Impact of Housing and Services Interventions for Homeless Families

Supporting Statement for Paperwork Reduction Act Submission, Part A

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Follow-up Survey Data Collection

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Follow-Up Survey Data Collection – Draft

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Part A: Justification

Background

A.1 Need and Legal Basis

A.1.1. Need for Information Collection

The U.S. Department of Housing and Urban Development (HUD) is undertaking an evaluation of the Impacts of Housing and Services Interventions for Homeless Families to provide research evidence to help federal policymakers, community planners, and local practitioners make sound decisions about the best ways to address homelessness among families. In the remainder of this document, we refer to the study as the ***Family Options Study***[1]**.** This request for OMB Clearance covers the next phase of data collection for the Family Options Study. It builds upon the baseline data already collected under OMB approval number 2528-0259, Expiration Date 5/31/2013. The request covers three key items:

1. The follow-up survey, to be administered to all families previously enrolled in the Family Options Study;
2. The key informant interview protocol, to be administered to key staff and stakeholders within the participating providers or the local community; and
3. The participation agreement (informed consent), to be signed by all enrolled families that participate in the follow-up survey.

The Family Options study will compare four combinations of housing and service interventions for homeless families in a rigorous, multi-site experiment, to determine what interventions work best to promote family stability and well-being and, within the limits of statistical power, what sorts of families benefit most from each intervention. The interventions are: 1) a permanent housing subsidy without services (Subsidy Only); 2) Community-Based Rapid Re-housing (CBRR), consisting of temporary housing subsidy provided in conventional housing with limited supportive services; 3) temporary housing subsidy provided in facility-based housing with intensive services but no guarantee of a permanent subsidy (Project-Based Transitional Housing-PBTH); and 4) shelter, with whatever services the shelter ordinarily provides to its residents and any other assistance available in the community (Usual Care). This study will also exploit naturally occurring variation in program features within these categories and across sites to explore, non-experimentally, what features of programs seem most responsible for success.

The U.S. Department of Housing and Urban Development has invested considerable resources in strategies to address family homelessness. The results of this evaluation will provide evidence to inform policy makers how best to set priorities for those funds and to design eligible activities. Similarly, in

[1] Initially, the study was to be referred to as the ***Impacts of Housing and Services Interventions for Homeless Families or Homeless Families Impact Study.*** However, as implementation began in the study sites in September 2010, the research team sought an alternative name to refer to the study locally. To avoid potential stigma for participating families, we refer to the study locally, and throughout the remainder of this document, as the ***Family Options Study***.

response to HUD Continuum of Care funding requirements and in an effort to maximize the effectiveness of limited resources, communities systematically examine their homeless assistance systems to decide which housing and service interventions should be funded. Some cities often expend their own appropriations on interventions for homeless individuals and families. Unfortunately, past research is inadequate to guide federal policy and local practice. While there is a significant amount of research on the characteristics and needs of homeless families and an emergent body of descriptive research on intervention programs and outcomes for families who use them, there is almost no information about the relative effectiveness or cost-effectiveness of different interventions. Senate Report 109-109 for The FY2006 Transportation, Treasury, Judiciary, HUD, and Related Agencies Appropriations bill directed the Department to focus its energies on homeless families and to "undertake research to ascertain the impact of various service and housing interventions in ending homelessness for families." This study is intended to respond to this mandate.[2]

A.1.2 Homeless Assistance System Background

This section provides background information on current homeless assistance program models. This background was used to develop the interventions to be tested in the evaluation. The most widely adopted typology of homeless programs is defined in terms of the residential components of the Continuum of Care (CoC): emergency shelter, transitional housing, and permanent supportive housing. Among and within each of these three program types there is significant variation in quality, housing structure and location, privacy and independence for participants, tenure, average and expected lengths of stay, services provided, rules, and expected outcomes. (Locke et al., 2007). This evaluation will provide empirical evidence of the relative effectiveness and costs of these basic models. Emergency and transitional housing are time-limited programs, which rely on families moving on to subsidized or unsubsidized permanent housing. Families in permanent supportive housing programs may also move into mainstream permanent housing[3], though there is not a specified time frame in which that is expected to occur, and movement is generally expected to be based on family needs. Permanent supportive housing programs offer permanent housing subsidies coupled with services and are available only to families in which at least one parent has a qualifying disability.

Emergency shelters typically serve as the first response to homelessness. This makes shelters a good place to draw a research sample when studying impacts of longer-term transitional housing assistance. Frequently shelters are 24-hour congregate settings, though each family may be provided an individual room or even an apartment. Services vary from basic shelter services (e.g., meals, showers, clothing, and transportation) to minimal case management and referrals to intensive case management augmented by specialized services, such as employment and/or drug or medical treatment. There are 32,878 emergency shelter units (corresponding to 107,950 beds) for homeless families throughout the country (2010 Annual

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[2] Senate Report 109-109 to accompany HR 3058. July 26, 2005 (page 176). The report is available at http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=109_cong_reports&docid=f:sr109.pdf, accessed on June 11, 2009.

[3] In this context, by "mainstream" we mean permanent housing that is not explicitly linked to services needed to support continued successful tenancy and housing stability and, therefore, is not "supportive."
It could include unsubsidized private market housing, private market housing subsidized by a voucher or other rent subsidy, or public housing.

Homeless Assessment Report (AHAR, 2011). Many families have short lengths of stay, leading to high turnover within emergency shelter programs.

Transitional housing offers homeless families housing or rent assistance with supportive services for longer periods, generally six to 24 months. Often families are referred to transitional housing from emergency shelter if shelter workers determine they need more intensive assistance and meet eligibility criteria. Transitional programs follow several models: some are offered in facility-based settings with shared or private rooms or apartments, others are independent units in clustered or scattered site locations where the program maintains the lease and program participants must leave upon completion of the program, while still others are in scattered site community locations where families rent their own apartments with temporary financial assistance from the program. There are approximately 35,185 transitional housing units for homeless families (AHAR, 2011), though there is no national data on the composition of these units across the different models. Stays in transitional housing are longer than those in emergency shelter; AHAR 2010 reports that the median length of stay is 175 nights, as compared with 29 nights in emergency shelter.

As with emergency shelters, services provided through transitional housing vary tremendously from one program to another, though the nature of services is typically more intensive than in shelters. Transitional program services may include childcare, case management and referrals, benefit acquisition and retention, family reunification, education and employment training, mental health and substance abuse treatment, and children's services. Most transitional housing programs aim to place participants in permanent housing at program completion and may help to broker access to mainstream subsidized housing, but the homelessness system itself rarely funds housing subsidies beyond the temporary rent assistance provided as part of a transitional housing program. Burt (2006) offers a thorough description of the range of transitional housing models.

Permanent supportive housing programs often look relatively similar to the more independent forms of transitional housing, except that there are no time-limits associated with the housing or services. Permanent supportive housing programs funded by HUD require participants to have severe and persistent chronic disabilities to be eligible; thus, under current HUD grant guidelines, a program cannot apply for funds to support permanent rent subsidies and services for non-disabled families. Housing models vary from scattered site apartment units or single-family homes to small-scale group homes to multi-unit developments, such as those funded through the Low-Income Housing Tax Credit program. There are approximately 33,060 permanent supportive housing units for homeless families (AHAR, 2011), almost as many as the number of emergency shelter units and almost as many as the number of transitional units. Continuums often use broad definitions of permanent supportive housing, and equally broad definitions of severe and persistent disabilities. Nonetheless, the figures reported in the Second AHAR represent a very large number of subsidized, supported housing units that target families with severe and persistent disabilities, as defined by HUD.

Other Supportive Services. Many CoCs also have standalone supportive service programs that assist families who are homeless. Service programs may work hand in hand with a residential program by providing employment services or mental health treatment on-site, or they may be completely independent, such as a community-based case management program that provides services to families once they leave a shelter. Supportive service programs may be delivered by a homeless provider, that is, an agency that is primarily focused on assisting people who are homeless, or the programs may be managed by a non-profit organization that may target a much broader population than just persons who are homeless. The number and type of supportive service programs varies significantly from community to community.

The current study has defined four distinct interventions for assisting homeless families that will be tested using an experimental research design. Families entering emergency shelter who remain for at least seven days are randomly assigned to one of the designated interventions. The study design relies upon random assignment to existing programs that meet the definitions of the experimental interventions. It is important to recognize that, although practitioners and researchers use shorthand terms such as "transitional housing" or "supportive housing," these labels do not necessarily reflect uniform approaches. In reality, as Rog and Randolph (2002) note, even when programs of a particular "type" are specifically chosen for study, their characteristics can overlap considerably with other programs that nominally use a "different" model. To circumvent this ambiguity in models, the research team selected programs for study based, not on the nominal models they use or claim to use, but rather on direct assessments of the characteristics of the programs ascertained as part of site selection.

A.2 Information Users

A.2.1 How will the Information Collected be Used?

The information collected for this study will be used by policy makers and local homeless assistance program operators to provide evidence about which types of assistance (combinations of housing and services) are most effective for improving the well-being of homeless families. A cost-effectiveness analysis conducted for the study also will assess the relative costs of each intervention in relation to their impacts to provide policymakers with information about how the impacts of the interventions compare to their costs. Data are being collected at baseline using a previously approved data collection instrument. Baseline data are collected from study participants to describe the population of families seeking assistance from emergency shelter and to verify that random assignment is successful, resulting in well-matched groups without significant differences in demographic characteristics. The information will also be used to define subgroups for analysis and for improving the precision of impact estimates with covariates constructed from baseline variables. Contact information for each sample member gathered at baseline and updated at each tracking interview will be used to maintain contact with each sample member to facilitate the follow-up survey at a later date. The follow-up survey, to be conducted under a separate task order contract approximately 18 months after random assignment, will be used to measure outcomes for participating families in several domains: housing stability; self-sufficiency; adult well-being; child well-being; and family preservation. The follow-up survey is included in this request for OMB review.

A.2.2 Purpose of the Data Collection

This request for clearance covers the instrument for the follow-up survey interview to be administered to adult heads of household who enrolled in the study to measure outcomes of the interventions on five key domains: housing stability; self-sufficiency; adult well-being; child well-being; and family preservation. This request also covers the guide for key informant interviews to collect program cost data from participating programs in the study.

This evaluation will offer new evidence concerning the effects of various housing and services interventions for homeless families that will allow policymakers to make informed choices about optimal investment in homelessness assistance. The experimental design will generate data to draw rigorous inferences about the effects of the housing subsidies and services for families, independent of all other factors affecting the lives of study participants. Random assignment serves to ensure that the different intervention groups are well-matched to one another on both observed and unobserved characteristics at the time of their entry into the study. It thus establishes the strongest possible foundation for understanding which of the interventions tested can lead to improved housing stability, self-sufficiency, adult well-being, child well-being, and family preservation.

A.2.3 Who Will Use the Information

The primary beneficiary of the planned survey data collection will be HUD. HUD will use the information from the follow-up survey, in conjunction with information collected on the baseline and tracking surveys, to assess the impacts of the four types of assistance packages for homeless families. These data will begin to answer HUD's questions about impacts of housing assistance and services in all study domains: housing stability; self-sufficiency; adult well-being; child well-being; and family preservation.

Secondary beneficiaries of this data collection will be those in the public policy and social science research community who are interested in developing policy initiatives to address homelessness among families. Local service providers and decision makers will also use the data to understand how their programs work and to target resources in effective ways. Local program providers will be able to use the study findings on the impacts and cost-effectiveness of the alternative approaches to make decisions about how to focus local resources in the most effective ways. Ultimately, these data will benefit researchers, policy analysts, and policy makers in a wide range of program areas. This project offers the first opportunity to obtain reliable measures of the effects of various housing and services interventions for homeless families. The long-term indirect benefits of this research are therefore likely to be substantial.

A.2.4 Item-by-Item Justification

This section provides an overview of the contents of each of the items submitted for clearance: the follow-up interview, the key informant guide used to collect program cost data, and the participation agreement used to obtain informed consent from respondents to the follow-up survey. Instruments and necessary item-by-item justifications are presented in the appendices. Appendix A contains the participation agreement/informed consent form; Appendix B contains the follow-up survey instrument; Appendix C contains the item-by-item justification for the follow-up survey instrument; Appendix D presents the protocol for collecting program cost data.

In developing the follow-up survey instrument, we attempted to balance the need to capture all of the required data against placing undue burden on the respondents, excluding items that—while potentially interesting—are not critical to the measurement of outcomes needed to analyze the impacts of the four housing and services interventions. Another goal was to keep the time needed for survey administration to a reasonable duration, thereby limiting respondent burden. This section provides a brief overview of the content of the follow-up survey.

Follow-up Interview. The follow-up interview will be used to measure participant outcomes over the follow-up period. It will facilitate a comparison of the degree of impact of the four interventions included in the study, as well as a comparison of impact for subgroups. To measure outcomes of the interventions on child wellbeing, the parent will be asked detailed questions about the focal child, a child selected at random from among children under the age of 15 who were with the parent at baseline.

The follow-up survey will collect information on homelessness and housing stability between random assignment and the interview date; employment outcomes, including employment rates, and wages of family heads who work during the same period; family preservation, adult well-being, and child well-being. These topics will be included in the follow-up survey:

- Housing Stability
  Homelessness during follow-up period
  Residential moves during the follow-up period
  Housing satisfaction, affordability, quality
  Receipt of housing assistance; participation in housing assistance programs

- Self Sufficiency
  Employment during the follow-up period
  Earnings at the time of the follow-up survey
  Education and training
  Income sources; total family income
  Food security
  Economic stressors

- Family Preservation
  Child separations
  Placements in foster care and informal placements
  Reunifications of children with parents
  Whether housing contributed to other family separations

- Child Well-being measured from Parent reports about focal child[4]
  School attendance
  Grade completion
  Health status
  Behavioral strengths and challenges
  Pre-school/Head Start

[4] A focal child will be randomly selected from among all children present with the respondent at baseline who is 15 years old or younger. The reason for this age restriction is to ensure that by the time of the follow-up survey the focal child is not older than 18.

Home Environment

- Services Received during Follow-up Period
  Services received
  Relationship with service provider

- Adult Well-being measured for Custodial parent
  Physical health
  Substance use
  Behavioral health symptoms
  Depression
  Trauma symptoms
  Parenting

Program Cost Data. For each program that provides the study interventions, we will also collect cost and funding data, to be used to assess the cost-effectiveness of the study interventions. The ultimate goal of the evaluation is to estimate the impact of each of the housing and services interventions compared to Usual Care and to the other more intensive interventions. We will use that information in conjunction with information on intervention costs (cost per family treated) to examine the cost effectiveness (benefits per dollar spent). Thus at the end of the study, we will be able to present information on impacts and their costs to decision makers in a cost-effectiveness framework. Those decision makers can then weigh the costs and impacts of various policy options.

During initial site visits, the research team is documenting the sources of cost data for each program and is gathering basic information about the manner in which financial records are maintained and where key cost items are documented. This information is being collected on the key informant interview that was approved in 2010 with the baseline and tracking interviews. In later site visits, the research team will review financial records and meet with program staff to document program budget information on the following: housing subsidy amounts (including operating costs of project-based programs, where relevant); supportive service provision (if relevant to the intervention); and program administration. We will collect information on sources of funding used to support the intervention to validate that the costs are fully documented. To derive appropriate daily unit cost estimates, we will also collect general program information, such as program unit capacity, typical occupancy/enrollment rates, service types, and definition of a service unit. The key informant guide to be used to collect this cost data is included here as Appendix D.

Informed Consent. Study participants completed a participation agreement when they enrolled in the study, providing their informed consent to participate in the research study. The original participation agreement did not specify a time limit for consent, and we believe the consent remains in force throughout the study period. However, the research team would like to obtain an updated participation agreement from study participants at the time of the follow-up survey, which may facilitate longer term data collection from administrative data sources. Some providers of administrative data may require more recent participant consent than what was provided at the time of enrollment, between September 2010 and January 2012. The revised informed consent form is presented in Appendix A.

A.3 Improved Information Technology

Improved information technology will be used in this evaluation in three distinct ways:

- to maintain all demonstration data in a single location;
- to assist the ongoing sample tracking and locating efforts; and
- to facilitate collection of the survey data in standardized and accurate ways that also accommodates the confidential collection of sensitive data.

The ***Family Options Study*** will generate a substantial amount of data, including interviews with enrolled families at baseline, random assignment records, tracking interviews, and the follow-up survey. A study data base will be developed to manage the various sources of data. The database will house information from administrative data from HUD and other agencies that may provide data, baseline, tracking, and follow-up survey data, random assignment output, and data about each program included in each sites' study interventions.

A.3.1 Information Technology and Sample Tracking

Maintaining contact with participating families over the course of the study is essential to ensure a high response rate to the follow-up survey and to collect interim information on housing stability, family composition, and employment.

Tracking families who are homeless is challenging. Passive tracking methods often used in panel studies are not likely to be as effective with this population as in other studies. For example, homeless families are not likely to file a change of address card with the Postal Service as they move from shelter to permanent residence, nor are they likely to maintain a landline phone number. Also, without an initial residence, we will have to rely on the shelter address(es) and the family's pre-shelter address as the foundation for tracking. The pre-shelter address will provide some information as to neighborhoods where the families may have connections (we will also ask if families have an email address or cell phone). Another challenge is that some families in the study will have experienced violence or trauma either prior to becoming homeless or while on the streets or in a shelter. This may make them wary of providing the types of information needed to maintain a solid tracking database. Establishing the legitimacy of the study and trust in the local site interviewer that enrolled the family into the study and conducts the tracking interviews is critical to the success of this study.

We developed an aggressive tracking plan that utilizes both passive and active measures and involves reaching out to families every three months. This approach relies heavily on active tracking efforts, because we believe they are the most effective way to keep the families connected to the study. Our active tracking efforts are enhanced by the presence of local site interviewers who are available to help locate frequent non-responders. Passive tracking measures will support the active locating efforts along the way. Exhibit A-1 summarizes plans for tracking, begun under the first task order contract. Passive tracking for this study will include periodic searches of proprietary databases. We will also retain any address or phone number information provided through administrative records from the emergency shelters and, for the treatment groups, program data collected by the providers of the interventions. All tracking updates collected are maintained in the study database.

Active tracking began with the baseline survey when we determined previous residential addresses (most recent prior to shelter entry) and three relatives or friends that we can consult for future locating efforts. The research team has also been conducting in-person locating efforts for study participants every three months after random assignment, beginning with a telephone call and then alternating between a tracking letter and an in-person locating and a tracking interview.

Exhibit A-1. Participant Tracking Activities

Tracking Activity	Who is Covered	Purpose	Timing
Passive Methods*			
National Change of Address (NCOA)[a]	All program participants not otherwise located	Update contact information	Semi-annually, beginning 6 months after random assignment
SSA death index	All program participants not otherwise located	Update contact information	Semi-annually, prior to contacting participants
Phone number data	All program participants not otherwise located	Update contact information	Quarterly, beginning 3 months after random assignment
Active Methods			
Baseline Survey	All program participants	Obtain contact information, residential history, and secondary contact information	Immediately before random assignment
Initial Telephone Contact	All program participants	Update contact information; strengthen family connection to the study	3-4 months post random assignment
Interim Tracking Survey	All program participants	Update contact information, household composition, and housing information	Following the 6th and 12th month post random assignment Continuing after the 18month follow-up survey--every other quarter until the end of Task Order 3. (In the 24th, 30th, 36th, etc. months after random assignment)
Interim Tracking Mailing	All program participants	Update contact information	Following the 9th and 15th month post random assignment Continuing after the 18month follow-up survey--every other quarter until the end of the next task order. (In the 21st, 27th 33rd, etc. months after random assignment)
18-Month Follow-up Survey	All program participants	Collect outcome measures for adult and one focal child	16 to 18 months post random assignment

a. National Change of Address (NCOA) System of the U.S. Postal Service.
b. HMIS will be used where available.

A.3.2 Information Technology and Survey Administration

Information technology assists in the survey data collection in three ways:

1. Design and management of the sample;
2. Survey administration; and
3. Survey data management.

Each of the study surveys will be administered using computer-assisted personal interviewing (CAPI) technology. The CAPI technology ensures that the survey data is of high quality. Data quality is enhanced in three key ways. First, CAPI technology controls the flow of the interview, ensuring that skip patterns are followed properly. It also allows the interviewer to both confirm responses (to minimize data entry errors) and check the logic of some responses by establishing allowable range of values. CAPI technology also allows interviewers to easily record verbatim responses to open-ended questions. Further, it records the current status of each case to facilitate monitoring of response rates and prompt resolution of problems if necessary.

A.4 Duplication of Similar Information

The purpose of the follow-up survey for the ***Family Options Study*** is to obtain information about the status and well-being of families who enrolled in the study, over the period following study enrollment. Families who reside in emergency shelters in the designated study sites are the sample for this evaluation. Information about the study participant's experiences after random assignment with respect to homelessness history, housing, employment status, participation in education and training, family composition, family preservation, income and income sources, physical and mental health, substance use, and other characteristics is not available through any other source. These data are essential for measuring outcomes of the study interventions needed to conduct the impact analysis.

Duplication will be avoided in this study by use of the centrally maintained database, which will link all data collected in the follow-up survey to information collected from study participants previously on the baseline and tracking surveys, as well as with any administrative data collected for study participants. This reduces the need to ask about personal characteristics and background factors on the follow-up survey. In addition, information collected on the tracking interviews has been stored in the study database and will be referenced during the follow-up interview. In this way, the follow-up survey will involve verification and correction of previously-provided information on family composition and contact information rather than collecting each item anew.

A.5 Small Businesses (Involvement of Small Entities)

Respondents for this data collection include families who enrolled in the study and local homeless assistance programs that operate the programs included in the interventions being studied (these programs will provide cost data). Some of the homeless assistance programs are private, non-profit organizations. Estimates of the reporting burden to these entities, to provide information to the researchers about the costs of their programs are provided in Section A.13. Data on program costs are needed to compare costs across the interventions and to conduct a cost-effectiveness analysis. Local programs will not be asked to develop new reporting procedures or data collection methods, but will instead meet with the research team to answer questions about their program operations and costs. If local programs already produce reports that contain the information needed for the evaluation, the research team will collect the needed information from these existing reports, thereby reducing the time needed to answer the study questions and the reporting burden.

A.6 Less Frequent Data Collection

The follow up survey data collection effort is essential to conducting the analysis of the impacts of the housing and services interventions. Less frequent data collection would jeopardize HUD's ability to conduct the impact analysis.

A.7 Special Circumstances

The proposed data collection activities are consistent with the guidelines set forth in 5 CFR 1320.6 (Controlling Paperwork Burden on the Public, General Information Collection Guidelines). There are no circumstances that require deviation from these guidelines.

A.8 *Federal Register* Notice/ Consultation Outside the Agency

In accordance with the Paperwork Reduction Act of 1995, the Department of Housing and Urban Development (HUD) published a notice in the *Federal Register* on June 20, 2011. The docket number was **FR-5486-N-15** and the document number is FR Doc.2011-15270 Filed 6-17-11. The *Federal Register notice* appeared on pages 35903-35904. The authority is Section 3506 of the Paperwork Reduction Act of 1995, 44 U.S.C, Chapter 35, as amended. The notice provided a 60-day period for public comments, and comments were due by August 19, 2011. A copy of the notice is shown in Appendix E.

The ***Family Options Study*** design was developed and is being implemented with the assistance of Abt Associates Inc., the prime contractor. Several subcontractors and consultants have collaborated with the Abt team to develop the study design. Key members of the Abt team include Dr. Stephen Bell, Dr. Jill Khadduri, Mr. Jacob Klerman, Ms. Michelle Wood, Ms. Brooke Spellman, and Ms. Mary Joel Holin. Dr. Marybeth Shinn (Vanderbilt University), Dr. Dennis Culhane (University of Pennsylvania), Dr. Martha Burt (Urban Institute), Dr. Ellen Bassuk (Center for Social Innovation/National Center on Family Homelessness). Dr. Beth Weitzman (New York University) and Dr. Larry Orr also worked with Abt Associates to develop the study design.

HUD has collaborated on the design of the evaluation with the Abt Associates team throughout all phases of the study to date. The purpose of such consultation is to ensure the technical soundness and usefulness of the data collection instruments in carrying out the aims of the evaluation.

A.9 Payments to Respondents

Incentive payments are a powerful tool for maintaining low attrition rates in longitudinal studies, Respondents completing the follow-up survey will receive $50 for their time. The use of incentive payments for the Family Interventions Study can help ensure a high response rate, which is necessary to ensure unbiased impact estimates. Low response rates increase the danger of differential response rates between the four intervention groups, leading to non-comparability between the two groups and potentially biased impact estimates.

Three factors helped to determine the incentive amounts for each survey:

1. Respondent burden, both at the time of the interview and over the life of the study;
2. Costs associated with participating in the interview at that time; and
3. Other studies of comparable populations and burden.

The ***Family Options Study*** panel is small (2,305) and avoiding attrition is essential to the success of the study. This population size will permit detection of impacts in the likely size range only if panel attrition is kept very low (precision of the impact estimates is discussed in Section B.2). Even with no attrition, only fairly large effects can be detected. Therefore, we believe it is absolutely necessary to take every possible step to minimize panel attrition over the study follow-up period. This minimal attrition rate is the core justification for an incentive system for the follow-up interview. The need to maintain the panel is further complicated by the housing instability likely in this study population.

We also believe that the study population for this evaluation is likely to respond positively to incentive payments. Previous research has shown that sample members with certain socio-economic characteristics are significantly more likely to become survey respondents when incentive payments are offered. In particular, sample members with low incomes and/or low educational attainment have proven responsive to incentives, as have minority group members. These characteristics are expected to be heavily represented in this study panel (Duffer et al. 1994); Educational Testing Service (1991).

Based upon these considerations and prior research experience, we believe that that the use of incentives will improve substantially the probability of panel retention and the viability and power of this experimental research study. The ***Family Options Study*** represents the first experimental research project HUD has initiated to test the effects of various interventions to assist homeless families; the Department thus places a high level of importance on ensuring that the study panel remains of sufficient size so that the intended statistical measures can be used to draw firm policy conclusions.

A.10 Confidentiality

The subjects of this information collection and the nature of the information to be collected require strict confidentiality procedures. The information requested under this collection is protected and held confidential in accordance with 42 U.S.C. 1306, 20 CFR 401 and 402, 5 U.S.C.552 (Freedom of Information Act), 5 U.S.C. 552a (Privacy Act of 1974) and OMB Circular No. A-130. This data collection is also protected under the existing System of Records Notice (SORN) for the Homeless Families Impact Study Data Files, which HUD published in the Federal Register on October 4, 2010 (FR-5386-N-10). Detailed procedures used to obtain informed consent are discussed below along with data security procedures.

A.10.1 Informed Consent

Procedures used to enroll participants into the study were designed to ensure that participants were able to make a genuinely informed decision about study participation. Vigorous outreach with a clear message and strong supporting materials were used to ensure that those assigned to the interventions tested through the study understand the opportunities available and were likely to take advantage of the intervention's benefits.

Those families who participate actually face little risk by agreeing to be part of the evaluation. The outreach effort emphasized this fact. Families who reside in emergency shelter for at least seven days were invited to enroll in the evaluation. The informed consent of each sample member was obtained through a signed consent form, the "Participation Agreement," which describes the evaluation, the process of random assignment, and the information requirements of the evaluation. The research team will update the participants' consent at the time of the follow-up survey. The revised form is shown in Appendix A of this submission.

A local site interviewer hired and trained by the research team conducted intake and random assignment in each study site. The site interviewer described the other implications of participating in the study, which relate mostly to data collection. Volunteers were required to complete the baseline interview and also agreed to be contacted in the future for tracking and for the follow-up interview. Families who agreed to enroll in the study also granted the researchers permission to access information about them from other administrative records systems, like HUD's Homeless Management Information System (HMIS), and HUD's Public and Indian Housing's Information Center (PIC), and from other providers of subsidized housing programs in order to monitor receipt of housing assistance. Permission to access data from other sources will also be necessary in the event that other types of administrative data are collected for other purposes, such as measuring outcomes under future task orders.

A.10.2 Data Confidentiality Protections

The data collected in the surveys for the ***Family Options Study*** as well as any administrative data collected from HMIS, HUD's Public Housing Information Center (PIC) data system (this system provides records on the receipt of housing assistance through the public housing or Housing Choice Voucher programs), or any other source will be used only for the purposes of evaluating the housing and services interventions tested in the evaluation. All mailings to participants to inform them of the upcoming follow-up survey and all in-person introductions will include assurances that participation is voluntary, that all information will be kept confidential, and that the respondents' answers will be reported only in aggregate form. An assurance of confidentiality is included in the Participation Agreement (see Appendix A). Abt employees and telephone and field interviewers sign a pledge of confidentiality as a condition of employment. Separate data files will be maintained for questionnaire responses and identifying information; linking will be possible by a common identification number. For both survey data and corresponding administrative data on sample members, computer security will be maintained by passwords known only to project staff members that require access to these files.

In addition, all design documents, random assignment protocols, and analysis files must be protected. The study's data collection plan, this OMB statement, and the proposed survey instrument are also subject to the review and approval of Abt Associates' Institutional Review Board (IRB). Abt Associates' IRB previously approved the study design, baseline, and tracking survey data collection procedures.

A.10.3 Data Storage and Handling of Survey Data

To ensure data security and enhance data quality, the survey data collection will be done using Computer Assisted Personal Interviewing (CAPI) technology. Survey data will be collected using the Confirmit CAPI System. The Confirmit CAPI System has the following security features:

1. Data on the CAPI console is encrypted with Rijndael algorithm (256 bit key).
2. CAPI data transfers use Web Services Enhancements (WSE 3.0) for security. The messages sent and received from the console are encrypted. WSE 3.0 provides AES128 + RSA 1.5 as default algorithms for symmetric encryption and key-wrap. The contractor has also implemented Secure Conversation with an X509 certificate (which uses 1024 bit key).

In addition to the standard security features offered through the CAPI software, the contractor has implemented the following enhancements:

1. Use of PGP whole disk encryption on all CAPI laptops, and
2. The file transfers are made to servers running SSL.

Once the surveys are completed, data will be transferred from the CAPI system to the study's database. Transfer to the database will be done in a secure manner, using a FIPS-certified encryption algorithm.

A.11 Sensitive Questions

The follow-up survey includes questions about history of homelessness, household income and other financial circumstances. The interviews also include questions about physical and emotional health, substance use, and questions about the focal child's health, educational attainment, and behavior-- items that can be considered sensitive. These items are necessary to evaluate the impacts of the housing and services interventions being tested. As with all information collected on the interviews, responses will be kept confidential and will be used only for the purposes of evaluating the housing and services interventions tested in the evaluation. To encourage candid responses, respondents will be reminded during the interviews that their responses will be kept confidential. Respondents will also be reminded that they can refuse to answer any question.

A.12 Burden Estimates (Total Hours and Wages)

The follow-up survey data collection for the ***Family Options Study*** will be implemented beginning in June 2012 and continuing through September 2013. Interviewing is expected to continue over a 16-month period, in order to attempt interviews with study participants at least 18 months after random assignment.

Exhibit A-2 shows the estimated respondent burden for the follow-up survey interview and for key informant interviews to collect program cost data. It shows the average time, in hours, estimated to be spent by demonstration participants who complete the interview. It also shows the minimum and maximum estimates for the length of the surveys, depending on the individual circumstances of the respondents (primarily the size of their families, whether they are currently working, and the extent of their homelessness histories).

Exhibit A-2 also shows the estimate of burden hours of the key informant interviews to gather cost data. It shows the time, in hours, estimated to be spent by local program staff and program directors to complete the interviews needed to gather program-level data. The total burden of data collection from these staff is 252 hours (based on a total of 126 programs across the study sites) over a period of six months during 2012.

Exhibit A-2. Estimated Respondent Burden Hours and Costs

Form	Respondent Sample	Number of Respondents	Average Time to Complete (Minimum, Maximum) In Minutes	Frequency	Total Burden (hours)
Follow-up Survey	All enrolled families (N=2,305)	1,729	60 (55, 65)	1	1,729
Cost Data collection	Representatives of homeless intervention providers in the 12 study sites	126	120 (110-130)	1	252
TOTAL Burden Hours					**1,981**

Using the average times, the total burden of the Impacts of Housing and Service Interventions for Homeless Families data collection from survey respondents is 2,165 hours. The total burden is reflected as burden hours, and no separate cost burden has been calculated.

A.13 Capital Costs (Maintenance of Capital Costs)

This data collection effort involves no recordkeeping or reporting costs for respondents other than the time burden to respond to questions on the data collection instruments as described in item A.12 above. There is no known cost burden to the respondents.

A.14 Costs to the Federal Government

The estimated cost to the federal government of the planned follow-up survey data collection activities for the Impact of Housing and Services for Homeless Families evaluation is $1,426,568. The estimated costs of the planned cost data collection from review of cost records is $235,534. These are subtotals of the total cost of the final phase of the evaluation, $4,960,015. The final includes costs associated with follow-up survey data collection, collection of administrative data, analysis of intervention impacts and costs, and preparation of final impact report. The final phase does not include costs associated with research design, site recruitment, participant enrollment, and baseline data collection.

Exhibit A-3 shows the costs to the federal government of the planned follow-up survey data collection and program-level cost data collection activities. HUD's current evaluation contractor, Abt Associates, prepared these estimates. These costs are entirely federal costs.

Exhibit A-3. Estimated Costs to the Federal Government

Data Collection Activity	Cost to the Federal Government
Participant Surveys	
Follow-up Survey	$1,426,568
Key Informant Interviews to collect program cost data	$235,534
Total Data Collection Costs	**$1,662,102**

A.15 Program or Burden Changes

This request for clearance does not involve a change in burden due to any program changes or adjustments. It concerns a revision to an existing collection (2528-0259). The information collection included in this supporting statement will increase the public reporting burden.

A.16 Publication and Tabulation Dates

The data collected for the ***Family Options Study*** will be analyzed, tabulated, and reported to HUD by the evaluation contractor, Abt Associates Inc, and Abt's team of subcontractors and consultants.

A.16.1 Time Schedule for Analysis and Reporting

Collection of baseline survey data from study participants began in September 2010 and will end after all sample members are enrolled in the study, anticipated in January 2012. The baseline survey data set will be cleaned and appended to the study database on a rolling basis. The analysis of these baseline data will be carried out in the following months, with an interim report on the evaluation completed in June 2012. Follow-up survey data collection is expected to begin in April 2012 and continue through July 31, 2013.

Baseline Data Collection:	September 2010 through January 2012
Participant Tracking:	18 months for each participant beginning with the baseline survey
Program-level Data Collection:	June – December 2012
Baseline Data Analysis:	March 2012 through June 2012
Interim Report:	Draft June 2012; Final September 2012

Follow-up survey data collection:	June 2012—September 2013
Impact Analysis	October 2013—May 2014
Draft Final Report	May 2014
Final Report	December 2014

The data collected from the sites about the programs that implement the study interventions, along with information from participants collected through the baseline survey and tracking, will be used to develop the Interim Report in 2012.

Results from the impact analysis will be reported in the final report using data collected in the follow-up survey. Impact findings will be reported in tables that show estimated impacts on outcomes measured with survey data.

A.16.2 Analytic Techniques, Tabulations, and Reporting

The ultimate goal of the study is to estimate the impact of each of the housing and services interventions compared to Usual Care and to the other interventions. The baseline data collection and participant tracking for the study were approved in a previous submission for OMB clearance. This submission seeks approval for the collection of follow-up survey data and program cost data. Exhibit A-4 displays a template for presenting information on intervention impacts using data from the follow-up survey.

Exhibit A-4. Impacts on [Key Outcome 1] and [Key Outcome 2] at Follow-Up

Outcome/ Impact Comparison	SUB Mean	CBRR Mean	PBTH Mean	UC Mean	Impact Estimate	Standard Error
Key Outcome 1 [REPLACE WITH NAME OF KEY OUTCOME]						
SUB vs. UC	0.nn			0.nn	0.nn	0.nn
CBRR vs. UC		0.nn		0.nn	0.nn	0.nn
PBTH vs. UC			0.nn	0.nn	0.nn	0.nn
SUB vs. CBRR	0.nn	0.nn			0.nn	0.nn
SUB vs. PBTH	0.nn		0.nn		0.nn	0.nn
CBRR vs. PBTH		0.nn	0.nn		0.nn	0.nn
Key Outcome 2 [REPLACE WITH NAME OF KEY OUTCOME]						
SUB vs. UC	0.nn			0.nn	0.nn	0.nn
CBRR vs. UC		0.nn		0.nn	0.nn	0.nn
PBTH vs. UC			0.nn	0.nn	0.nn	0.nn
SUB vs. CBRR	0.nn	0.nn			0.nn	0.nn
SUB vs. PBTH	0.nn		0.nn		0.nn	0.nn
CBRR vs. PBTH		0.nn	0.nn		0.nn	0.nn

Notes: SUB = Subsidy Only; CBRR = Community-Based Rapid Re-housing; PBTH = Project-Based Transitional Housing; UC = Usual Care.

*** = p<.01, ** = p<.05, * = p<.10 in two-tailed t-test.

Impact estimates are regression-adjusted.

All statistics are computed using analysis weights reflecting sample design.

A.17 Expiration Date

All data collection instruments created for the Impact of Housing and Services Interventions for Homeless Families evaluation will display prominently the expiration date for OMB approval.

A.18 Certification Statement

This submission describing data collection requests no exceptions to the Certificate for Paperwork Reduction Act (5 CFR 1320.9).

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