Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0990-0459)

TITLE OF INFORMATION COLLECTION:

Substance Abuse and Mental Health Services Administration (SAMHSA)

Center for Substance Abuse Prevention

"Talk. They Hear You." Campaign Focus Groups for 2019 Public Service Announcements (PSA)

PURPOSE:

SAMHSA is requesting approval to conduct focus groups to test concepts for six new underage drinking and substance use prevention PSAs targeting parents with children under 21. The purpose of this data collection is to pretest up to 12 different concepts for the development of six PSAs aimed at increasing conversations about underage drinking and substance use prevention (with a focus on opioids, marijuana, and naloxone) between parents and their children. 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 demonstrating ways 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 PSAs 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.

DESCRIPTION OF RESPONDENTS:

Parents/caregivers of children under the age of 21

TIPE OF COLLECTION:	
[] Customer Comment Card/Complaint Form [] Usability Testing (e.g., Website or Software [X] Focus Group	[] Customer Satisfaction Survey [] Small Discussion Group [] Other:

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.

TABLE OF COLLECTION

- 2. The collection is low-burden for respondents and low-cost for the federal government.
- 3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
- 4. The results are not intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
- 6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name:	Robert M.	Vincent)
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To assist review, please provide answers to the following questions:

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? [] Yes [X] No
- 2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes [X] No
- 3. If Applicable, has a System or Records Notice been published? [] Yes [X] No

Gifts or Payments:

Is an incentive (e.g., money, reimbursement of expenses or token of appreciation) provided to participants? [X] Yes [] No If Yes, please describe the incentive and provide a justification for the amount.

To gain participants and reduce recruiting time and cost, SAMHSA will offer participants a \$50 gift card.

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Individuals (Screening call to participate)	144	.08	11.52
Individuals (Focus Group participation)	120	2	240
Totals	220		251.52

FEDERAL COST: The estimated annual cost to the federal government is \$34,376 (Note: Amount should include contractor costs if the contractor is involved in the survey/collection)

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?

[] Yes [X] No

If the answer is Yes, please provide a description of both below (or attach the sampling plan)? If the answer is No, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

SAMHSA will work with a focus group recruitment vendor to identify the potential group of respondents and will provide pre-screening questions to one hundred and forty-four (144) potential participants. Out of the 144 pre-screened potential participants, one hundred and twenty (120) will be recruited and divided into twelve (12) groups of ten (10), to participate in the 120minute focus group sessions. Each focus group will test two of the 12 concepts to identify the six preferred concepts total.

1.	How will you collect the information? (Check all that apply)
	[] Web-based or other forms of social media.
	[] Telephone.

	[X] In-person.	
	[] Mail.	
	[] Other, explain.	
2.	Will interviewers or facilitators be used?	[X] Yes [] No

Please make sure that all survey materials, instructions and scripts are submitted with the request.

Instructions for completing Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback"

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other surveys under the generic clearance, you must complete a form for each survey.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions.

Gifts or Payments: If you answer 'yes' to the question, please describe the incentive and provide a justification for the amount. For example, explain the need for incentives to improve response rates, validity and reliability; describe higher out-of-pocket costs to respondent or unusual demands; provide data showing impact of incentives on response rates and survey responses; demonstrate need due to special populations.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) individuals or households; (2) private sector; (3) state, local or tribal governments; or (4) federal government. Only one type of respondent can be selected.

No. of Respondents: Provide an estimate of the Number of respondents.

Participation Time: Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the annual burden hours: Multiply the number of responses and the participation time and divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the federal government.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

- Describe how you plan to identify your potential group of respondents and how you will select them. If the answer is Yes, to the first question, you may provide the sampling plan in an attachment.
- Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

Please make sure all survey materials such as interview/survey questions, scripts, etc are submitted with the request. See next page for the Survey Materials Template.

TEMPLATE for Survey Materials This TEMPLATE contains the OMB No/Exp Date Header and Burden Hour Statement Footer that Must appear on the First Page of the Survey Materials Exactly as Shown

NOTE: Survey Materials consists of information that will be used for your collection such as interview/focus group questions, survey questions, customer comment card, communication product messages, communication product mock-up, etc (i.e., if you want feedback about a brochure, screen shots/messaging must be provided; if you are conducting a focus group, the script/questions for the focus group facilitator or participants must be provided)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-0459. The time required to complete this information collection is estimated to average 10 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer