# **GenIC Clearance for CDC/ATSDR Formative Research and Tool Development**

# Youth Audience Message Testing of Substance Use Prevention Messages

**Request for GenIC Approval** 

**Contact: Jasmine Kenney, MPH** 

Communication Branch
Division of Overdose Prevention (DOP)
National Center for Injury Prevention and Control (NCIPC)
Centers for Disease Control and Prevention (CDC)
4770 Buford Hwy NE, MS S106
Atlanta, Georgia 30341

Phone: 770-488-5423 Email: gnk2@cdc.gov CIO: National Center for Injury Prevention and Control

PROJECT TITLE: Youth Audience Message Testing of Drug Overdose Prevention Messages

### PURPOSE AND USE OF COLLECTION:

The Centers for Disease Control and Prevention's (CDC) National Center for Injury Prevention and Control (NCIPC), Division of Overdose Prevention (DOP) is seeking to develop a youth-focused campaign to communicate the mental/behavioral health impacts and risk awareness and outcomes related to substance use, drug overdose, and addiction.

In the United States, drug overdoses have claimed over 1 million lives since 1999, and the drug overdose crisis continues to worsen. In 2021, a total of 106,699 drug overdose deaths occurred, and the rate of drug overdose deaths increased by 14% from the year before. Synthetic opioids, such as illegally made fentanyl, continue to contribute to the vast majority (nearly 88%) of opioid-involved overdose deaths. The median rate of monthly overdose deaths among adolescents (ages 10 to 19) increased by 109% from July–December 2019 to July–December 2021. Adolescent deaths related to illegally made fentanyl increased by 182% during the same period. Notably, about 41% of decedents were likely experiencing mental health conditions.

Audience testing is a best practice for developing relevant, effective, and impactful health messages and campaigns. In the current research effort, we will conduct an asynchronous qualitative online panel study to test proposed campaign messages and concepts with youth audiences ages 13 to 17. The focus areas of the campaign will include drug use and overdose risk awareness and outcome and mental/behavioral health impacts.

The purpose of this data collection effort is to:

- 1. Develop research protocols and implement data collection in a manner that is consistent with best research practices for individuals ages 13 to 17, including ethics and data privacy;
- 2. Collect rich feedback from youth ages 13 to 17 on the draft messages and campaign concepts; and
- 3. Identify and analyze trends and themes in the feedback about the messages and concepts to develop insights and recommendations that will inform the development of a youth-focused campaign.

The information collected will be used to:

1. Inform the development of a youth-focused campaign centered on increasing awareness of risks and outcomes related to drug use, drug overdose, and mental health.

### **DESCRIPTION OF RESPONDENTS:**

The primary audience is U.S. youth ages 13–17. Participants must be 13 to 17 years old at the time of recruitment and must be able to read and write in English. We will recruit participants through a recruitment vendor on an existing national panel of youth participants. We will recruit for a diverse mix of gender, race/ethnicity, geographic location, and urbanicity. The respondent sample will reflect trends in 2021 YRBSS survey, which showed racial and ethnic disparities in the rates of youth who report to

<sup>&</sup>lt;sup>1</sup> Wide-ranging online data for epidemiologic research (WONDER). Atlanta, GA: CDC, National Center for Health Statistics; 2022. Available at http://wonder.cdc.gov.

<sup>&</sup>lt;sup>2</sup> https://www.cdc.gov/drugoverdose/deaths/index.html

<sup>&</sup>lt;sup>3</sup> https://www.cdc.gov/mmwr/volumes/71/wr/mm7150a2.htm

having ever used drugs, identifying American Indian or Alaska Native, then multiracial school aged youth as most likely to have ever used drugs, followed by Hispanic and White youth.<sup>4</sup>

### **CERTIFICATION:**

I certify the following to be true:

- 1. The collection is voluntary.
- 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. Information gathered will not be used to substantially inform influential policy decisions.
- 5. The study is not intended to produce results that can be generalized beyond its scope. Name:

To assist review, please answer the following questions:

# **Personally Identifiable Information:**

- 1. Is personally identifiable information (PII) collected?  $\[\]$  Yes  $\[\]$  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 or reimbursement of expenses, token of appreciation) provided to participants? [ X ] Yes [ ] No

Participants will receive incentives for data collection activities. All incentives will be distributed at the end of the study and the final amount will depend on degree of completion. Participants will receive a \$50 incentive for completion of each data collection activity: \$50 for collecting assent and consent information (a total of 40 minutes for both parent and child to complete), and \$50 per activity, after completion of each of four 45-minute activities on the data collection platform (\$200 total).

### **BURDEN HOURS**

Category of Respondent	Form Name	No. of Respondents	Participation Time (minutes)	Minutes	Burden in Hours
Individual	Attachment 1 - Screener	500	15/60	7500	125
Individual	Attachment 2 - Parent Guardian Consent Form	54	20/60	1080	18
Individual	Attachment 3 - Youth Participant Assent Form	54	20/60	1080	18
Individual	Attachment 4 - Activity Guide	30	190/60	5700	95
Totals					256

<sup>&</sup>lt;sup>4</sup> Centers for Disease Control and Prevention. (2023). Youth Risk Behavior Survey Data Summary & Trends Report. *Retrieved January*, 1, 2023. https://www.cdc.gov/healthyyouth/data/yrbs/pdf/YRBS\_Data-Summary-Trends\_Report2023\_508.pdf

**FEDERAL COST:** The estimated annual cost to the Federal government is \$224,025.

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	resp	ondents

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?
	[X] Yes [] No

We will identify and recruit for selection participants through a vendor, which uses national panels of youth participants to recruit a non-probability sample from relevant markets. The recruiter will send an email message to invite qualifying participants to sign up for the study, then screen accordingly to ensure they meet the inclusion criteria. The recruiter will target for selection a diverse mix of participants based on gender, substance use disparities by race and ethnicity among youth, and likely exposure to substance use.

### **Administration of the Instrument**

1.	How will you collect the information? (Check all that apply)
	[ X ] Web-based or other forms of social media
	[ X ] Telephone
	[ ] In-person
	[ ] Mail
	[ ] Other, Explain
2.	Will interviewers or facilitators be used? [X] Yes [] No

2. Will interviewers of furnitations be used. [21] 165 [] 100

A moderator will review and monitor the participants' responses on the online platform to ensure completeness of responses, answer questions, and support with any technical issues.