

HHS Privacy Impact Assessment (Form) / SAMHSA OAS National Survey on Drug Use and Health (NSDUH) (Item)

PIA SUMMARY

1	<p>The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget.</p> <p>Note: If a question or its response is not applicable, please answer "No" to that question.</p>
----------	--

2	Summary of PIA Required Questions					
	*Is this a new PIA?	No				
	If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight				
	*1. Date of this Submission:	Dec 4, 2003				
	*2. OPDIV Name:	SAMHSA				
	*3. Unique Project Identifier (UPI) Number:	009-30-01-03-01-1003-02				
	*4. Privacy Act System of Records (SOR) Number:	09-30-0049 Please note that this number only covers consultant records maintained by SAMHSA contractors. No system of records notice is applicable for survey data collected by the National Survey on Drug Use and Health (NSDUH).				
	*5. OMB Information Collection Approval Number:	0930-0110				
	*6. Other Identifying Number(s):	No				
	*7. System Name:	National Survey on Drug Use and Health (NSDUH)				
	*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:					
	<table border="1" style="width: 100%; border-collapse: collapse; margin: 10px auto;"> <thead> <tr> <th colspan="2" style="text-align: left;">Point of Contact Information</th> </tr> </thead> <tbody> <tr> <td style="width: 60%;">POC Name</td> <td>Sam Ackley</td> </tr> </tbody> </table>		Point of Contact Information		POC Name	Sam Ackley
Point of Contact Information						
POC Name	Sam Ackley					
	*10. Provide an overview of the system:	To provide information on the incidence and prevalence of substance use as required by Section 505 of the Public Health Service Act (42 USC 290aa4). The National Survey on Drug Use and Health (NSDUH) provides information on the incidence				

	and prevalence of substance use required by Section 505 of the Public Health Service Act (42 USC 290aa4). The NSDUH has been conducted on a periodic basis from 1971-1988, and annually since 1990. Section 505 of the Public Health Service Act also requires that these data must be collected annually.
*13. Indicate if the system is new or an existing one being modified:	Existing
*17. Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
Note: This question seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation	
Note: If no IIF is contained in the system, please answer questions 21, 23, 30, 31, 37, 50 and 54, then promote the PIA to the Sr. Privacy Official who will authorize the PIA.	
If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.	
*21. Is the system subject to the Privacy Act?	No
*23. If the system shares or discloses IIF please specify with whom and for what purpose(s):	The National Institute on Drug Abuse (NIDA), the Centers for Disease Control and Prevention (CDC), the Office of National Drug Control Policy (ONDCP), and other Federal components interested in the prevalence of substance use including the White House, Congress. This information is also shared with various state and local government agencies, researchers, and the general public. Published reports are available on the web at http://www.DrugAbuseStatistics.SAMHSA.gov
*30. Please describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information. In this description, indicate whether the information contains IIF and whether submission of personal information is voluntary or mandatory:	The NSDUH provides current data on substance use prevalence for the U.S. population aged 12 or older as well as each state. The survey sample supports annual direct estimates of prevalence for: the nation, the eight (8) largest states, and model-based estimates for the remaining 42 States and the District of Columbia. These data are used by SAMHSA, the National Institute on Drug Abuse

(NIDA), the Centers for Disease Control and Prevention (CDC), the Office of National Drug Control Policy (ONDCP), and other Federal agencies interested in the prevalence of substance use, in order to: (1) design prevention programs, (2) respond to inquiries on the extent of substance use, (3) estimate treatment need, (4) study the socioeconomic impact of substance abuse, (5) identify correlates of substance use, and (6) evaluate the overall impact that Federal and State programs have on drug demand. NSDUH data provide a useful indicator of individual States' overall success at reducing youth substance abuse. In conjunction with other data sources, the survey will provide a means for assessing and improving outcomes of prevention and treatment services. The survey will help SAMHSA identify areas where serious substance abuse problems exist and provide assistance to States to help them develop and adopt targeted responses for those problems. In addition, many special requests for survey information emanate from the White House, Congress, and various state and local government agencies. The survey questionnaire asks for the minimum information necessary to meet the needs of Federal policy makers and the substance abuse research, prevention, and treatment communities.

Section 505 of the Public Health Service Act (42 U.S.C. 290aa-4) requires SAMHSA to collect this information. The NSDUH is the nation's only source of reliable national substance use data for the general population; its continuation will ensure that SAMHSA will comply with statutory requirements and Federal, State, and local agencies will have timely data available for release on an annual basis. The ability to respond

	effectively and efficiently to the continually changing dynamics of the drug culture is critical to sound prevention and treatment strategies.
<p>*31. Please describe in detail any processes in place to:</p> <ul style="list-style-type: none">notify and obtain consent from the individuals whose IIF is in the system when major changes occur to the system (e.g., disclosure and/or data uses have changed since the notice at the time of the original collection)notify and obtain consent from individuals regarding what IIF is being collected from them and how the information will be used or shared:	<p>The NSDUH is a survey of the civilian non-institutionalized population of the United States aged 12 or older. Households are sampled using a stratified, multi-stage area probability design. Data collection is facilitated through the use of personal, in-home interviews using computer-assisted interviewing (CAI) technology. The household screening and respondent selection procedures will be administered using a hand-held computer. The interview will be administered using a laptop computer. Each interview consists of both interviewer-administered and self-administered questions (the latter method is used to increase confidentiality of information). The interview incorporates several procedures to ensure that respondents rights will be protected. The interviewer introduces himself/herself and the session with a consent statement. This statement will be read out loud to each interview respondent. As part of the process for obtaining informed consent, respondents are given a document, which includes information on Section 501(n) of the Public Health Service Act and the protection that it affords. Specifically, Section 501(n) states that respondents answers will only be used for research and analysis and cannot be used for any other purpose (see Childrens Health Act of 2000, PL 106-310, page 70 of 146, paragraph titled: (n) Limitation on the Use of Certain Information). Beginning with the 2004 survey, the Confidential Information Protection and Statistical Efficiency Act of</p>

	<p>2002, "CIPSEA," included as Title V in the E-Government Act of 2002 (PL 107-347), will provide a uniform set of confidentiality protections to all individually identifiable data collected for statistical purposes under a pledge of confidentiality. Under CIPSEA, penalties are imposed for willfully disclosing information to a person or agency not entitled to receive it; unlawful disclosure could be considered a class E felony with up to 5 years imprisonment or fines not to exceed \$250,000.</p>
*32. Does the system host a website?	Yes
*37. Does the website have any information or pages directed at children under the age of thirteen?	Yes
*50. Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
*54. Briefly describe in detail how the IIF will be secured on the system using administrative, technical, and physical controls.	<p>The general model for securing collected data involves three increasingly restrictive layers of data security. The first layer of security is that provided by the Contractor and the gateways required to access their Public Network. The next layer is the significantly more restrictive procedures required to enter the Contractor's Private Network. Next is the restrictions placed on data files to limit access to those who are working on the project and who have signed confidentiality agreements. The data are collected via computer Contractor field staff. As the data are collected they will be transmitted back to the Contractor electronically to their Public network. Access to the Public Network is restricted by the use of assigned usernames and passwords. These data are restricted to those Contractor staff approved to work on the project and who have signed NSDUH confidentiality agreements. A complete backup of all files on every disk is written to tape weekly. Every business day, an incremental backup</p>

is performed of all files created or modified since the last complete backup. In the event of a hardware or software failure, files can be restored to their status as of the time of the last incremental backup, usually the evening of the previous business day.