**Attachment V: The Obesity & Type II Diabetes Risk Assessment Semi-Structured Interview**

*If you require information to be presented in an accessible format or reasonable accommodations to participate in this study, please contact us with any specific requests by calling XXX-XXX-XXXX or emailing XXXX@XXXX.XXX. If you require language assistance to participate in this study, please contact us with any specific language assistance requests or needs.*

**Paperwork Reduction Act Burden Statement**

This collection of information is voluntary and will be used to evaluate the US Department of Housing and Urban Development’s Community Choice Demonstration. Public reporting burden for this collection of information is estimated to average 90 minutes per response, including the time for reviewing instructions, gathering, and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number for this collection is OMB 2528-0337 which expires on XX/XX/XXXX. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to NAME at [XXXX@XXXXX.XXX](mailto:XXXX@XXXXX.XXX) or call XXX-XXX-XXXX.

**Privacy Act Statement**

**Authority:** Section 502 of the Housing and Urban Development Act of 1970 (Public Law 91-609) (12 U.S.C. §§ 1701z-1; 1701z-2(d) and (g)).

**Purpose:** This information is being collected to evaluate changes in the housing quality and health and well-being of families who enrolled in the Community Choice Demonstration (CCD). Data collection will occur between January 2024 and June 2027.

**Routine Use:** Please refer to System of Record Notice.

**Disclosure:** Your participation in this information collection is voluntary and you can choose not to answer any question that is asked. Your responses will not affect your current or future receipt of housing assistance or other benefits. Some study activities are being funded by the National Institute of Diabetes and Digestive and Kidney Diseases.

**SORN ID:** Housing Choice Voucher (HCV) Mobility Demonstration Evaluation Data Files, PD&R/RRE 09

*First, I’d like to learn a bit about your family, community, and how you spend your time to understand how your housing fits into your life.*

# Section 1: WARM-UP, BACKGROUND, FAMILY ROSTER AND DYNAMICS

1. **Let’s start with** **the story of your life. You know, where you grew up, with whom, and how you got to where you are today.**

[Probes: parents, life at home, relationship with family members, school, neighborhood]

[**Note**: *This story can last between 10-20 minutes – at least. Allow/encourage this story to weave into the residential history. Use important life events to anchor the story in time. We’d like to keep the interviews within two hours, but I always find this particular opening section to set the tone for how people perceive the whole thing moving forward, and the time when they realize this is not a survey, but rather a chance to tell stories in detail, as they choose.*]

1. **Let’s talk more specifically about the past year. Generally speaking, how have things been this past year for your family?**

Tell me about any big changes your family has experienced.

[Probes: changes in employment status; how children are doing in school and with their friends; relationship with landlord, neighbors, other family members; changes in neighborhood conditions; changes in support system or finances]

# Section 2: RESIDENTIAL MOBILITY AND NEIGHBORHOODS

*A really important part of our study is understanding how people end up living where they do, and why they might move from one place to another. In the section I am going to ask you about all the places you’ve lived in about the past 5 years or so.*

1. **Thinking back, tell me a little about the places you’ve lived in the past 5 years or so.**

What was/were the address(es)?

Tell me the whole story of how you ended up there.

What was the main reason you moved to that place(s)?

Who lived with you there?

Tell me the whole story of how you left that place.

What was the main reason you left that place?

# Section 3: CURRENT HOUSE

1. **What about the place you are living right now? Tell me the whole story of how you ended up here.**

[Probes: What was the main reason you ended up here? How does living here work well for your kids? What makes it not work so well for your kids’ needs?]

1. **Tell me about all of the other places you thought about living, but didn’t work out for one reason or another.**

What about places you considered but decided against?

What about places you wanted to live at but couldn’t for some reason?

1. **[Did you work with the mobility counselors for this move? What was that like for you?]**
2. **We’ve heard that people sometimes have trouble moving to the places they want to. Tell me about a time that’s ever happened to you?**

**What was the main reason you couldn’t move there?**

[Probes: eviction, foreclosure, credit problems, transportation, location of employment]

1. **We’ve heard that people sometimes have trouble moving to the places they want to because of their credit. Tell me about a time that’s ever happened to you?**

[Probes: landlord rejection; no credit vs poor credit; proof of income to rent ratio]

1. **How has your credit (or lack of credit) gotten in the way of other things/purchases?**

[Probes: car or appliance purchase; loan]

1. **Some people say they limit their searches to certain neighborhoods, others say they’re open to almost any area. How about for you?**
2. **Tell us about any areas you would try to avoid living in.**
3. **I’m interested in your ideas about what aspects of this apartment/home work well for your family and children, and which don’t work so well. Tell me more about that.**

[**Note:** *This is an important question. If possible, have the respondent actually show you the features of the unit that they feel work well or not well for the family. Where do people sleep, eat, and spend time? We want to understand philosophies of what makes for a good environment for kids here*.]

**What would make it better?**

[Probe: Cost, size, location, neighbors]

1. **Some people say that different things about their home can make them feel healthy or unhealthy. When you think about different things about your house that make you and your family feel healthy, what sorts of things come to mind? Tell me about that. What about things that feel unhealthy about your home?**

[Probes: do you have access to a yard or common area? Does the kitchen work well for preparing meals? How’s the air quality in your home? Do you have problems with pests?]

# Section 4: CURRENT NEIGHBORHOOD

1. **Tell me about your neighborhood.**

How would you describe it to someone who had never been here?

What do you like best about living here?

What do you like the least? Tell me more about that.

Where do you go in the neighborhood?

Where do you walk to (groceries, errands, shopping, restaurants, visiting friends, etc.)?

1. **Some people say their neighborhood is safe. Others say their neighborhood is not very safe. How about for you? What aspects of the neighborhood make it safe? What aspects of the neighborhood make it unsafe?**

Tell me about the last time you felt unsafe in your neighborhood. Tell me more about that.

What about your kids; when was the last time one of your kids felt unsafe in your neighborhood? Tell me more about that.

1. **Some neighborhoods have all kinds of different people in them, and some are not that diverse. What about this one? What kinds of people live here?**

*[****Note****: ask this in a way that you’re comfortable with. See what they say first, then probe for race. They also might refer to other characteristics such as immigrant status, voucher holders, age, lifestyle etc. Probe for being made to feel out of place, discriminated against].*

1. **If you could choose the mix of folks you wanted to live in your neighborhood, what would that look like? Tell me more about that**.
2. **I’m interested in your ideas about what aspects of this neighborhood work well for your family and children, and which don’t work so well. Tell me more about that.**

[**Note:** *This is an important question. If possible, have the respondent actually talk through parts of the block/neighborhood that they feel work well or not well for the family— you can use a map here if appropriate]*

[*Probes: how long it takes kids to get to school, kids have friends in the neighborhood, family are close by, grocery stores easily accessible, transportation easily accessible, close to work, laundromat nearby*]

**What would make it better?**

1. **Are there people you’ve gotten to know because you live in this neighborhood? Tell me about these relationships. What sorts of things do you do together? Talk about that?**

*[Probe: ask about becoming friends with people who are different including different race and socioeconomic status?*

1. **What about friends and family? Do they live in the neighborhood? Tell me about what it’s like to have them nearby/far away?**
2. **Some people say that different things about their neighborhood can make them feel healthy or unhealthy. When you think about different things about your neighborhood that make you and your family feel healthy, what sorts of things come to mind? Tell me about that. What about things that feel unhealthy about your neighborhood?**

*[Probes: Does your neighborhood make it easy or hard to walk for exercise? Why? Are there playgrounds that you feel safe in? Are there sports teams? Basketball courts? How is the air? Are there things that make it hard to eat healthy?]*

# Section 5: CHILDREN’S SCHOOLING AND SOCIAL NETWORKS

1. **Tell me about each of your children. Let’s start with their first initial and ages.**

**Tell me what it’s like to raise a X year-old son/daughter? Do for each child.**

*[****Note:*** *Prioritize and ask for every kid in the house. Understanding how parents make trade-offs for kids of any age is important to understand. Of course, the more kids, the more time, so account for this].*

1. (FOR EACH CHILD) **What’s it like for X at their school? Tell me about how X is doing?**

Tell me about X’s teachers?

In general, what have your experiences been with X’s teachers?

1. **Sometimes kids go to schools that are calm and peaceful. Other kids go to schools where there is a lot of fighting or competition—things like that. How about for your kids?**
2. **Tell me about your kids’ friends. What are they generally like? How do they end up spending time together? What sort of things do they like to do? Do they live close by? How did they meet? Do you think they are good friends for your child?**

# Section 6: HEALTH

*In this section we are going to talk a bit about your health and health care.*

1. **Tell me about your health in general, how are you doing?**

If you had to rate your health on a scale of one to ten, with ten being your health is excellent, what would you say?

Tell me about any specific health problems that you have. Probe for diabetes and high blood pressure. What about conditions that run in your family?

1. **How about your kids? How would you rate their health on a scale of one to ten? Tell me more about that.**
2. **Tell me about how you get health care now.**

[Probe: location and transportation, see a regular provider or not [MOVE] Have you kept the same doctors since you moved? [If doctor changed] How did you find a new doctor? (Probes: neighbor recommended, PHA helped, friends recommended, found on my own)

1. **[You mentioned diabetes/high blood pressure. Tell me a bit about how you manage that.]**

Are there things in your neighborhood that makes it harder or easier to manage your diabetes/high blood pressure? (Probe: Are there things in your home that make it harder to manage your medicines? Does the ability/inability to cook in your home impact managing your diabetes? What about prices of foods in your neighborhood? How about getting your medicines? Or going to the doctor?) [MOVE] How has this changed with your move?

1. **What kind of things stress you out? Tell me about the most recent time when you were down for a while. What did that feel like?**

How did it affect your daily routine or family routines? How did it affect the time you spent with your children?

Who was there to help? What sorts of things did you do to feel better? How did you get through that time? What about smoking cigarettes or drinking?

1. **What kind of things make you feel good? What kinds of things make you happy or excited? Tell me about the most recent time that happened.**

How did it affect your daily routine or family routines? How did it affect the time you spent with your children?

1. **Sometimes where we live really affects how we feel on a daily basis, sometimes not so much. Does living around here ever make you happy or get you down? Tell me more about that. (*Probe*: fun things to do, greenspace, stress, traffic, safety, amenities, home problems, etc.). How about any things about living around here that cheer you up?**
2. **How does living here affect your parenting? Tell me more about that. What gets in the way of your parenting how you want to? (*Probe*: how you spend time with kids; where you spend time with kids or family; how about safety? Stress?, etc.).**
3. **What would make parenting easier for you? (Probe: how about in terms of the house? The neighborhood? Anything else?)**
4. **ALTERNATIVE: What kinds of things do you wish you could do for you children but can’t right now? (Probe: more time; more time outside; more time with homework; more time relaxing or going out; local activities; parent school association or school activities; meet your kids’ friends/parents of friends)**
5. **How would you describe your sleep?** Are there things about your house and neighborhood that impact your sleep? (Probe: Noise, traffic, lights, sharing rooms, phones. [MOVE] How has this changed with your move?)
6. **What about your children’s sleep?** Are there things about your house or neighborhood that make it harder or easier for them to sleep? Where do your children sleep? Do they share rooms?
7. **This next question is a bit different. Some people find that they spend a lot of time online connecting through social media. What’s it like for you? And for your children?** Do you stay in touch with people who you used to live nearby?

# Section 7: EATING

I’d like to change topics a bit and talk about the way you eat and how you shop for food.

1. **Tell me about what it’s like for you to go food shopping in your neighborhood?** Where do you like to go? And what’s it like to shop there?

How often do you shop for groceries there? Do you go to multiple places for groceries? How do you get there and how long does it usually take to get there? If you use SNAP (food stamps) does where you shop accept them?

1. **What sort of things do you like to eat on a typical weekday?** What do you do for breakfasts? Who does the cooking in the family and what’s that like?
2. **What about eating out or bringing in food**? Tell me about what the options are in your neighborhood and what you like to eat.
3. **What about your child[ren]? What do they say about the food at their school or childcare?**
4. Is there anything about your current housing unit or neighborhood that makes it difficult for you and your family to eat healthy? What would make it easier?

# Section 8: PHYSICAL ACTIVITY

Let’s turn now to talk about activities you and your family like to do.

1. **Tell me about what it’s like for people to walk around your neighborhood?** What makes it nice to walk around your neighborhood? Are there things that make it feel uncomfortable or dangerous to walk around your neighborhood? [MOVE] How has this changed with your move? Probe: do you see others walking around the neighborhood? Do you typically drive places, walk, take buses or public transport?
2. Are there places you go to keep active? Tell me about them. (Probe: do you walk to school, stores, exercise?)
3. **What kind of physical activities do your kids like to do?** Where do they spend time on weekends and after school? Are there parks or playgrounds nearby? Do you or your children use them? Why or why not? (Probes: play sports at school, play pick-up games with friends)
4. **How do you feel about letting your kids explore the neighborhood on their own?** Are there places you would or wouldn’t let them play outside? [MOVE] How has this changed with your move? (Probe: is it safe for them to play outside? Other children to play with?)

# Section 9: WEIGHT

We wanted to now talk a bit about how you think about weight.

1. **Some people say they feel unsatisfied with their weight and others feel satisfied with their weight. Tell me about how you think about your body and your weight.**

If unsatisfied, what was the first time you became aware of this?

Has your satisfaction changed over time?

1. **Are there times you’ve changed the way you eat to lose weight or be healthier in the past?** Tell me more about that. What made you decide to diet and what was it like for you?

# Section 10. CONCLUSION

1. **As we close, I’d like to hear about your hopes and dreams for the future. Tell me what you’d like to see happen for yourself and your children.**
2. **Is there anything else you’d like to tell me before we end. Anything that you think I’ve missed or that I should know?**
3. **Is there anything I should have asked that I didn’t?**

*Thank you for your time! [discuss gift card logistics] [also collect future contacts list]*

**Background information**

*Data to be collected after tape recorder is turned off and will be used to describe the sample. Questions will be asked if answers were not explicitly raised during the recorded portion of the interview.*

1. What is your gender (female, male, neither, non-binary/genderqueer, refuse to answer)?
2. How old are you?
3. What racial group do you identify with (Black or African American, White, Asian, American Indian/Alaska Native, Native Hawaiian or Other Pacific Islander, Other, More Than One Race, Refuse to Answer)?
4. Do you consider yourself Hispanic or Latino (yes/no)?
5. Please tell me about the number of people who live with you. How many children live here with you? What are their ages and what grade are they in? [*Note that any names mentioned will be removed/redacted*.]
6. About how long have you been in the voucher program?
7. About how long have you lived in this neighborhood?
8. About how long have you lived in this specific home?
9. Did you move with the Community Choice Demonstration?
10. How far did you go in school?
11. Do you have any jobs right now? Tell me about your last job?