**TITLE: The Community Choice Demonstration**

**HUD Form # N/A**

**OMB # 2528-0337**

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| **LOCATION** | **CURRENT TEXT** | **REVISED TEXT** |
| Attachment G\_  The Child Assessment & The Obesity and Type II Diabetes Risk Assessment\_Assent\_Revised; p. 2 | *[For children 12 and older only: Read this paragraph; For children younger than 12: Skip to next paragraph]* We will also ask you about your ~~gender~~ and sexual orientation. Remember, you can skip any questions you don’t want to answer. | *[For children 12 and older only: Read this paragraph; For children younger than 12: Skip to next paragraph]* We will also ask you about your sex and sexual orientation. Remember, you can skip any questions you don’t want to answer. |
| Attachment L\_The Child and MOVED Assessments\_Consent - CLEAN\_Revised; p. 4 | Children aged 12 years and older will also be asked additional questions about health behaviors and how they see their identity, including their ~~gender~~ and sexual identity. | Children aged 12 years and older will also be asked additional questions about health behaviors and how they see their identity, including their sex and sexual orientation. |
| Attachment I.1\_The Child Assessment\_Direct Child Assessment\_Baseline\_Revised; p. 6; p. 13 | **p. 6: A.14** [ASK IF CHILD 12+ & ANSWERED “A FEW TIMES A YEAR” OR MORE FREQUENTLY TO AT LEAST ONE OF THE ABOVE] What do you think is the main reason for these experiences? (*Interviewer instruction: Check more than one if volunteered. This question is asked only once and not for each type of discrimination reported in A.13*)  [*Source: Everyday Discrimination Scale, Short Form; Johns Hopkins question*]  Your ancestry or national origins  Your ~~gender~~  Your race  Your age  Your religion  Your height  Your weight  Some other aspect of your physical appearance  Your sexual orientation  The amount of money your family has  Other (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Don’t know  Prefer not to answer  **p. 13: B.15** [ASK IF CHILD AGE 12+ YEARS OLD] Are you (select all that apply):  [*Source: National Center for Health Statistics, Johns Hopkins question*]  Male  Female  Transgender, non-binary, or another gender  Don’t know  Prefer not to answer | **p. 6: A.14** [ASK IF CHILD 12+ & ANSWERED “A FEW TIMES A YEAR” OR MORE FREQUENTLY TO AT LEAST ONE OF THE ABOVE] What do you think is the main reason for these experiences? (*Interviewer instruction: Check more than one if volunteered. This question is asked only once and not for each type of discrimination reported in A.13*)  [*Source: Everyday Discrimination Scale, Short Form; Johns Hopkins question*]  Your ancestry or national origins  Your sex  Your race  Your age  Your religion  Your height  Your weight  Some other aspect of your physical appearance  Your sexual orientation  The amount of money your family has  Other (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Don’t know  Prefer not to answer  **p. 13: B.15** [ASK IF CHILD AGE 12+ YEARS OLD] Are you (select all that apply):  [*Source: National Center for Health Statistics, Johns Hopkins question*]  Male  Female  Prefer not to answer |
| Attachment I.2\_The Child Assessment\_Direct Child Assessment\_Follow-up\_Revised; p. 13 | **p. 6: A.14** [ASK IF CHILD 12+ & ANSWERED “A FEW TIMES A YEAR” OR MORE FREQUENTLY TO AT LEAST ONE OF THE ABOVE] What do you think is the main reason for these experiences? (*Interviewer instruction: Check more than one if volunteered. This question is asked only once and not for each type of discrimination reported in A.13*)  [*Source: Everyday Discrimination Scale, Short Form; Johns Hopkins question*]  Your ancestry or national origins  Your ~~gender~~  Your race  Your age  Your religion  Your height  Your weight  Some other aspect of your physical appearance  Your sexual orientation  The amount of money your family has  Other (Specify: \_\_\_\_\_\_\_\_\_\_ )  Don’t know  Prefer not to answer  **p. 13: B.15** [ASK IF CHILD AGE 12+ YEARS OLD] Are you (select all that apply):  [*Source: National Center for Health Statistics, Johns Hopkins question*]  Male  Female  Transgender, non-binary, or another gender  Don’t know  Prefer not to answer | **p. 6: A.14** [ASK IF CHILD 12+ & ANSWERED “A FEW TIMES A YEAR” OR MORE FREQUENTLY TO AT LEAST ONE OF THE ABOVE] What do you think is the main reason for these experiences? (*Interviewer instruction: Check more than one if volunteered. This question is asked only once and not for each type of discrimination reported in A.13*)  [*Source: Everyday Discrimination Scale, Short Form; Johns Hopkins question*]  Your ancestry or national origins  Your sex  Your race  Your age  Your religion  Your height  Your weight  Some other aspect of your physical appearance  Your sexual orientation  The amount of money your family has  Other (Specify: \_\_\_\_\_\_\_\_\_\_ )  Don’t know  Prefer not to answer  **p. 13: B.15** [ASK IF CHILD AGE 12+ YEARS OLD] Are you (select all that apply):  [*Source: National Center for Health Statistics, Johns Hopkins question*]  Male  Female  Prefer not to answer |
| Revised - Attachment G Mobility Services Tracking Tool\_Revised; p. 1 | Under **Data fields to be collected on each head of household**  one bullet point was for “Gender of Children” | This bullet point has been eliminated because that information is not being collected. |
| Supporting Statement A; p. 1; p. 4; p. 30 | p.1: “Demponstration” for short.  p. 4: CA-2. Does the impact of being offered CMRS on these domains vary by child age or ~~gender~~?  p. 30: The report will also summarize any differences in effects by children’s age and ~~gender~~ identified. | p. 1: The typo has been fixed to: “Demonstration” for short.  p. 4: CA-2. Does the impact of being offered CMRS on these domains vary by child age or sex?  p. 30: The report will also summarize any differences in effects by children’s age and sex identified. |
| Attachment M.1\_The Obesity & Type II Diabetes Risk Assessment\_Survey\_Baseline – Revised; p. 28; p. 33 | p. 28: [*Source: Sancho-Domingo, C., Carballo, J., Caloma-Carmona, A., & Buysse, D. (2021). Brief version of the Pittsburgh Sleep Quality Index (B-PSQI) and measurement invariance across gender and age in a population-based sample. Psychological Assessment.*]  p. 33: C60. [IF RESPONSE TO AT LEAST ONE QUESTION ABOVE IS “A FEW TIMES A YEAR” OR MORE] What do you think is the main reason for this experience? [SELECT ALL THAT APPLY. This item is asked only once and not for each time that a person reports discrimination]  € Your Ancestry or National Origins  € Your ~~Gender~~  € Your Race  € Your Age  € Your Religion  € Your Height  € Your Weight  € Some other Aspect of Your Physical Appearance  € Your Sexual Orientation  € Your Education or Income Level  € Don’t know  € Prefer not to answer  [*Source: Everyday Discrimination Scale, Short Form;* [*https://scholar.harvard.edu/davidrwilliams/node/32397*](https://scholar.harvard.edu/davidrwilliams/node/32397)] | p. 28: [*Source: Sancho-Domingo, C., Carballo, J., Caloma-Carmona, A., & Buysse, D. (2021). Brief version of the Pittsburgh Sleep Quality Index (B-PSQI) and measurement invariance across sex and age in a population-based sample. Psychological Assessment.*]  p. 33: C60. [IF RESPONSE TO AT LEAST ONE QUESTION ABOVE IS “A FEW TIMES A YEAR” OR MORE] What do you think is the main reason for this experience? [SELECT ALL THAT APPLY. This item is asked only once and not for each time that a person reports discrimination]  € Your Ancestry or National Origins  € Your Sex  € Your Race  € Your Age  € Your Religion  € Your Height  € Your Weight  € Some other Aspect of Your Physical Appearance  € Your Sexual Orientation  € Your Education or Income Level  € Don’t know  € Prefer not to answer  [*Source: Everyday Discrimination Scale, Short Form;* [*https://scholar.harvard.edu/davidrwilliams/node/32397*](https://scholar.harvard.edu/davidrwilliams/node/32397)] |
| Attachment M.2\_The Obesity & Type II Diabetes Risk Assessment\_Survey\_Follow-up – Revised; p. 30; p. 35 | p. 30: [*Source: Sancho-Domingo, C., Carballo, J., Caloma-Carmona, A., & Buysse, D. (2021). Brief version of the Pittsburgh Sleep Quality Index (B-PSQI) and measurement invariance across gender and age in a population-based sample. Psychological Assessment.*]  p. 35: C60. [IF RESPONSE TO AT LEAST ONE QUESTION ABOVE IS “A FEW TIMES A YEAR” OR MORE] What do you think is the main reason for this experience? [SELECT ALL THAT APPLY. This item is asked only once and not for each time that a person reports discrimination]  € Your Ancestry or National Origins  € Your ~~Gender~~  € Your Race  € Your Age  € Your Religion  € Your Height  € Your Weight  € Some other Aspect of Your Physical Appearance  € Your Sexual Orientation  € Your Education or Income Level  € Don’t know  € Prefer not to answer  [*Source: Everyday Discrimination Scale, Short Form;* [*https://scholar.harvard.edu/davidrwilliams/node/32397*](https://scholar.harvard.edu/davidrwilliams/node/32397)] | p. 30: [*Source: Sancho-Domingo, C., Carballo, J., Caloma-Carmona, A., & Buysse, D. (2021). Brief version of the Pittsburgh Sleep Quality Index (B-PSQI) and measurement invariance across sex and age in a population-based sample. Psychological Assessment.*]  p. 35: C60. [IF RESPONSE TO AT LEAST ONE QUESTION ABOVE IS “A FEW TIMES A YEAR” OR MORE] What do you think is the main reason for this experience? [SELECT ALL THAT APPLY. This item is asked only once and not for each time that a person reports discrimination]  € Your Ancestry or National Origins  € Your Sex  € Your Race  € Your Age  € Your Religion  € Your Height  € Your Weight  € Some other Aspect of Your Physical Appearance  € Your Sexual Orientation  € Your Education or Income Level  € Don’t know  € Prefer not to answer  [*Source: Everyday Discrimination Scale, Short Form;* [*https://scholar.harvard.edu/davidrwilliams/node/32397*](https://scholar.harvard.edu/davidrwilliams/node/32397)] |
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