>&</sup>lt;sup>10</sup> Centers for Disease Control and Prevention. (2016, December). Understanding the epidemic. Available at <a href="https://www.cdc.gov/drugoverdose/epidemic/index.html">https://www.cdc.gov/drugoverdose/epidemic/index.html</a> (accessed August 25, 2017).

<sup>&</sup>lt;sup>11</sup> Lopez, M.F. (2017, February 15). Marijuana Policy Research Program: Understanding the Impact of a Rapidly Shifting Environment. Presentation to the National Advisory Council on Drug Abuse Open Session.

to alcohol this year. Our team proposes hosting focus groups to test concepts for a new PSA to be promoted to parents of 9- to 15-year-olds.

### **B. Brief Statement of Objectives**

The overall objective of the focus groups is to test four newly developed concepts for PSAs that target parents and caregivers of children ages 9-15 for the "Talk. They Hear You." Campaign. The focus groups will help inform SAMHSA on which concept best resonates with the target population. Concept testing among parents will determine whether concepts are effective at conveying the importance of talking to kids about underage drinking and other substance use, and how parents can have these tough conversations with their children. The information derived from the focus groups will help improve the concepts and guide developers in making them more memorable, understandable, relevant, and appealing to parents. Focus group results will provide a solid foundation on which to develop the Campaign's new public service announcement and accompanying materials. Input from the target audience is a critical part of the PSA and materials development process and will inform the refinement of messaging and development of a more relevant "Talk. They Hear You." Campaign.

#### C. Overview of Methods to Collect Information

### **Data Collection Method**

SAMHSA is seeking to conduct eight groups in four geographic locations with high concentrations of diverse families with children of 9 to 15 years of age. The locations for the focus groups will aim to recruit parents from diverse socio-economic, cultural, educational, and demographic backgrounds. Diversity in participants' backgrounds yields a comprehensive set of opinions, experiences, and feedback of the "Talk. They Hear You." campaign materials and products.

The eight proposed markets in which the focus groups will take place are: Virginia; Colorado; Washington; South Carolina; West Virginia; Florida; New Hampshire; New Mexico.

Each focus group will be 90 minutes long. The time breakdown for each focus group is the following:

- 5 minutes to pre-screen potential participants
- 90 minutes to read and sign consent forms and participate in introduction, guidelines, and group discussion

SAMHSA will provide recruitment and screening questionnaires to vendors to use in recruiting the focus group participants. This ensures the individuals participating in each group will meet the needs of the study. SAMHSA will also provide guidance on timing and set up for the groups and work with its vendors to meet or adjust the logistical requirements as needed.

## Identifying respondents and providing incentives

SAMHSA is looking to have a total of ninety-six (96) potential participants that will be prescreened prior to the focus groups (12 potential participants per focus group). Out of the 96 pre-screened potential participants, eighty (80) will be recruited and divided into eight (8) groups of ten (10), to participate in the 90-minute focus group sessions. One session will take place on each of the following states: Virginia; Colorado; Washington; South Carolina; West Virginia; Florida; New Hampshire; New Mexico.

- Participant recruitment will be based on the results of a screening questionnaire to be applied by: Eureka Facts
- Focus groups will be conducted preferably after work hours, based on potential participant's availability.
- At the beginning of each session, participants will complete a release/consent form of use of the information provided.
- To gain participants and reduce recruiting time and cost, SAMHSA will offer participants a \$50 gift card.

Participant's recruitment and session dates will be determined based on receipt of clearance and approval from OMB to proceed.

### **Frequency of Data Collection**

SAMHSA is seeking to conduct the proposed eight focus groups only one time. Each focus group will be 90 minutes long and each respondent will be asked to provide feedback as part of the overall conversation as well as to inform future efforts regarding targeting parents for the purposes of reducing and preventing underage drinking. The moderator will ensure all participants have an equal amount of time to participate.

### **Methods for Identifying Duplication**

The information needed is specific to the Campaign's messages and materials and is not collected anywhere else.

### D. Annualized Response Burden Estimate

Participant	No. of Respondent s	Respon ses per respond ent	Total Number of Respon ses	Hours per Respo nse	Total hour burde n	Wage per hour	Total hour cost
Individuals (Screening call to participate)	96	1	96	.08	7.68	0	0
Individuals (Focus Group participation)	80	1	80	1.5	120	\$35.00	\$4200. 00
Totals	96		176		127.68		\$4200. 00

The estimated annualized cost to respondents for the proposed data collection activities is \$4,200.00. For the purposes of estimating annual cost, it is assumed that the participants will participate once. The average burden was estimated based on independent review of the focus groups by the contractor and Federal staff.

### **Estimates of Annualized Cost to the Government**

The estimated annualized cost to the government for the proposed data collection activities is \$25,376 and includes the cost to the contract as well as the GPO cost.

Position	Percent	Annual	Rate	Total Annual Cost
	FTE	Hours		
CSAP GPO		40	\$59.40/hr	\$2,376
Contractor(s) -		n/a	n/a	\$23,000
Underage Drinking				
Prevention National				
Media Campaign for				
STOP ACT Contract				
Totals	varies	varies	varies	\$25,376

### E. Methods used to develop the questions

Questions similar to those in the moderator's guide have been asked to participants from focus groups for concept testing, to assess relevance and effectiveness of the campaign materials.

### F. Consultants within SAMHSA and outside the Agency

The common measures here for OMB approval are the result of lengthy consultation and discussion among SAMHSA personnel, and contract representatives. The final selection of these measures was made by SAMHSA senior officials.

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### **List of Attachments:**

Attachment A: Focus Group Protocol

Attachment B: FGD Recruitment and Screening

Attachment C: Release and Consent Form

Attachment D: FGD Facilitator Guide