**INSTRUMENT 2: BASELINE SURVEY**

**Evaluation of the Community Choice Demonstration**

[FOR REVIEWERS:

Enrollment is a five-step process. This document, the Baseline Survey, represents the fourth step.

1. Household Roster [Administered by PHA staff; either in-person or remotely (videoconference or phone)]
2. Informed Consent [Administered by PHA staff; either in-person or remotely]
	1. Head of Household Consent
	2. Consent for Child Data Collection (signed by Head of Household)
	3. Other Adult consent if other adults are present. If not, Other adult consent will be obtained after enrollment.
3. Baseline Information Form (BIF) [Administered by PHA staff; either in-person or remotely]
4. Baseline survey [Self-administered by Head of Household; either in-person on provided tablet or remotely on own device]
5. Random Assignment, and communication of assignment status [Performed by PHA staff]

As noted above, the baseline survey will be self-administered by household heads during the enrollment process. The baseline survey comes after PHA staff administer the Household Roster, obtains informed consent, and administers the BIF. If enrollment is done in the office, PHA staff will provide the head of household with a tablet, set them up at a computer workstation, or allow the head of household to complete on their own smartphone. If the enrollment is done remotely, the head of household will receive a personalized link to log in to the enrollment tool and complete the survey on their own device. After the household head completes the baseline survey, the PHA staff will perform random assignment and provide them with an explanation on next steps and their $25 incentive.]

# Survey Introduction

Thank you for taking the time to fill out this survey. The information you provide may be used to help HUD improve the voucher program and may be used to help other families in the future. You will be asked some questions about your current neighborhood, your experiences, and your overall well-being. Your responses will not affect your current or future receipt of housing assistance or other benefits. Please remember that your participation is voluntary and you can choose not to answer questions. We appreciate your input.

The Paperwork Reduction Act 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 45 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 collection of this information has been approved by the Office of Management and Budget under OMB No. XXXX-XXXX, which expires on MM/DD/YYYY. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to XX at XXXX@XXX or NNN-NNN-NNNN.

[**Reviewer Note**: All items require a clicked response, but that response can be “Prefer not to answer”. Questions are displayed one numbered question at a time, and respondents are required to click “Continue” before displaying next question. Uppercase letter (“A”, “B”,…) denotes a non-mutually exclusive response option or a distinct item in a multipart question. Respondents will see a check box to select their response(s). Questions with non-mutually exclusive response options will indicate when they can check all that apply.]

The first set of questions asks about your housing and neighborhood.

1. Where do you currently live?
2. In an apartment, home, or room that you rent or sublet
3. In a home or apartment that you own
4. In an apartment, home, or room that friends or extended family rents where you contribute to part of the rent
5. With friends or family, where you do not pay any rent
6. Homeless or in a group shelter (*Skip current home items: Q‎2, Q6H, Q6I*)
7. Other housing arrangement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Prefer not to answer
9. Do you agree or disagree with this statement: “The size or physical condition of my home makes it harder to be the parent I want to be for my children”?
	1. Strongly agree
	2. Agree
	3. Agree somewhat
	4. Disagree
	5. Strongly disagree
	6. Prefer not to answer
10. How many years have you lived in the [SITE/METROPOLITAN AREA NAME] area in your lifetime?
11. Number of years (please round to the nearest number): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
12. Less than one year
13. I don’t live in the [SITE] area
14. Prefer not to answer
15. How many years have you lived in your current neighborhood?
16. Number of years (please round to the nearest number): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
17. Less than one year
18. Prefer not to answer
19. Which of the following statements best describes how satisfied you are with your current neighborhood?
20. Very satisfied
21. Somewhat satisfied
22. In the middle
23. Somewhat dissatisfied
24. Very dissatisfied
25. Prefer not to answer

The next questions are about specific features of your current neighborhood.

1. How satisfied are you with … [For each: Very satisfied to Very dissatisfied, Prefer not to answer; Repeat “How satisfied are you with…” for each subpart]
	1. The friendliness of neighbors in your neighborhood?
	2. The racial and ethnic mix of your neighborhood?
	3. How near your neighborhood is to your job? [Responses: Very satisfied to Very dissatisfied, Not applicable, Prefer not to answer]
	4. Your neighborhood’s access to public transportation?
	5. The appearance of your neighborhood (cleanliness, lack of graffiti)?
	6. The amenities of your neighborhood (parks, access to shops, places of worship, schools, dining)?
	7. How near your neighborhood is to your family and friends?
	8. The size of your home? [*Skip if Q1 = 5*]
	9. The quality of your home? [*Skip if Q1 = 5*]
2. Do you agree or disagree with this statement: “The neighborhood conditions where I live make it harder to be the parent I want to be for my children”?
3. Strongly agree
4. Agree
5. Agree somewhat
6. Disagree
7. Strongly disagree
8. Prefer not to answer
9. Where you live now, how much of a problem are rats, mice, cockroaches or other vermin?
	1. Big problem
	2. Small problem
	3. No problem at all
	4. Prefer not to answer
10. How safe are the streets near your home during the day?
	1. Very safe
	2. Safe
	3. Somewhat unsafe
	4. Unsafe
	5. Very unsafe
	6. Prefer not to answer
11. How safe are the streets near your home at night?
12. Very safe
13. Safe
14. Somewhat unsafe
15. Unsafe
16. Very unsafe
17. Prefer not to answer
18. How often are you worried about gun violence in your neighborhood?
19. None of the time
20. A little of the time
21. Some of the time
22. Most of the time
23. All of the time
24. Prefer not to answer
25. Please tell me if any of the following things have happened to you or anyone who lives with you in the past 6 months:
	1. Was anyone's purse, wallet, or jewelry snatched from them? [Yes, No, Prefer not to answer]
	2. Was anyone threatened with a knife or gun? [Yes, No, Prefer not to answer]
	3. Was anyone beaten or assaulted? [Yes, No, Prefer not to answer]
	4. Was anyone stabbed or shot? [Yes, No, Prefer not to answer]
	5. Did anyone try to break into your home? [Yes, No, Prefer not to answer]
26. Which of the following are located in or near your current neighborhood? (Check all that apply) [*Respondent needs to check either Yes, No, or Not Applicable for items A. – K., unless L. Prefer not to answer is checked.]*
27. One or more of my children’s childcare providers
28. One or more of my children’s after-school activities
29. My job or the job of another person in the household
30. Other family members who do not live with me
31. Close friends who do not live with me
32. My church or place of worship
33. Other community groups I or my family is involved with
34. My primary care doctor
35. The primary care doctor of one or more of my children
36. Other medical services that I or others in the household use regularly
37. Other important services (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_
38. Prefer not to answer

The next few questions will help us to understand what things are important to you in a home and neighborhood.

1. .How much pressure do you feel to find a new unit soon?
	1. No pressure
	2. A little pressure
	3. Some pressure
	4. A lot of pressure
	5. Prefer not to answer
2. A. [*If Existing Voucher Family*] Which of the following statements best describes how you feel about staying in your current neighborhood?

B. [*If New Voucher Family]* Which of the following statements best describes how you feel about staying in your current neighborhood if you receive a voucher?

1. I am very sure I want to stay
2. I am somewhat sure I want to stay
3. I am somewhat sure I want to move to a different neighborhood
4. I am very sure I want to move to a different neighborhood
5. Prefer not to answer

The next few questions ask about your housing search.

1. A. [*If New Voucher Family]* Have you already found a home for which you would like to use your housing voucher?

B. [*If Existing Voucher Family]* Have you already found a new home for which you would like to use your housing voucher?

1. Yes
2. No (*Skip to Q‎18*)
3. Prefer not to answer
4. Is the apartment or house that you identified in your current neighborhood?
5. Yes
6. No (*Skip to Q‎21)*
7. Prefer not to answer
8. [*If Q‎16 is “No”*] What are the reasons you might consider staying in the same neighborhood? Please check all that apply.

[*If Q‎17 is “Yes” or “Prefer not to answer”*] What are the reasons you’ve chosen an apartment or house in the same neighborhood? Please check all that apply.

1. I want to keep my children in the same schools
2. I want to stay near my childcare
3. I want to stay near my job
4. I want to stay near my family and friends
5. For another reason (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Prefer not to answer [*“Prefer not to answer” response cannot be combined with any other responses.*]
7. Are you willing to consider moving to a new neighborhood?
8. Yes
9. No (*Skip to Q‎25*)
10. Prefer not to answer
11. How sure are you that you could find a home in a new neighborhood in [Site]?
12. Very sure
13. Fairly sure
14. Not very sure
15. Not at all sure
16. Prefer not to answer
17. Below is a list of things that people think about when deciding where to move. Please tell us the **three** most important things to you. Please read the list below and type 1 next to the most important, type 2 next to the second most important, and type 3 next to the third most important.

| Question ‎21 |  |
| --- | --- |
| 1. School quality
 |  |
| 1. Safety
 |  |
| 1. Neighbors are friendly
 |  |
| 1. Convenient location for work
 |  |
| 1. Close to public transportation
 |  |
| 1. Neighborhood appearance (cleanliness, lack of graffiti)
 |  |
| 1. Neighborhood amenities (parks, access to shops, places of worship, dining)
 |  |
| 1. To be near my family or friends
 |  |
| 1. Size or quality of home
 |  |
| 1. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |  |
| 1. Prefer not to answer
 |  |

The next few questions are about how you would feel moving to a new neighborhood in different situations.

1. How comfortable would you feel about moving to a neighborhood where most of the residents are of a different race or ethnicity from your own?
2. Very comfortable
3. Comfortable
4. In the middle
5. Uncomfortable
6. Very uncomfortable
7. Prefer not to answer
8. How comfortable would you feel about having your children attend a school where most of the children are of a different race or ethnicity from them?
	1. Very comfortable
	2. Comfortable
	3. In the middle
	4. Uncomfortable
	5. Very uncomfortable
	6. Prefer not to answer

The next few questions are about discrimination. Sometimes people feel they are discriminated against, or treated badly or differently because of their race, ethnicity, color, language, or the country they or their family came from.

1. Do you think that you have ever been discriminated against…[*Respondent needs to check yes or no for A.-G. unless H. Prefer not to answer is checked.*]?
2. In trying to rent or buy an apartment or house?
3. In your child’s school?
4. By public housing agency staff?
5. By your neighbors?
6. By law enforcement?
7. When looking for employment?
8. At some other time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ? [*Open end, without yes/no response options*]
9. Prefer not to answer

The next set of questions are about your household finances.

1. In general, how do your household’s finances usually work out at the end of the month?
2. There is some money left over
3. There is just enough to make ends meet
4. There is not enough money to make ends meet
5. Prefer not to answer
6. Do you currently have a savings or checking account at a bank or a credit union?
7. Yes
8. No
9. Prefer not to answer
10. People often have expenses when they move. If you do not receive any help from a program, how sure are you that you will be able to pay for any moving expenses? Moving expenses include things like security deposits, first and last month’s rent, and move-in fees.
11. Very sure
12. Fairly sure
13. Not very sure
14. Not at all sure
15. Prefer not to answer
16. Do you currently have any past due balances owed for utilities such as gas, electricity, or water?
17. Yes
18. No
19. Prefer not to answer
20. In the past, have you ever had a rental application denied by a landlord or rental agent/property manager because of your credit score?
21. Yes
22. No
23. Prefer not to answer
24. Do you think a landlord will find problems with your credit when they do a credit check to approve your application?
25. Yes
26. No
27. Prefer not to answer
28. During the past seven years, has a landlord ever told you to leave your rental unit because of nonpayment of rent or lease violations?
29. Yes
30. No *(Skip to Q‎33)*
31. Prefer not to answer
32. To the best of your knowledge, did the landlord file a case with the court to make you leave the apartment or home?
33. Yes
34. No
35. Prefer not to answer
36. Thinking about all your housing experiences, have you ever had to move when you didn’t want to or expect to? This could have been because a landlord pressured you to leave or raised the rent or wouldn’t fix anything, or the building was condemned or some other reason.
37. Yes
38. No
39. Prefer not to answer
40. A. In the last 12 months, since last (name of current month), did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?
41. Yes
42. No (*Skip to Q‎35*)
43. Prefer not to answer (*Skip to Q‎35*)

B. [*If Q‎34A= “Yes”*] How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?

* 1. Almost every month
	2. Some months but not every month
	3. Only 1 or 2 months
	4. Prefer not to answer

The next few questions are about your job and transportation.

1. Are you currently working for pay?
2. Yes
3. No (*Skip to Q‎40*)
4. Prefer not to answer (*Skip to Q‎40*)
5. About how many hours per week do you usually work? (*Round the time to the nearest whole hour.* *For example, if you work 22.5 hours per week, please record 23 hours.*)
6. \_\_\_\_\_\_\_\_\_\_\_ hours
7. Prefer not to answer
8. How do you usually get to work? If you work at multiple jobs or locations, think about the one you work at most often.
9. By car or carpool
10. By bus, subway, or other public transportation
11. Walking
12. I work at home (*Skip to Q‎40*)
13. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_
14. Prefer not to answer
15. How long does it take you to get to your job?
16. \_\_\_\_\_ minutes
17. I have multiple employment locations (*Skip to Q‎40*)
18. Prefer not to answer
19. What zip code (or street address and city) do you currently work in?
20. \_\_\_\_\_\_\_\_\_\_\_ (5 character zip code)
21. *[If zip code not known]* Street address and city: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (255 characters)
22. I work in multiple employment locations
23. Prefer not to answer
24. Do you or anyone in your household have a valid driver’s license?
25. Yes
26. No
27. Prefer not to answer
28. Do you or anyone in your household usually have access to a car that runs?
29. Yes
30. No
31. Prefer not to answer

The next two questions are about education.

1. Are you currently attending school or taking classes?
	1. Yes
	2. No
	3. Prefer not to answer
2. What is the highest level of education that you have completed?
3. Grade 9 or less
4. Grade 10 or grade 11
5. Attended grade 12 but did not receive high school diploma or GED certificate
6. High school diploma
7. GED certificate
8. Some vocational/technical/business courses
9. Vocational/technical/business certificate or diploma
10. Some college
11. Associate’s or two-year college degree
12. Bachelor’s or four-year college degree or higher
13. Prefer not to answer

The next few questions are about your overall well-being.

1. Taken all together, how would you say things are these days; would you say that you are very happy, pretty happy, or not too happy?
2. Very happy
3. Pretty happy
4. Not too happy
5. Prefer not to answer
6. A.-F. [*Repeat “How much of the time during the past 30 days have you felt…” in front of each statement A.–F. Make sure response options are visible for each statement.*]

| How much of the time during the past 30 days have you felt… | All of the time | Most of the time | Some of the time | A little of the time | None of the time | Prefer not to answer |
| --- | --- | --- | --- | --- | --- | --- |
| 1. …nervous?
 |  |  |  |  |  |  |
| 1. …hopeless?
 |  |  |  |  |  |  |
| 1. …restless or fidgety?
 |  |  |  |  |  |  |
| 1. …so depressed that nothing could cheer you up?
 |  |  |  |  |  |  |
| 1. …that everything was an effort?
 |  |  |  |  |  |  |
| 1. …worthless?
 |  |  |  |  |  |  |

The next few questions are about your health.

1. In general, how would you rate your overall health now? Is it…
2. Excellent
3. Very good
4. Good
5. Fair
6. Poor
7. Prefer not to answer
8. Do you currently have health insurance coverage?
9. Yes
10. No
11. Prefer not to answer
12. Do all of your children who are aged 17 or younger currently have health insurance coverage?
13. Yes
14. No
15. Prefer not to answer
16. Are you currently pregnant?
17. Yes
18. No
19. Not applicable
20. Prefer not to answer
21. Has a doctor or other health professional ever told you that you had gestational diabetes, a type of diabetes that occurs only during pregnancy?
22. Yes
23. No
24. Not applicable
25. Prefer not to answer
26. [*If Q‎50= “No” or “Prefer not to answer”*] Has a doctor or other health professional ever told you that you had diabetes?

[*If Q‎50= “Yes”*] Not including gestational diabetes, has a doctor or other health professional ever told you that you had diabetes?

1. Yes
2. No
3. Prefer not to answer
4. How tall are you without shoes?
5. Feet \_\_\_\_\_\_\_\_\_\_\_\_
6. Inches \_\_\_\_\_\_\_\_\_\_\_\_\_
7. Prefer not to answer
8. [*If Q‎49= “No” or “Prefer not to answer”*] How much do you weigh?

[*If Q‎49= “Yes”*] How much did you weigh before your pregnancy?

1. Pounds \_\_\_\_\_\_\_\_\_\_\_\_
2. Prefer not to answer

The last few questions are about your background.

1. Do you consider yourself to be Spanish, Hispanic, or Latino?
2. Yes
3. No
4. Prefer not to answer
5. Do you consider yourself to be: (Check all that apply)
6. American Indian or Alaska Native
7. Asian
8. Black or African American
9. Native Hawaiian or Other Pacific Islander
10. White
11. Some other race (Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
12. Prefer not to answer
13. In what country were you born?
14. USA (*Skip to End*)
15. Another country (Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
16. Prefer not to answer
17. How many years have you lived in the United States?
18. \_\_\_\_\_\_\_\_\_\_\_\_
19. Prefer not to answer

58. If you would like, please provide additional detail for any of your responses to the questions above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you very much for completing this survey! At the end of the enrollment process the PHA staff member you are working with will [IF IN-PERSON: give/IF REMOTE: send] you a letter describing which of the study groups you were placed in and next steps you should take. This letter will be accompanied by a $25 gift card.