**Underage Drinking Prevention’s “Talk. They Hear You.”® Campaign Parent Questionnaire**

**Supporting Statement, Part A**

# Justification

1. **Circumstances of Information Collection**

The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) is requesting approval from the Office of Management and Budget (OMB) for a new information collection associated with the “Talk. They Hear You.”**®** media campaign. Information will be collected from parents/caregivers of 9- to 20-year-old children in order to gather feedback about “Talk. They Hear You.” campaign products. This information will be used to improve current “Talk. They Hear You.” materials and to provide guidance for future development.

1. **Background**

Despite laws prohibiting the consumption of alcohol by individuals under 21 years of age in all 50 states, underage drinking in the United States remains a pervasive threat to public health and safety. Alcohol is the most widely misused substance among youths in the United States,[[1]](#footnote-1),[[2]](#footnote-2) with significant adverse consequences. Approximately 10 percent of youths aged 9–10 report having consumed more than a few sips of alcohol,[[3]](#footnote-3) and by age 15, 50 percent of youths report having consumed an entire alcoholic beverage.[[4]](#footnote-4) Adolescent drinkers are more likely than adults to engage in binge drinking and are at increased risk of physical and sexual assault, academic problems, drug use, and physical illness or death due to alcohol poisoning.[[5]](#footnote-5) In addition, consumption of alcohol during a time of critical brain development may increase alcohol consumption and dependence in adulthood.[[6]](#footnote-6)

Parental attitudes toward drinking, as well as parental communication, have a significant influence on adolescent alcohol use, particularly among younger adolescents.[[7]](#footnote-7),[[8]](#footnote-8) Through a direct association with adolescent perceptions and cognition, parental beliefs and communication about the acceptability of underage drinking may positively impact use of alcohol by youths.[[9]](#footnote-9) Taken together, the evidence cited here suggests that parental interaction with youths regarding underage drinking may provide a unique opportunity for early intervention and prevention.

In 2006, Congress passed the Sober Truth on Preventing Underage Drinking Act (STOP Act),[[10]](#footnote-10) the first comprehensive national legislation designed to address the problem of underage drinking. The Act mandates a coordinated, multifaceted approach to preventing and reducing underage drinking through modifying the enforcement of drinking laws, reducing availability of alcohol to adolescents, increasing evaluation and resources for state and local efforts, and conducting an adult-oriented media campaign. Under Section 2(d), the STOP Act directs the Secretary of the U.S. Department of Health and Human Services (HHS) to fund and oversee a national, adult-oriented earned media public service campaign and to report annually on the production, broadcasting, and evaluation of this campaign.

In response to the directives set forth in the STOP Act of 2006, SAMHSA CSAP created the “Talk. They Hear You.” Underage Drinking Prevention National Media Campaign. The campaign is designed to educate and empower parents and caregivers to talk with children about alcohol and other substances. *To prevent initiation of underage drinking and other substance use, the campaign targets have recently been expanded to include parents and caregivers of children ages 9–20 (up from age 15), with the following specific aims:*

* increasing parent or caregiver awareness of and receptivity to campaign messages (knowledge);
* increasing parent or caregiver awareness of underage drinking and other substance use prevalence (knowledge);
* increasing parent or caregiver disapproval of underage drinking and other substance use (attitudes);
* increasing parent or caregiver knowledge, skills, and confidence in how to talk to their children about and prevent underage drinking and other substance use (attitudes); and
* increasing parent or caregiver actions to prevent underage drinking and other substance use by talking to their children about alcohol and other substances (behaviors).

The “Talk. They Hear You.” campaign is designed to add to parents’ existing knowledge base about underage drinking and other substance use prevention, and to empower parents to address the issues by increasing their level of comfort with the topics and encouraging open communication between them and their children. During campaign development, parents, youths, and stakeholders provided feedback on all aspects of concept and message development. In 2012, SAMHSA conducted a pilot project to test and refine campaign creative materials and objectives. In 2013, SAMHSA launched the “Talk. They Hear You.” campaign to help parents talk to children ages 9–15 about the consequences of underage drinking and introduce skills to help their children avoid situations that result in drinking. This is a national earned media campaign[[11]](#footnote-11) with an ongoing rollout period.

The “Talk. They Hear You.” materials consist of public service announcements (PSAs), video guides, infographics, movie trailers, a partner toolkit, a discussion starter video, a “Talk. They Hear You.” soundtrack, various branding components, a website, and a mobile application (app). These materials show parents using everyday opportunities to talk with their children about underage drinking and other substance use, and reinforce the importance of starting conversations about alcohol and other substances at an early age.

The “Talk. They Hear You.” PSAs include print, radio, and video versions, with many materials available in both English and Spanish. The PSAs were created and provided to partners to display and distribute to parents and community members, and these channels, in turn, generated feedback on campaign successes such as social media and blog posts, newsletter articles, and direct distribution of campaign materials. Since the 2013 launch, the “Talk. They Hear You.” campaign has garnered more than 6 billion impressions with $71 million in free ad space across broadcast TV stations, cable TV stations, radio outlets, print outlets, and community-based outlets nationwide.

The “Talk. They Hear You.” infographics educated parents and the media on the facts about underage drinking in a visually compelling way. Results from 2016 showed great promise in the upward trend of content sharing, engagement, and website traffic (underagedrinking.samhsa.gov). The website recorded more than 126,147 visitors, and garnered more than 289,236 page views. Social media messages shared on the SAMHSA Facebook and Twitter pages amassed more than 1,130 engagements (reactions, comments, and shares) so far in 2017.

The “Talk. They Hear You.” mobile app features an interactive simulation that uses avatars to help parents practice bringing up the topic of alcohol and other substances, learn the questions to ask, and get ideas for keeping the conversation going. In 2016, the campaign team implemented paid Facebook ads from March 16 to April 13 to promote the “Talk. They Hear You.” mobile app to target audiences. As a result of paid ads, the app was downloaded 551 times between March 16 and April 13—a 116 percent increase when compared to the previous 30 days. Ads generated more than 4 million impressions and drove more than 9,000 clicks to the app download page at SAMHSA.gov. As of October 2017, the “Talk. They Hear You.” mobile app has been downloaded 9,420 times.

In addition to developing and disseminating the “Talk. They Hear You.” campaign components, SAMHSA is also charged with evaluating the campaign. Although message testing during development indicated the potential impact of the materials, and media measures from partner distribution of materials of the campaign, there also needs to be an ongoing evaluation of campaign message effectiveness. SAMHSA’s evaluation design consists of a three-part evaluation mechanism: (1) an analysis of trends, (2) an annual parent questionnaire, and (3) supplemental case studies. The questionnaire for parents/caregivers of 9- to 20-year-old children, which is the current focus of this OMB application package, will examine various components of several “Talk. They Hear You.” campaign products and their potential impacts on parents’ knowledge, attitudes, and behaviors related to underage drinking.

**2. Purpose and Use of Information**

The overall objective of the Parent Questionnaire is to receive feedback from parents of children ages 9-20 on various creative components of the campaign. The primary intent is to gather information that can be used to improve current “Talk. They Hear You.” materials and to provide guidance for future development.  The questionnaire builds on the focus group testing already approved for “Talk. They Hear You.” development. Whereas the focus group efforts advance campaign concept and message development, and provide further insights about the intended “Talk. They Hear You” audience, the parent questionnaire activity proposed here will help to confirm the effectiveness of evolving and final campaign materials. Furthermore, the limited set of attitudinal and behavioral items being collected as part of this effort will support contextualization of audience feedback based on varied perspectives and communication behaviors related to underage drinking, other substance use, and tobacco product use. Analyses of these data will enable better understanding of the types of messaging that may be most impactful among specific subgroups of the parent population.

The proposed data collection includes a two-part instrument that includes both a screener and a questionnaire. The screener includes questions that determine whether the respondent is a primary caregiver of a child/children ages 9-20 living at least part-time in their home. This ensures that respondents represent the intended adult guardian audience for message evaluation. The subsequent portion of the questionnaire will gather respondent feedback on the following issues:

1. appeal of the “Talk. They Hear You.” products;
2. whether parents report learning anything new from the campaign materials;
3. whether parents believe that “Talk. They Hear You.” encourages parents to discuss underage drinking and other substance use with their children;
4. parents’ intent to act; and
5. how the “Talk. They Hear You.” messaging and materials can be improved.

This data collection will be used to satisfy Section 2(d) of the STOP Act, which requires evaluation of the national, adult-oriented media public service campaign. The results of this data collection—as well as progress on implementation of the evaluation—will be reported in an annual report to Congress. Section 2(d) of the STOP Act requires the HHS Secretary to annually report on the production, broadcasting, and evaluation of “Talk. They Hear You.” Since the STOP Act went into effect, SAMHSA has reported annually on the progress of the campaign and campaign evaluation in fulfillment of this Act. SAMHSA will continue to document the progress of the campaign evaluation in future reports to Congress in fulfillment of this law.

The items planned for use in the Parent Questionnaire were developed to be similar to the questionnaires used initially to test the effectiveness of the original campaign materials. This evaluation instrument was further honed via a rigorous, iterative process of subject matter expert review and cognitive testing (*N* = 8), as detailed in the report titled *Cognitive Testing the “Talk. They Hear You.” Parent Survey: A Validation of the National and Case Study Surveys*.

**3. Use of Technology**

SAMHSA will use the Qualtrics© Survey platform to develop and disseminate the electronic questionnaire. The Qualtrics© Survey platform will enable SAMHSA to use branching logic in the electronic questionnaire, which provides respondents with questions that are directly based on their responses to previous questions (and efficiently enables respondents to skip over questions that do not apply to them). Such branching logic will reduce the average time of the questionnaire for respondents, thereby reducing overall burden.

The use of Qualtrics© provides SAMHSA with the ability to randomize response options in order to mitigate response option bias, and to rotate base questions to avoid question ordering effects. Qualtrics© also includes built-in Section 508 compliance systems to accommodate respondents with vision impairments and built-in mobile accessibility to accommodate respondents using a range of electronic devices. SAMHSA owns and controls all data collected using Qualtrics©, and the data maintained in the Qualtrics© database will be kept confidential. Qualtrics© uses industry best practices to maintain data security and privacy and has devised proprietary methods to prevent disclosing data to the wrong requester due to programming errors.

**4. Efforts To Identify Duplication**

The STOP Act requires the development and dissemination of a new, adult-oriented media public service campaign and an evaluation of that campaign. The data collection efforts outlined in this document are specific to this program’s social marketing campaign and are not duplicated elsewhere.

**5. Involvement of Small Entities**

No small entities will be directly engaged with this evaluation.

**6. Consequences if Information Collected Less Frequently**

SAMHSA seeks to administer the proposed questionnaire annually. Less frequent collection of data will impede SAMHSA’s ability to ensure quality improvements of campaign elements and the message dissemination approach.

**7. Consistency With the Guidelines in 5 CFR 1320.5(d)(2)**

This information collection fully complies with 5 CFR 1320.5(d)(2).

**8. Consultation Outside the Agency**

1. ***Federal Register* Notice**

The notice required in 5 CFR 1320.8(d) was published in the *Federal Register* on April 13, 2018 (83 *Federal Register* 16114). SAMHSA did not receive any comments.

1. **Consultations Outside of the Agency**

In December 2006, Congress passed the STOP Act, Public Law 109-422. The STOP Act requires the HHS Secretary, in collaboration with other federal officials enumerated in the Act, to “formally establish and enhance the efforts of the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD) that began operating in 2004.” The STOP Act was reauthorized in 2016 as part of the 21st Century Cures Act Public Law 114-255. The National Institute on Alcohol Abuse and Alcoholism and the National Institute on Drug Abuse are consulting and providing guidance on campaign development. The common measures submitted here for OMB approval emerged from lengthy consultation and discussion among SAMHSA personnel, personnel from other government agencies, and contract representatives. SAMHSA senior officials made the final selection of these measures.

ICCPUD coordinates federal efforts to reduce underage drinking, guides policy and program development across the Federal Government, and serves as a resource for the development of the Comprehensive Plan for Preventing Underage Drinking. ICCPUD has received input from experts and organizations representing a wide range of parties, including public health advocacy groups, the alcohol industry, ICCPUD member agencies, the U.S. Congress, and subject matter experts. This input has been instrumental in the development of the national media campaign for “Talk. They Hear You.” ICCPUD will continue to guide the development process of the national media campaign over the period of this contract. The annual evaluation regarding the implementation and outcomes of “Talk. They Hear You.” is provided in Chapter 5 of the *Report to Congress on the Prevention and Reduction of Underage Drinking* and can be found at <https://www.stopalcoholabuse.gov/resources/reporttocongress/rtc2018.aspx>.

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The following individuals outside of the Agency, and independent of SAMHSA and “Talk. They Hear You.” campaign development, have been consulted on the evaluation design, questionnaire development, and sampling plan. Regular meetings with Summit Research Associates, NYC and Qualtrics International are held to provide updates on the campaign and evaluation efforts.

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**9. Payment to Respondents**

Participants will be drawn from an established market and academic research panel system, which provides points to panelists in order to encourage participation. Upon completion of the questionnaire, each qualified respondent will be provided with points roughly equivalent to $1.00. These points are accrued with other points when the panelist takes part in other questionnaires/surveys. At any time, panelists can redeem their points for various products, such as gift cards. Studies have indicated that a monetary gift can increase response rates (Abreu & Winters, 1999; Shettle & Mooney, 1999).

**10. Assurance of Confidentiality**

The following language is included at the beginning of the questionnaire to assure respondents of confidentiality: “All your answers will be kept strictly confidential. No individual results will be published; only summary information from all responses will be reported.”

Questionnaire data will be stored in password-protected, encrypted files via the Qualtrics© Survey Suite.

Evaluation procedures ensure that participants can opt out from the questionnaire either before or after the questionnaire has started, should they desire. Specific language to this effect is included in the beginning of the questionnaire: “Your participation in this questionnaire is voluntary, and you may quit the questionnaire or skip any question at any time.” This collection falls under Systems of Record Notices (SORN) [09-30-0036](https://www.federalregister.gov/documents/2010/05/20/2010-12147/privacy-act-of-1974-report-of-systems-of-record-notices) Alcohol, Drug Abuse, and Mental Health Epidemiologic Data; SORN history: 75 *Federal Register* 28264 (20 May 2010), pp. 28269.

**11. Questions of a Sensitive Nature**

Questions of a sensitive nature for the data collection instrument include those related to awareness of the “Talk. They Hear You.” campaign, as well as parent/caregiver attitudes regarding underage drinking and other substance use, and speaking with their children about alcohol and other substances.

**12. Estimates of Annualized Hour Burden**

Table 1 provides estimates of the total burden for collecting the proposed information. The estimate includes a total of 5,000 completed responses from parents and caregivers of youths ages 9–20 who reside in the United States. Responses will be collected from a nonprobability online panel.

**Table 1: Estimated Burden for Respondents**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Category of Respondent** | **Number of Respondents** | **Responses per Respondent** | **Total Number of Responses** | **Hours per Response** | **Total Hour Burden** | **Wage Rate** | **Total Hour Cost** |
| Individuals (screened) | 25,000 | 1  | 25,000 | 0.05 hours | 1,250 | $24.30 | $30,375.00 |
| Individuals (complete questionnaire) | 5,000 | 1  | 5,000 | 0.17 hours | 850 | $24.30 | $20,655.00 |
| **Totals** | **30,000** |  | **30,000** |  | **2,100** | **$24.30** | **$51,030.00** |

Note: Table estimates are based on the assumption that roughly 20 percent of individuals who start the screener will qualify for and complete the questionnaire.

The estimated cost of the time devoted to this information collection by respondents is $51,030, as summarized in Table 1 above. This cost was calculated by using the mean hourly wage of $24.30, which represents the U.S. Department of Labor estimated mean for state, local, and private industry earnings ([Bureau of Labor Statistics, 2017](https://www.bls.gov/sae/)). There are no direct costs to respondents associated with participation in this information collection.

**13. Estimates of Annualized Cost Burden to Respondents**

There will be no capital, start-up, operation, or maintenance of services costs to respondents.

**14. Estimates of Annualized Cost to the Government**

The estimated annual cost to the Federal Government for the proposed data collection activities is **$99,750**.

**15. Changes in Burden**

This is a new data collection.

**16. Time Schedule, Publication, and Analysis Plans**

|  |  |
| --- | --- |
| **Date** | **Parent Questionnaire Activity** |
| September/October 2019 | SAMHSA launches questionnaire following OMB approval.  |
| December 2019–January 2020 | SAMHSA analyzes questionnaire data.  |
| March 2020 | SAMHSA writes internal report on Parent Questionnaire findings.  |
| November 2020 | SAMHSA reports findings in the 2020 Report to Congress.  |

**Analysis Plan**

The analysis plan for the Parent Questionnaire is designed to address the following questions:

1. What is the overall parental receptivity of “Talk. They Hear You.” campaign material messaging across parents with children ages 9-20?

**Publication Plan**

The findings obtained from the Parent Questionnaire will be included in Chapter 5 of the *Report to Congress on the Prevention and Reduction of Underage Drinking*, as required by the STOP Act.

**17. Display of Expiration Date**

The expiration date will be displayed.

**18. Exceptions to Certification Statement**

This collection of information involves no exceptions to the Certification for Paperwork Reduction Act Submissions.

**19. References**

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1. U.S. Department of Health and Human Services. (2007). *The Surgeon General’s call to action to prevent and reduce underage drinking*. U.S. Department of Health and Human Services, Office of the Surgeon General. [↑](#footnote-ref-1)
2. Center for Behavioral Health Statistics and Quality. (2015). *Behavioral health trends in the United States: Results from the 2014 National Survey on Drug Use and Health* (HHS Publication No. SMA 15-4927, NSDUH Series H-50). Retrieved from <http://www.samhsa.gov/data/> on February 1, 2016. [↑](#footnote-ref-2)
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6. U.S. Department of Health and Human Services. (2007). *The Surgeon General’s call to action to prevent and reduce underage drinking*. U.S. Department of Health and Human Services, Office of the Surgeon General. [↑](#footnote-ref-6)
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9. Sieving, R.E., Maruyama, G., Williams, C.L., & Perry, C.L. (2000). Pathways to adolescent alcohol use: Potential mechanisms of parent influence. *Journal of Research on Adolescence, 10*(4),489–514. [↑](#footnote-ref-9)
10. “Sober Truth on Preventing Underage Drinking Act” (PL 109-422, 20 December 2006). [↑](#footnote-ref-10)
11. Earned media, also referred to as media relations, word-of-mouth, PR or publicity, is an unpaid brand mention or recognition such as a news article, published interview, or online review by a third party. In addition, earned media can also refer to a byline or article written by someone associated with the brand that is published by a third party.” Source: <https://www.toprankblog.com/2015/12/content-marketing-earned-media> [↑](#footnote-ref-11)