



Guidelines for SAMHSA RDC Data Users

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Prepared by
SAMHSA Research Data Center

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Abbreviations

CBHSQ	Center for Behavioral Health Statistics and Quality, SAMHSA
CIPSEA	Confidential Information Protection and Statistical Efficiency Act
DAA	Data Access Agreement
DAF	Designated Agent Form
DAS	Data Analysis System
DT	Detailed Tables
FSRDC	Federal Statistical RDC (of the U.S. Census Bureau)
MRB	Methodological Resource Book
MSD	Methodological Summary and Definitions
NCHS	National Center for Health Statistics
NIDA	National Institute on Drug Abuse
NNR	NSDUH National Report
NSDUH	National Survey on Drug Use and Health
PDAS	Public-Use Data Analysis System
PUF	Public Use File
RA	NCHS RDC Research Analyst
RDAS	Restricted-Use Data Analysis System
RDC	Research Data Center
RUF	Restricted Use File
SAMHSA	Substance Abuse and Mental Health Services Administration
SAP	Standard Application Process
SIR	Statistical Inference Report
SSS	Special Sworn Status
VDE	Virtual Data Enclave

1. Introduction

The Substance Abuse and Mental Health Services Administration Research Data Center (SAMHSA RDC) program provides a mechanism for data users to access the National Survey on Drug Use and Health (NSDUH) restricted-use data files (RUF) in a secure, confidentiality-compliant manner. NSDUH, which was called National Household Survey on Drug Abuse prior to 2002, is an annual survey designed to provide nationwide data on substance use and mental health in the United States. [1] NSDUH is the primary source of data on the use of tobacco, alcohol, prescription drugs (e.g., pain relievers, tranquilizers, stimulants, and sedatives), other substances (e.g., marijuana, cocaine) and mental health issues (e.g., mental illness and major depressive episodes) among people aged 12 and older. [2] This document provides SAMHSA RDC data users with guidance on accessing NSDUH RUF through the SAMHSA RDC program.

The SAMHSA RDC program is constantly evolving to improve data accessibility while maintaining sufficient disclosure controls. One significant development is the implementation of the Standard Application Process (SAP), an online application system that allows data users to apply for access to the RUFs from any of the 16 principal federal statistical agencies and units. It was jointly created by the 16 federal statistical agencies and units to meet the requirements of the Foundations for Evidence-Based Policymaking Act of 2018. Another significant development is the availability of the Virtual Data Environment (VDE) option as an alternative to the conventional RDC facility. The VDE allows approved SAMHSA RDC data users to access the RUF remotely from a secure, designated space without physically visiting an RDC site. Information will be posted on the [SAMHSA RDC webpages](#) once VDE becomes available.

In this document, “we” refers to the SAMHSA RDC team or the RDC program, and “you” refers to an RDC data user or anyone who is interested in the SAMHSA RDC program. The terms “data user” and “researcher” as well as “RDC application” and “RDC proposal” are used interchangeably. Depending on the context, “RDC” may refer to the RDC team, the RDC program, or the secured facility where the activities of RDC data access and analysis take place.

2. Collaboration with [NCHS RDC](#) and [FSRDC](#)

2.1 Roles and Responsibilities - General

SAMHSA RDC carries out the RDC program by collaborating with NCHS RDC and the FSRDC of the U.S. Census Bureau. SAMHSA RDC is responsible for the following:

- Receiving and reviewing NSDUH-related RDC proposals.
- Managing the confidentiality trainings, Data Access Agreement (DAA), Designated Agent Form (DAF), and Student Data User Acknowledgement.
- Reviewing output packages.
- Uploading external project files to Census FSRDC.
- Requesting output packages from Census.

NCHS RDC is responsible for hosting NSDUH RUF, accepting SAMHSA RDC project payments and assigning the project ID.

The Census Bureau manages the FSRDC facilities used by SAMHSA RDC data researchers. The FSRDC has FSRDC-specific requirements, e.g., the Special Sworn Status (SSS) requirements, applicable to all FSRDC attendees.

2.2 Roles and Responsibilities – VDE

The Virtual Data Enclave (VDE) is a data access system created and managed by NCHS RDC that provides researchers with access to restricted data through a secure and remote server. With the VDE, researchers can designate a secure room at their institution that meets all data security requirements, allowing them to access the RUF (Restricted Use

File) from that location. This system has the potential to save data users both time and money and provides data access to a new group of researchers. SAMHSA RDC will permit its data users to utilize the NCHS VDE once it is fully operational.

- Data users who choose the VDE option will have various steps to complete before the application is approved for VDE use, including signing a VDE data use agreement and VDE inspection form, which outline specific data security requirements for the VDE.
- The secure remote room location will be inspected by both SAMHSA and NCHS, and approval will be determined.
- NCHS will establish a VDE account and offer any necessary technical support after the application is approved for VDE use.

2.3 Project ID assignment and use

All SAMHSA RDC projects are assigned a project ID number by NCHS RDC, which will be the primary ID for your project once your project is approved. The NCHS ID is assigned once the following steps are complete:

- 1) The proposal is approved by SAMHSA RDC.
- 2) All applicable fees are paid to NCHS.
- 3) All confidentiality trainings and associated paperwork are complete and submitted to the appropriate agency.

The SAP system generates an ID for all SAP applications, which is the only project ID prior to the project's full approval and may still be used as a reference ID after your project has received a NCHS ID. For those who use the FSRDC, an additional ID number is assigned by the FSRDC. The FSRDC ID must always be referenced in addition to the NCHS ID when referring to your project while use of the SAP ID is optional after the full approval of your project.

Once the project is approved, all data users are required to use the following formats to refer to the RDC projects in all communications with **SAMHSA RDC** and **NCHS RDC**:

- For NCHS RDC Projects: "Lastname_{NCHS ID}_SAP{SAP ID}" (e.g., Johnson_1234_SAP2468).
- For FSRDC Projects: "Lastname_{NCHS ID}_C{FSRDC ID}_SAP{SAP ID}" (e.g., Smith_4321_C2345_SAP3456).
- For multi-agency projects (see section 9), "{M(acronym of the other agency(agencyes))}" is added to the very end of the above project ID, e.g., Smith_4321_C2345_SAP3456_M(NCHS).

In these formats, the braces "{}" are used to indicate where the numeric values of the IDs should be inserted and should not be included in the final format. The SAP ID may be omitted once the project is operational; however, both the NCHS ID and the FSRDC ID should always appear in the project ID.

3. Prior to Creating the RDC Proposal

Accessing the RUF through the SAMHSA RDC program is an investment of time, money, and other resources. Therefore, it is wise to first determine if the research question(s) can be answered without going through SAMHSA RDC. We recommend that you thoroughly review the following reports, data, and tools before creating a SAMHSA RDC proposal.

3.1 The PUF, DT, and DAS (the replacement of the previous RDAS and PDAS)

PUF: The Public Use File (PUF) contains individual response data of NSDUH. The PUF is published annually and is publicly available online. The PUF is created from the RUF by applying disclosure control techniques. As a result, the PUF does not include all data elements included in the RUF, such as detailed geographic identifiers. Comparisons of the PUF and the RUF shows that NSDUH PUF provides high-quality data for producing

estimates and standard errors for most substance use and mental health outcomes. In general, statistically consistent analytic results can be expected between the PUF and the RUF even when the actual numbers are different [3] [4].

DT: The Detailed Tables (DT) are annually published tabulated NSDUH data based on the RUF and are available online to the public. They are a collection of tables presenting national estimates on substance use and mental health on various outcomes among several subpopulations.

DAS: The Data Analysis System (DAS) is an online data analysis wizard for NSDUH. It is an upgraded version of the previous RDAS (the Restricted-use Data Analysis System) and PDAS (the Public-use Data Analysis System). DAS allows data users to access the NSDUH data, including some of the RUF data, to conduct cross-tabulations without going through the SAMHSA RDC program.

Table 1. A glance at major NSDUH data systems.

Data	PUF	RUF	DAS	Detailed tables
Accessibility	Online , public	Restricted; RDC	Online , public	Online , public
Data type	Person-level microdata	Person-level microdata	Online tool for both PUF & RUF	Tabulated data
Time interval	Published yearly	Created yearly	Updated as needed	Published yearly

3.2 NSDUH [State](#) and [Substate](#) Data Tables and [State/Substate Interactive Tool](#)

NSDUH publishes data tables of state and substate estimates for selected measures of substance use and mental health based on combined two-year (e.g. 2018-2019) data. NSDUH also publishes data tables of substate estimates for selected measures of substance use and mental health based on combined three-year (e.g. 2017-2019) data. The state and substate estimate data tables are based on the small area estimation methodologies and are available at the following website: <https://www.samhsa.gov/data/nsduh/state-reports> and <https://www.samhsa.gov/data/nsduh/substate-reports>. Another useful resource is the [state](#) and [substate](#) interactive tool.

3.3 The [NSDUH National Report \(NNR\)](#)

The NSDUH National Report (NNR), titled “Key Substance Use and Mental Health Indicators in the United States: Results from the National Survey on Drug Use and Health”, is published annually. The NNR presents key findings of NSDUH through descriptive summaries, figures, and tables. The NNR also describes the background, design, and methodology of each survey year. NNR was formerly referred to as First Findings Report (FFR).

3.4 The NSDUH [Methodological Summary and Definitions \(MSD\)](#)

For each year’s survey, SAMHSA publishes the Methodological Summary and Definitions Report (MSD). The MSD summarizes methods and other supporting information such as sample design, data collection procedures, development of analysis weights, suppression criteria for unreliable estimates, statistical testing procedures, and response rates.

3.5 The [Methodological Resource Book \(MRB\)](#)

The [Methodological Resource Book \(MRB\)](#) is a collection of many individual reports that accompany the NSDUH each year. The [Statistical Inference Report](#) (SIR), one of the MRB reports, describes the statistical inference procedures used to produce the design-based estimates presented in each year’s NSDUH DTs and the NNR, which may be useful to RDC data users.

4. Submitting the RDC Proposals

All applicants must submit the new RDC project application online via the interagency Standard Application Process (SAP) portal at www.ResearchDataGov.org. The revision of the unapproved new applications is also performed via SAP and the email communication is used to facilitate the revision. When there is an official notice that the SAP system is not working properly, data users may create an application in PDF format by following the example of the “[RDC Sample Proposal](#)” and submit the application via our email at RDCA@samhsa.hhs.gov.

4.1 Things You Must Do

- Limit the number of the output table shells to a maximum of 125 in a single proposal. Researchers wanting to exceed the 125-table limit should seek prior approval from SAMHSA RDC.
- Limit the number of the data users or programmers to a maximum of 10.
- Send additional information that is required by SAMHSA but not included in the SAP application via our email RDCA@samhsa.hhs.gov.
- SAMHSA discourages the use of unweighted sample sizes and/or analytic results in the RDC output data. If the inclusion of the unweighted sample sizes and/or analytic results in your RDC output is essential for your research, you must provide a justification in the research methodology section of your RDC proposal.
 - The justification must be based on an analytic/statistical need and must include an assurance of meeting SAMHSA RDC disclosure control requirements.
 - Even though a justification for unweighted counts has been approved, SAMHSA RDC may still reject certain unweighted counts related to smaller geography, single-year data, or subgroup populations.

4.2 Things You Must NOT Do

- Violate the disclosure rules in any manner at any stage.
- Merge the NSDUH PUF to the NSDUH RUF.
 - Given the relationship between the PUF and the RUF, merging the PUF and the RUF is meaningless in research and may pose a disclosure risk to the PUF data.
- Include unweighted sample sizes in the output tables without the prior approval of your justification by SAMHSA RDC.

4.3 Rules for including unweighted values in RDC output data

- You may include unweighted results or sample sizes in the RDC output data only if you explicitly request them with a justification in your approved application.
- The unweighted sample sizes to be included in the outputs must be equal to or greater than 300. The unweighted counts must be rounded to the nearest 100.
- The intention of including unweighted sample sizes must be clearly indicated in the respective output table shells in the approved application.

4.4 Creating output table shells in the application

- In principle, the rows and the columns of the table shells must be exactly the same as what will be in the future corresponding RDC output tables.
- All tables must be uniquely labeled in sequential manner, i.e. Table 1, Table 2, The table shell ID must be exactly the same as the future corresponding RDC output table.
- It is permissible to present a model table and list the other tables that have exactly the same table structure. Note that the table ID, title, and the row/column variable information specific to each table must be completely presented even though the table does not have to be physically laid out.

5. From Proposal Submission to Output Release

5.1 Proposal Review

5.1.1 Review and proposal start date

According to the SAP policy [5], review of the proposal may take up to 12 weeks if NSDUH is the only RUF that the project will use and 24 weeks if the project wants to access multiple RUFs from multiple agencies. We may approve the proposal, return the proposal for revisions, or reject the proposal. The proposal may be rejected if the following situations occur:

- The proposal clearly violates our disclosure control requirements.
- The proposal ignores our format requirements.

The project proposal approval is valid for three years starting from the date that the project ID is approved by SAMHSA RDC. Approval of a proposal does not mean that SAMHSA endorses the research, nor does it mean that SAMHSA guarantees the release of your future RDC output data.

5.1.2 Notification of the review decision

For SAP applications, the review decision on the initial application will be sent via the SAP online system and a detailed decision sent via RDCA@samhsa.hhs.gov. Amendments and output requests and decisions will be sent to our RDC mailbox RDCA@samhsa.hhs.gov for both SAP and non-SAP applications. Email will also be used to communicate whenever there are issues that cannot be resolved by relying solely on the SAP system.

5.1.3 Revisions and amendments

The changes suggested by SAMHSA for applications and for output prior to approval are termed revisions. The changes initiated by the data user on approved applications constitute amendments.

5.2 From Proposal Approval to RUF Data Access

Once the proposal has been approved, the following steps should happen:

- 1) All persons listed in the application as the members of the research team must take the CIPSEA training and sign the DAF. Researchers physically accessing data either through the RDC or VDE will also have to sign a DAA. DAA for VDE users may contain additional data user obligations.
- 2) VDE users must have VDE site director of the host institution sign a special security affidavit.
- 3) Student data users need to sign the SAMHSA RDC Student Data User Acknowledgement. Student advisors must complete confidentiality training, complete a DAF agreement, and sign the SAMHSA RDC Student Data User Acknowledgement.
- 4) [RDC and/or VDE fees](#) are paid to NCHS RDC.
- 5) Send all program codes (if any) and external files (if any) that the data user wish to have in RDC to SAMHSA RDC for review and approval. Code/external files are NOT permitted to be brought into the RDC by you when you enter the RDC site. Please notify SAMHSA RDC **five business days prior to your visit to onsite RDC** so that they will be available to you from your folder when you are at the RDC. All external data must be publicly available. This rule applies to the VDE as well.
- 6) If you select an NCHS RDC site, you need to make appointments with the assigned NCHS RA prior to entering the RDC. If you select an FSRDC, you need to make appointments with the FSRDC administrator and obtain your SSS prior to entering the RDC.
- 7) If you choose to use the VDE option, the following steps should happen:

- a. Work with NCHS RDC to make sure that you are qualified for the VDE option.
- b. Have your VDE remote access site ready.
- c. Schedule a time for NCHS and SAMHSA to virtually inspect your remote access site.
- d. Work with the NCHS RA to access the RUF remotely via VDE.

5.3 Working at the RDC Site or VDE Remote Site: General Rules

Once you are admitted to the RDC or approved for the VDE option, you have access to the NSDUH RUF as well as your program codes (if any) and external files (if any). You are responsible for creating your analytic data set, including merging any external files. Statistical software generally supported at the RDC includes SAS/SUDAAN, Stata, and R. Contact your chosen RDC or FSRDC directly if you need additional statistical software packages. The rules you must follow at the RDC site include but may not limit to the following:

- 1) All materials you are bringing in and taking out of the RDC are subject to inspection.
- 2) Cell phone and other telecommunication devices are not permitted.
- 3) You do not have access to the internet.
- 4) Do not generate any output data tables that are not included in the proposal.
- 5) Do not make any attempt to identify a person or an establishment from the RUF.
- 6) Do not put any content in the program notes that may facilitate a disclosure.
- 7) All output data and notes are subject to review by the onsite RDC Analyst.
- 8) Do not save output, files, or programs to transportable electronic media.
- 9) Strictly follow the VDE remote access rules.

5.4 Working at FSRDC

You must have the Special Sworn Status (SSS) to work in an FSRDC. Contact your FSRDC Administrator for obtaining SSS. After your SSS is approved and your account is created, a NCHS RDC Analyst will transfer your analytic data set to the FSRDC. You must follow FSRDC rules in addition to follow the SAMHSA RDC rules described in section 5.3.

5.5 Generating Your Output and the “Rule of 10”

The following rules must be followed when you are generating your output:

- The “Rule of 10” states that the underlying sample size for any table cells **MUST** be greater than 10. **You must suppress any table cells that do not meet this “Rule of 10”.**
 - The main purpose for requiring an “RDC Output Summary Report” (see section 5.6 below) is to ensure the compliance of the “Rule of 10”.
- Intermediate data files generated **are not allowed** in the output package.
- Names of geographic areas with $\leq 100,000$ population **must be excluded**.
- Apply disclosure safeguards to any notes or texts included in the output.
- Acceptable file format: plain text files, tab delimited text files, Word (.docx) files, Excel files (.xlsx), open document spreadsheet (.ods), or comma-separated (.csv) files. Release of additional formats for output is possible with the approval of the onsite RDC Analyst and SAMHSA RDC. Statistical output files (e.g., .lst SAS files) are **NOT** considered acceptable output files.
- File naming convention: YYYYMMDD_RDC_Output_{NCHS project ID}_Table1, where the braces “{}” are used to indicate where the IDs should be inserted and should not be included in the final format.
- Any other information that might potentially identify a respondent (e.g., exact dates of interview) also may not be included.

5.6 Submitting Your RDC Output and the Output Summary Report:

Notify SAMHSA RDC once you have finalized your output. The notification email should have the project ID as specified in section 2.2 in the subject title and include the folder

name, date the file(s) were created, and any notes or explanation that may help the review and approval of your output. Each output data package must be accompanied by the “[RDC Output Summary Report](#)”. The “RDC Output Summary Report” must include the following information:

- 1) A complete list of your output tables. The maximum number of tables you may include in a single output package for SAMHSA to review is 20. You will need to receive special permission from SAMHSA RDC if you want to include more than 20 tables in an output package.
- 2) Identify the cell of the smallest releasable sample size in each output data table (i.e., > 10). List the cells of the smallest sample sizes of all the data tables in this output in Table 0 of the RDC Output Summary Report and state the actual unweighted sample sizes of these table cells. This is to reassure SAMHSA RDC that the “Rule of 10” is being followed in all of your output table cells.
- 3) Briefly describe what you have done in minimizing the disclosure risk when producing your output data.

Please visit our [website](#) for an example of the “RDC Output Summary Report.” Output package without the accompany Summary Report will be rejected. Note that the “RDC Output Summary Report” is confidential and will not be released to the data users when the output data tables are released.

5.7 Output Review

The output review will be complete within six weeks. Output revision is necessary if the following situations occur:

- Formats do not match the table shells in the proposal.
- Unweighted counts are included without a prior approval by SAMHSA RDC.
- Fixable disclosure issues exist with your output.
- The RDC Output Summary Report is not in the right format or lack of essential information.

We will reject your output if the following situations occur:

- Rows, columns, or the entire data table do not exist in the proposal.
- The output bears intolerable disclosure risks.
- The RDC Output Summary Report is missing in the package for any projects that initiated after August 2022.

Approved output is released to the data user via email. The release of the output does not relieve the data users’ responsibility of using the output and statistics in a way that will not impose disclosure risks to NSDUH in the future. Even though an application has received prior approval, output that has been deemed by SAMHSA RDC as posing an intolerable disclosure risk will not be released.

5.8 Visiting [SAMHSA RDC Webpage](#) for Possible NSDUH Updates

While your RDC project is going on, you are advised to periodically revisit the [SAMHSA RDC Webpage](#) for information on possible NSDUH updates. For example, SAMHSA may re-deliver certain years’ NSDUH data with additional variables and/or adjusted sampling weights, which may be very important to your research.

6. Amending Your Approved Proposal

You may submit an amended proposal if you want to make changes on your approved proposal.

6.1 Submitting an Amended Proposal

- Briefly summarize the amendments included in your revised proposal in your revision submission email.

- Use a distinguishable color to highlight the changes in the amended proposal but do not include change tracking indicators/comments.
- Format your application by following the [SAMHSA RDC Research Proposal](#).
- Submit the amended application via email to RDCA@samhsa.hhs.gov.

6.2 [Fees](#) for Application Amendment

Approved projects receive two free major amendments. Amendments beyond the first two major amendments are charged an amendment fee that is paid to NCHS. For details, see “Other fees” at: <https://www.cdc.gov/rdc/application-process/fees-and-invoicing.html>.

- The major amendments include:
 - Adding new output tables/figures to the original proposal;
 - Adding new variables to the proposal;
 - Adding or removing years of the RUF data;
 - Transferring projects between RDC locations.
- The minor amendments that will not result in any amendment fees include:
 - Correcting the formatting, language, and other editorial issues.
 - Adding or removing researchers to the project team. If the new researcher requires SSS, then SAMHSA notifies the assigned NCHS RDC RA so the RDC can invoice the project for this SSS application fee;
 - Modifying the existing, previously approved output table shells without fundamental changes on the table structures;
 - Improving the application on the same issue within 2 months after a major amendment is approved;
 - Adding a justification for including the unweighted sample sizes in the output tables.
- NCHS may be consulted to determine if the amendment constitutes a major or minor one.

7. Post-RDC Responsibilities

Your output’s passing SAMHSA’s disclosure review does not mean that the disclosure risk of your output is an absolute zero. As new data-mining technology and more linkable non-NSDUH data become available, there could still be a possibility for hackers to use your output to disclose confidential information in NSDUH RUF. Therefore, your responsibility for safeguarding NSDUH data against disclosures will persist after they have been released to you.

7.1 Presenting the Data in Your Publications

Use the same data tables or graphs used in the RDC output package in your publications whenever possible. You may revise the data tables, create new data tables, or present the data in a different form in publications if the disclosure risks of the new tables or formats will not increase as compared to your original RDC output. Here are two examples of permitted changes:

- The same data in an output table are presented as a graph in the publication.
- Drug use measures are included for 7 races in your output table. But the table in your publication includes 3 races only.

7.2 Publishing Your Paper

- Some journals may ask authors to share the original data on which the tables or graphs in the paper are derived. This will not be allowed for SAMHSA RDC data. You may refer the journal editor to this document or to SAMHSA RDC if this is necessary for publishing your paper.

- You are not required to submit your prior-to-publication manuscript to SAMHSA RDC for a review. However, you **must** submit your prior-to-publication manuscript to SAMHSA RDC for a disclosure review if your modifications on the output data in your paper may have increased disclosure risks of NSDUH data by any chance. You must describe the changes you made on the output figures when you submit your manuscript to SAMHSA RDC for disclosure review.
- SAMHSA RDC welcomes copies of final publications resulted from using NSDUH RUF, but you are not required to do so.

8. Project Renewal and Closure

8.1 Project renewal

- 1) Researchers may choose to renew their project by submitting a renewal application within 3 months prior to the current expiration date but no later than the current expiration date.
 - Note: The renewal fee is lower than the new project fee.
- 2) SAMHSA usually decides within 4 weeks upon receipt of the renewal application.
- 3) All researchers in the RDC project team need to submit up-to-date security documents for the renewal project, which would include security affidavits/certificates of confidentiality training completion for new project members.
- 4) Researchers are obligated to pay the renewal fee to NCHS RDC (rdca@cdc.gov) by the current expiration date for uninterrupted RDC/VDE usage.
- 5) If the renewal fee is not paid by the current expiration date for a good reason, the researcher should write to NCHS and SAMHSA to explain. If NCHS approves, the researcher may continue to perform work at the RDC/VDE within three months after the current expiration date while the renewal process is in progress.
- 6) If the renewal fee is not paid within three months after the current expiration date, SAMHSA will revoke the approval of their renewal application.
- 7) The renewed project starting date will be the same date as the current expiration date.
- 8) Renewal application received after the expiration date will be treated as a new application.

8.2 Project closure

- 1) An RDC project will be closed if one of the following situations occurs:
 - The project fee is not paid to NCHS RDC within 6 months after the approval of the initial or the renewal application.
 - The PI of the project informs SAMHSA in writing to terminate the project.
 - SAMHSA RDC does not receive a renewal notice in writing by the project expiration date.
 - The project violates RDC and disclosure rules as specified in DAA, DAF and other applicable documents.
- 2) Any project fees collected to date will not be refunded when the project is terminated for cause (i.e., violation of RDC/VDE rule) prior to its expiration date.

9. Multi-Agency RDC Projects

Occasionally, one may find it necessary to merge NSDUH RUF with the RUFs from other federal agencies. The following are SAMHSA RDC policies on multi-agency RDC projects:

- In the application, the intention to merge NSDUH RUF with the RUF of another federal agency must be clearly indicated and specified. The justification must be given for the need of merging NSDUH RUF with the other RUFs.

- Depending on the agency or scenario, SAMHSA RDC may send the Interagency Letter on Multiple RUF Access to all proprietary agencies involved in the multiple RUF request.
- It will be totally up to you and the other agency to work out the solutions for getting the other RUF into the designated RDC/VDE.
- The merge of NSDUH RUF with the RUF of the other agency must only occur inside the designated RDC/VDE site and will not be retained by any individual or agency.
- You must ensure that the output data resulted from merging different RUFs will not violate any disclosure control requirements of all agencies involved.
- The output data tables resulted from the merged multiple-RUF data must be clearly identified in the output package submitted for disclosure review.
- All agencies whose RUFs are requested by you will review your RDC project application and your RDC output independently.
 - Your RDC project application or the RDC output will not be approved unless all agencies involved approve it.
 - SAMHSA may reject the application or the output even if other agencies have approved it.

10. Additional Notes

- Disclosure control is of the highest priority of the SAMHSA RDC program. Whatever you do with your RDC output data, you should always ask: "Will my action add any disclosure risks to NSDUH data?"
- Do not treat your RDC output as public information that can be shared with anyone because it is possible that linking certain non-NSDUH data with RDC output data may facilitate disclosure of NSDUH participants.
- SAMHSA RDC does not provide phone consultations. All consultations are provided via email.

References

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- [6] Federal Committee on Statistical Methodology (FCSM), "STATISTICAL POLICY WORKING PAPER 22: Report on Statistical Disclosure Limitation Methodology (Second version) (<https://www.hhs.gov/sites/default/files/spwp22.pdf>)," Statistical and Science Policy, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C., 2005.