Survey Contents and Modules

[SECTION A: CATI INTRODUCTION SCRIPTS 2](#_Toc191427186)

[SECTION B: WEB INTRODUCTION SCREENS 9](#_Toc191427187)

[SECTION C: JOB HISTORY, WORK SEARCH, & BARRIERS TO EMPLOYMENT 11](#_Toc191427188)

[SECTION D: HOUSEHOLD COMPOSITION & CHILD CARE 20](#_Toc191427189)

[SECTION E: INCOME, FOOD SECURITY, & MATERIAL HARDSHIP 22](#_Toc191427190)

[SECTION G: HOUSING AND MOVING 30](#_Toc191427191)

[SECTION H: PROGRAM GROUP EXPERIENCES 32](#_Toc191427192)

[SECTION I: PROGRAM GROUP EXPERIENCES 37](#_Toc191427193)

[SECTION Z: CLOSING SECTION/INCENTIVE PAYMENT 40](#_Toc191427194)

## SECTION A: CATI INTRODUCTION SCRIPTS

**CATI: RECORD START DATE (SECASTDT) AND TIME (SECASTTM)**

**INT10.** Is this an incoming call, or outgoing call?

IC Incoming Call **(GO TO CI\_INTRO)**

OK Outgoing Call **(GO TO INT00)**

09 Not dialed or attempted – need to exit case **(GO TO CNOTES)**

**INT00.**

NUMBER TO DIAL: **[PHONE]**

YOU ARE CALLING RESPONDENT: **[FLNAME]**

WHAT IS THE RESULT OF THIS CALL?

OK SOMEONE IS ANSWERING YOUR CALL **(GO TO INTRO\_RESP)**

10 ANSWERING MACHINE – RESPONDENT SCRIPT **(GO TO INT01)**

50 NO ANSWER **(GO TO CNOTES)**

48 REGULAR BUSY **(GO TO CNOTES)**

49 FAST BUSY **(GO TO CNOTES)**

55 NUMBER DISCONNECTED, NO LONGER IN SERVICE **(GO TO CNOTES)**

53 FAX/DATA LINE **(GO TO CNOTES)**

54 NUMBER TEMPORARILY DISCONNECTED **(GO TO CNOTES)**

56 UNABLE TO CONNECT TO NUMBER AT THIS TIME **(GO TO CNOTES)**

01 ADDITIONAL OUTCOME CODES **(GO TO INT)**

**INT01.** Hello, my name is **INTERVIEWER NAME** and I am trying to reach **[FLNAME]** for a short, paid interview about the **[STEPPED/TIERED]** rent study at **[PHA NAME]**.

Please have **[FLNAME]** call us at **(XXX) XXX-XXXX**. Thank you.

11 ANSWERING MACHINE – RESPONDENT NAME (FIRST/LAST FULL) **(GO  
 TO CNOTES)**

17 ANSWERING MACHINE – NO MESSAGE LEFT **(GO TO CNOTES)**

14 ANSWERING MACHINE – OTHER **(GO TO CNOTES)**

OK SOMEONE ANSWERS **(GO TO INTRO\_RESP)**

**CI\_INTRO.** Hello, my name is **INTERVIEWER NAME**. How may I help you?

1 Continue

**INTERVIEWER:** PLEASE PRESS “NEXT” TO CONTINUE.

**CATI: IF A\_TYPE=2, GO TO SRCE1; ELSE GO TO Q\_CONT**

**SRCE1.** Are you...

1 Responding to a ‘Sorry I Missed You’ card that was left at your door? OR

2 Responding to a letter or postcard you received in the mail? OR

3 Responding to a voicemail message from someone here at DIR?

7 DON’T KNOW

8 REFUSED

**CATI: ALL GO TO Q\_CONT**

**INTRO\_RESP.** Hello, my name is **INTERVIEWER NAME** and I am trying to reach **[FLNAME]** for a short, paid interview about the **[STEPPED/TIERED]** rent study at **[PHA NAME]**. May please speak to **[FLNAME]**?

**INTERVIEWER:** IF NECESSARY, READ: “**[FLNAME]** is participating in a study about the **[PHA NAME]**’s **[STEPPED/TIERED]** rent.”

01 RESPONDENT ON THE PHONE – CONTINUE **(GO TO Q\_CONT)**

02 RESPONDENT IS COMING TO THE PHONE **(GO TO Q\_CONT)**

03 RESPONDENT NOT AVAILABLE **(GO TO NOTAVAIL1)**

04 REFUSED – **(GO TO END\_INT)**

05 WRONG NUMBER FOR R **(CODE AS 71 AND GOTO CNOTES)**

08 RESPONDENT BREAKOFF – HANG-UP/DISCONNECT **(GO TO CNOTES)**

**Q\_CONT.**

**[IF INTRO\_RESP=02, DISPLAY:** Hello, my name is **INTERVIEWER NAME** and I am trying to reach **[FLNAME]** for a short, paid interview about the **[STEPPED/TIERED]** rent study at **[PHA NAME]**. May please speak to **[FLNAME]?]**

Thank you for taking the time to speak with me today**.**

**INTERVIEWER:** IF R INDICATES READINESS TO PARTICIPATE AFTER THIS POINT OR SEEMS TO BECOME IMPATIENT WITH THE SCRIPT, STOP READING AND CONTINUE ON.

Decision Information Resources is conducting follow-up surveys with families who were enrolled in the **[STEPPED/TIERED]** rent studyHUD Stepped and Tiered Rent Demonstration study. The survey should take about 15 minutes. You will receive a $**[INCENTIVE]** gift card as a thank you for completing the survey.

You entered the study beginning with your recertification that was effective on **[REF\_DATE]**. You may have received a letter recently to let you know that the survey was available and we might be calling soon.

01 CONTINUE **(GO TO SCRN1)**

02 NOT NOW **(GO TO INT20)**

08 RESPONDENT REFUSED **(GO TO UE)**

**NOTAVAIL1**

Is this the best number to reach **<TXT\_HIMHER>**?

**INTERVIEWER:** IF NECESSARY, READ: “**[FLNAME]** is participating in a study about the **[PHA NAME]**’s **[STEPPED/TIERED]** rent study.”

1. YES – SET CALLBACK FOR R AT THIS NUMBER **(GOTO INT20)**
2. NO – R NO LONGER LIVES HERE OR USES THIS NUMBER **(GO TO INT04)**
3. WRONG NUMBER – DOESN’T KNOW R **(CODE 71 AND GOTO CNOTES)**

**INT20**

**IF SPEAKING WITH R:** What is the best time for us to call you back to complete the survey?

**IF R UNAVAILABLE:** Thanks, what is the best time to call back?

23. SPOKE TO R – CALL BACK **(GO TO CNOTES)**

20. HARD APPOINTMENT **(GO TO CB)**

21. SOFT APPOINTMENT **(GO TO CB)**

**CB.**

**INTERVIEWER:** ENTER DATE AND TIME

**CATI: DISPLAY CALENDAR TO ALLOW INTERVIEWER TO CHOOSE DATE & TIME FOR CALLBACK**

Thank you. We will call back then.

GO TO CNOTES

**INT04**

Is there a different number where he/she can be reached?

IF PERSON PERIODICALLY HEARS FROM R, SAY: “Could I leave our toll-free number with you so he/shecan call us? It is **<TOLLFREENUMB**>.”

1. YES, NEW NUMBER AVAILABLE FOR R **(CODE 57 AND GO TO NEWPHONE)**
2. NO, NO NEW NUMBER AVAILABLE FOR R **(GO TO INT05)**
3. WRONG NUMBER FOR R **(CODE AS 71 AND GOTO CNOTES)**

**INT05**

Is there someone else I could call who might know his/her address or phone number or who might be able to get a message to him/her?

IF PERSON PERIODICALLY HEARS FROM R, SAY: “Could I leave our toll-free number with you so he/shecan call us? It is **<TOLLFREENUMB**>.”

1. YES – ADD NEW CONTACT **(GOTO NEWPHONE)**
2. WRONG NUMBER FOR R **(GOTO CNOTES)**

**NEWPHONE.** What is the new phone number?

**INTERVIEWER**: ENTER NEW PHONE NUMBER (FORMAT 9999999999)

**TZ\_02.** Please confirm the time zone of the phone number.

00 UNKNOWN

02 Midway Island, Samoa

03 Hawaii

04 Alaska

05 Pacific Time (PST)

07 Mountain Time (MT)

08 Arizona

12 Central Time (CST)

12 Eastern Time (EST)

19 Atlantic/Puerto Rico

**INTERVIEWER:** IF PERSON ON THE PHONE DOESN’T KNOW THE TIME ZONE FOR THE PHONE, ASK IN WHAT STATE DOES THE OWNER OF THIS PHONE LIVE IN? AND SELECT BEST OPTION

**PHTYPE02.** Is this a home, work or cell number?

1 HOME

2 WORK

3 CELL

5 OTHER

6 UNKNOWN

**EMAIL02.** What is their email address? **(GOTO NN\_CB)**

**NN\_CB****.** Is there a specific date or time when we should call?

20 HARD APPOINTMENT **(GOTO CB)**

21 SOFT APPOINTMENT **(GOTO CB)**

A2 SPOKE TO GK- CALL BACK **(GOTO CNOTES)**

**CB.**

**INTERVIEWER:** ENTER DATE AND TIME

**CATI: DISPLAY CALENDAR TO ALLOW INTERVIEWER TO CHOOSE DATE & TIME FOR CALLBACK**

Thank you. We will call back then.

**GO TO CNOTES**

**END\_INT.** Thank you for taking the time to speak with me today. I’m sorry that you   
 aren’t able to participate in our study. If you change your mind and decide you   
 would like to participate, please call **(XXX) XXX-XXXX** .

**INTERVIEWER**: PLEASE PAUSE A MOMENT TO GIVE R TIME TO WRITE NUMBER DOWN AND REPEAT IF NEEDED

01CONTINUE **(GO TO INT03)**

**INT03.** Was this a soft or hard refusal?

1. SOFT REFUSAL (GOTO CNOTES)
2. HARD REFUSAL (GOTO CNOTES)

**SCRN1.** Before we begin, I’d like to confirm that I am speaking with the correct person.   
 In order to do so, could you please tell me your date of birth?

DOB: \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

**INTERVIEWER:** ENTER MONTH AND DAY, E.G. “May 15th, 1974” = 0515

9997 DON’T KNOW **(GOTO INT3)**

9998 REFUSED **(GOTO INT3)**

**CATI:**

**IF SCRN1=** **DOB FROM SAMPLE FILE GO TO INFORMCONSNT**

**IF (SCRN1 ≠ DOB) RMNCONF = 2; GOTO DENY\_TX**

**DENY\_TX.**  There seems to be a technical problem with your file. Thank you for your time   
 and patience. We will contact you as soon as we resolve this problem. Your   
 information is important to us and to the success of this study. Have a nice   
 day/evening.

**INTERVIEWER:** PRESS NEXT TO END SURVEY

**INFORMCONSNT.**

Decision Information Resources (DIR) is working with MDRC, to conduct a study on the Stepped and Tiered Rent Demonstration at the **[PHA NAME]** on behalf of the U.S. Department of Housing and Urban Development, authorized by Section 501 of the Housing and Urban Development Act of 1970. Your responses will help the Study Team understand how the new rent policies affect the families participating in this study.

Your responses will not be shared with the **[PHA NAME]**. After the study is complete or at HUD’s request, the Study Team will transfer your data with your responses to HUD, which will be combined with other study information we have collected from you. HUD intends to use your information only for research. We recognize that this information is sensitive and protected by the Privacy Act. HUD has published a System of Records Notice entitled Stepped and Tiered Rent Demonstration Evaluation Data Files, which describes how the information collected is protected and to whom it may be disclosed. The notice is available at hud.gov/privacy.

Only surveys that are approved by Office of Management and Budget (OMB) may be fielded in this study. This survey is approved by the OMB, and assigned OMB Approval No. 2528-0339.

Completing the questionnaire is voluntary and you may skip any questions you do not wish to answer. Your participation in this survey will not affect your participation in the [voucher/public housing] program, the Stepped and Tiered Rent Demonstration, or any benefits you may receive now or in the future.

The survey should take about 15 minutes.

\*\*\*We must also ensure effective communication and provide reasonable accommodations for individuals with disabilities throughout this study. Please let us know if you require a reasonable accommodation and the best method to use to communicate with you. We will also provide meaningful access to persons with limited English proficiency. You can complete the survey in English, Spanish, and Arabic. Please let us know if you would like to complete the survey in a different language. The survey can be completed over the phone or online, and the online survey is accessible for individuals with disabilities.

Do you have any questions or concerns about completing the survey?

[If no questions or concerns with proceeding] Great. Thank you. Let’s get started.

[If not able to or does not want to complete the questionnaire during study enrollment] Would you be willing to complete the questionnaire over the phone at a later time?

[If agreeing to complete the questionnaire over the phone at a later date] Thanks, someone from the Study Team will call you sometime soon.

1. CONTINUE
2. SET AN APPOINTMENT WITH RESPONDENT **(GO TO INT20)**
3. R REFUSED PARTICIPATION **(GO TO INT03)**

**CATI: RECORD END DATE (SECAEDDT) AND TIME (SECAEDTM)**

## SECTION B: WEB INTRODUCTION SCREENS

**PIN PAGE**

Welcome to the Stepped and Tiered Rent Demonstration Study. Please enter your unique PIN below to complete a short, paid survey.

PIN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Footer to be displayed at the bottom of each survey screen:

For technical assistance, please call (XXX) XXX-XXXX or email XXXXXXX.

**INFORMCONSNT\_WEB**

Decision Information Resources (DIR) is working with MDRCn, to conduct a study on the Stepped and Tiered Rent Demonstration at the **[PHA NAME]** on behalf of the U.S. Department of Housing and Urban Development, authorized by Section 501 of the Housing and Urban Development Act of 1970. Your responses will help the Study Team understand how the new rent policies affect the families participating in this study.

Your responses will not be shared with the **[PHA NAME]**. After the study is complete or at HUD’s request, the Study Team will transfer your data with your responses to HUD, which will be combined with other study information we have collected from you. HUD intends to use your information only for research. We recognize that this information is sensitive and protected by the Privacy Act. HUD has published a System of Records Notice entitled Stepped and Tiered Rent Demonstration Evaluation Data Files, which describes how the information collected is protected and to whom it may be disclosed. The notice is available at hud.gov/privacy.

Only surveys that are approved by Office of Management and Budget (OMB) may be fielded in this study. This survey is approved by the OMB, and assigned OMB Approval No. 2528-0339.

Completing the questionnaire is voluntary and you may skip any questions you do not wish to answer. Your participation in this survey will not affect your participation in the [voucher/public housing] program, the Stepped and Tiered Rent Demonstration, or any benefits you may receive now or in the future.

The survey should take about 15 minutes.

\*\*\*We must also ensure effective communication and provide reasonable accommodations for individuals with disabilities throughout this study. Please let us know if you require a reasonable accommodation and the best method to use to communicate with you. We will also provide meaningful access to persons with limited English proficiency. You can complete the survey in English, Spanish, and Arabic. Please let us know if you would like to complete the survey in a different language. The survey can be completed over the phone or online, and the online survey is accessible for individuals with disabilities.

Please select NEXT to begin.

**SCRN1\_WEB.** Before we begin, we want to confirm that you are the correct person.   
In order to do so, please confirm your date of birth. Please enter only the month and day as MMDD.

DOB: \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

9997 DON’T KNOW **(GOTO INT3)**

9998 REFUSED **(GOTO INT3)**

**CATI:**

**IF SCRN1\_WEB =** **DOB FROM SAMPLE FILE GO TO INFORMCONSNT\_WEB**

**IF (SCRN1 ≠ DOB) RMNCONF = 2; GOTO DENYTX\_WEB**

**DENYTX\_WEB.**  There seems to be a technical problem with your file. Thank you for your time and patience. We will contact you as soon as we resolve this problem. Your   
information is important to us and to the success of this study.

## SECTION C: JOB HISTORY, WORK SEARCH, & BARRIERS TO EMPLOYMENT

**CATI: RECORD START DATE (SECCSTDT) AND TIME (SECCSTTM)**

**C1.** In the last 12 months, that is since **[CURRENT MONTH] [CURRENT YEAR -1]**, have you worked for pay or were self-employed? Please don't count unpaid work experience or unpaid volunteer work.

01 YES **(GO TO C2)**

02 NO

97 DON’T KNOW

98 REFUSED

**C1a.** A lot of people have irregular, odd, or side jobs, or do extra work to make ends  
 meet. Have you done any work like that for pay in the last 12 months?

Again, I want to assure you that none of your answers will be discussed with  
 anyone.

01 YES

02 NO **(GO TO C23)**

97 DON’T KNOW **(GO TO C25)**

98 REFUSED **(GO TO C25)**

**C2.** Are you currently working for pay, or self-employed?

01 YES

02 YES, CURRENTLY ON LEAVE, TEMPORARY LAY-OFF, OR VACATION

03 NO

97 DON’T KNOW

98 REFUSED

**CATI: IF C2=01, 02 use “current”/present tense for text fills below; else use “most recent”/past tense for text fills**

**C3.** I'd like to ask you some questions about your [**current/most recent**] job.

**[CATI: IF C1=1, ADD]** “If you have multiple jobs, please focus on the job at which you work the most hours.”

**C3b.** Would you say you…

01 **[work/worked]** for an employer, or

02 **[are/were]** self-employed?

97 DON’T KNOW

98 REFUSED

**C3c.** How would you best describe this job? Select all that apply.

01apermanent job,

02a temporary job,

03a seasonal job,

04agig job (for example, driving for Uber), or

05 an odd job?

97 DON’T KNOW

98 REFUSED

**C5.** **[IF C2 = 3, 97, OR 98, ADD "**Now/Just before you left,"**]** including overtime, how  
 many hours per week **[do/did]** you usually work on this job?

**INTERVIEWER**: IF GREATER THAN 84, CODE THE RESPONSE AS 84

HOURS/WEEK: [RANGE: 1- 84] (**IF HOURS ARE <=10 OR >60 GO C5\_CONFIRM; ELSE GO TO C6)**

97 DON’T KNOW **(GO TO C5a)**

98 REFUSED **(GO TO C5a)**

**C5\_CONFIRM.** Just to confirm, you said that you usually **<C\_WORK> <C5>** hours per week. Is that correct?

1. Yes, it is correct **(GO TO C6)**
2. No, that is incorrect **(GO TO C5 TO CORRECT RESPONSE)**

**C5a.** Would you say that you usually **[work/worked]**…

01 1 to 20 hours per week,

02 21 to 34 hours per week, or

03 35 or more hours per week?

97 DON’T KNOW

98 REFUSED

**C6.** How many days per week **[do/did]** you usually work?

DAYS/WEEK: [RANGE: 1- 7]

97 DON’T KNOW

98 REFUSED

**C7.** What **[are/were]** your earnings from your job or income from self-employment  
 **[now/just before you left]** before taxes? Please include tips, commissions, and regular   
 overtime pay.

**INTERVIEWER:** IF R’S JOB IS ON AN IRREGULAR SCHEDULE OR A COMMISSION BASIS, PROBE FOR HOW MUCH R MAKES IN A TYPICAL WEEK.

$ \_\_\_ \_\_\_ \_\_\_, \_\_\_ \_\_\_ \_\_\_.\_\_\_ \_\_\_ [RANGE 000000.01 – 999999.94]

AMOUNT

999999.97 DON’T KNOW **(GO TO C10)**

999999.98 REFUSED **(GO TO C10)**

**C8.**  **[Is/Was]** that…

01 Per hour,

02 Per week,

03 Every 2 weeks,

04 Twice a month,

05 Once a month,

06 Per year,

07 Per day, or

08 Some other way?

97 DON’T KNOW

98 REFUSED

**CATI: IF C8=8, ASK C8\_O;**

**ELSE GO TO C7\_CONFIRM IF AMOUNT REPORTED AT C7/C8 IS ANY OF THE FOLLOWING:**

* **GREATER THAN $20/HOUR**
* **$200/DAY**
* **$1,000/WEEK**
* **$2,000/EVERY 2 WEEKS OR TWICE A MONTH**
* **$4,000/MONTH**
* **$50,000/YEAR;**

**ELSE GO TO C9**

**C8\_O.** How often did you receive that amount?

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**CATI: GO TO C7\_CONFIRM IF AMOUNT REPORTED AT C7/C8 IS ANY OF THE FOLLOWING:**

* **GREATER THAN $20/HOUR**
* **$200/DAY**
* **$1,000/WEEK**
* **$2,000/EVERY 2 WEEKS OR TWICE A MONTH**
* **$4,000/MONTH**
* **$50,000/YEAR;**

**ELSE GO TO C9**

**C7\_CONFIRM.** Just to confirm, you said your earnings were $**<C7> <C8>**, is that correct?

01 YES **(GO TO C9)**

02 NO, CORRECT $ AMOUNT IN C7 **(GO TO C7)**

03 NO, CORRECT TIME PERIOD IN C8 **(GO TO C8)**

**C9.**  **[Is/Was]** that before or after taxes?

01 BEFORE

02 AFTER

97 DON’T KNOW

98 REFUSED

**CATI: IF C3b=2, GO TO C27.**

**C10.** Now I’d like to ask a few questions about benefits that may be available at your job.   
 Through your employer are you eligible for any of the following benefits? By eligible we   
 mean the benefit is available for you now, even if you have decided to not receive it or   
 have not needed it.

**INTERVIEWER:** SELECT “YES” IF R REPORTS THAT R WILL BE OFFERED BENEFITS AT A FUTURE TIME UPON REACHING A MILESTONE, SUCH AS COMPLETING A PROBATION PERIOD FOR NEW EMPLOYEES OR TRANSITIONING FROM PART-TIME TO FULL-TIME HOURS.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **YES** | **NO** | **DON’T KNOW** | **REFUSED** |
| **C10a.** Any sick days with full pay? | 1 | 2 | 97 | 98 |
| **C10b.** Any vacation days with full pay? | 1 | 2 | 97 | 98 |
| **C10c.** Paid overtime? | 1 | 2 | 97 | 98 |
| **C10d.** A plan that gives you money for retirement? | 1 | 2 | 97 | 98 |
| **C10e.** A health plan or medical insurance, including any offered at a cost to you? | 1 | 2 | 97 | 98 |

**GO TO C27**

**C23.** Some people may not be able to get a job even if they want to work. Other people may  
 have personal or other reasons for not working for pay. What is the main reason you are   
 not working for pay?

**INTERVIEWER:** DO NOT READ LIST; SELECT ONLY ONE RESPONSE.

**INTERVIEWER:** IF YOU ARE UNCERTAIN HOW TO CODE THE RESPONSE, READ THE OPTIONS ALOUD TO THE RESPONDENT.

01 ILLNESS, DISABILITY, SELF

02 ILLNESS, DISABILITY OTHER

03 Taking care of home or family MEMBERS

04 Unable to find (adequate) AND/OR Affordable child care

05 going to school, in training

06 unable to find work

07 Pregnancy

08 criminal record makes finding work hard

09 Poor Credit Score Makes Finding Work Hard

10 TEMPORARILY LAID OFF/ TEMPORARY LEAVE

11 Inadequate transportation options

12 RETIRED OR TOO OLD

13 NEED MORE EDUCATION

14 NEED MORE WORK EXPERIENCE

15 NEED/PREFER TO STAY HOME WITH CHILDREN

16 HAS JOB BUT TEMPORARILY ABSENT

17 WAITING FOR JOB TO BEGIN

18 DOES NOT WANT TO WORK

19 other SPECIFY

97 DON’T KNOW

98 refUSED

**CATI: IF C23=19 ASK C23\_O, ELSE GO TO C24**

**C23\_O.** What is the main reason you are not working for pay?

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**CATI: IF C23=97 OR 98, GOTO C25**

**C24.** Are there any other reasons for not working for pay?

**INTERVIEWER:** DO NOT READ LIST; SELECT ALL THAT APPLY.

**INTERVIEWER:** IF YOU ARE UNCERTAIN HOW TO CODE THE RESPONSE, READ THE OPTIONS ALOUD TO THE RESPONDENT.

**CATI: ELIMINATE RESPONSE FROM C23 FROM LIST**

01 ILLNESS, DISABILITY, SELF

02 ILLNESS, DISABILITY OTHER

03 Taking care of home or family MEMBERS

04 Unable to find (adequate) AND/OR Affordable child care

05 going to school, in training

06 unable to find work

07 Pregnancy

08 criminal record makes finding work hard

09 Poor Credit Score Makes Finding Work Hard

10 TEMPORARILY LAID OFF/ TEMPORARY LEAVE

11 Inadequate transportation options

12 RETIRED OR TOO OLD

13 NEED MORE EDUCATION

14 NEED MORE WORK EXPERIENCE

15 NEED/PREFER TO STAY HOME WITH CHILDREN

16 HAS JOB BUT TEMPORARILY ABSENT

17 WAITING FOR JOB TO BEGIN

18 DOES NOT WANT TO WORK

19 other SPECIFY

20 NO OTHER REASON

97 DON’T KNOW

98 refUSED

**CATI: IF C23a=19 ASK C23a\_O, ELSE GO TO C25**

**C24\_O.** What are the other reasons you are not working for pay?

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**C25.** In the last four weeks, have you looked for a full-time or part-time work?

01 YES

02 NO **(GO TO C27)**

97 DON’T KNOW **(GO TO C27)**

98 REFUSED **(GO TO C27)**

**C26.** Were you looking for full-time work, that is, 35 or more hours a week, or part-time work?

01 Full-time

02 Part-time

03 Both

97 DON’T KNOW

98 REFUSED

**CATI: IF (C2 = 1 or 2 and (C1d <> 1 and C2b <35)) and C25=1 AND C26=1 or 3 GO TO D1**

**IF C2 = 1 or 2 and (C1d = 1 or C2b >=35) GO TO D1**

**C27.**

**CATI: IF (C2 = 1 or 2 and C1d<>1 and C2b < 35 AND C25<>1) OR (C2 = 1 or 2 and C1d<>1 and C2b < 35 AND C25=1 AND C26<>1 or 3) ASK** "According to what you’ve told us, you are currently working less than 35 hours per week and you are not looking for full-time work. Some people may not be able to get a full-time job even if they want to. Other people may have personal or other reasons for not working full-time. What is the main reason why you are not working full-time or looking for full-time work? "

**CATI: IF ((C1>1 AND C1a>1) or C2 <>1 or 2) AND C25=1 ASK** "According to what you’ve told us, you are not currently working but you are looking for work. Some people may not be able to get a job even if they want to work. Other people may have personal or other reasons for   
 not working for pay. What is the main reason why you are not working? "

**CATI: IF ((C1>1 AND C1a>1) or C2 <>1 or 2) AND C25>1 ASK** "According to what you’ve told us, you are not currently working or looking for work. Some people may not be able to get a job even if they want to work. Other people may have personal or other reasons for not   
working for pay. What is the main reason why you are not looking for work? "

**INTERVIEWER:** DO NOT READ LIST; SELECT ONLY ONE RESPONSE.

01 YOU CAN’T FIND A JOB THAT PAYS ENOUGH.

02 YOU CAN’T FIND ANY JOB.

03 YOU CAN’T FIND SATISFACTORY CHILD CARE AT A REASONABLE COST.

04 YOU CAN’T ARRANGE TRANSPORTATION TO GET TO WORK.

05 YOU ARE AFRAID YOU WILL LOSE YOUR CURRENT HEALTH INSURANCE.

06 YOU ARE AFRAID YOU WILL LOSE YOUR HOUSING SUBSIDY OR THAT YOUR RENT WOULD GO UP.

07 YOU ARE AFRAID YOU WILL LOSE OTHER BENEFITS YOU MAY HAVE, SUCH AS FOOD STAMPS.

08 YOU NEED MORE SKILLS OR EDUCATION.

09 YOU NEED MORE EXPERIENCE.

10 YOU ARE PREGNANT OR HAD A BABY WITHIN THE PAST 3 MONTHS.

11 YOU WANT TO STAY HOME WITH YOUR CHILDREN.

12 YOU HAVE A CHILD WITH HEALTH PROBLEMS OR A DISABILITY.

13 YOU NEED TO CARE FOR SOMEONE IN YOUR FAMILY OTHER THAN A CHILD.

14 YOU HAVE HEALTH PROBLEMS.

15 YOU ARE CURRENTLY IN A SCHOOL OR TRAINING PROGRAM.

16 YOU ARE ON SSI OR DISABILITY.

17 YOU ARE GETTING FINANCIAL SUPPORT FROM A HUSBAND OR PARTNER.

18 A FORMER HUSBAND OR PARTNER IS HARASSING YOU OR OTHERWISE INTERFERING WITH YOUR ATTEMPT TO WORK.

19 YOU ARE FEELING DEPRESSED OR OVERWHELMED.

20 YOU ARE DEALING WITH A DRINKING OR DRUG PROBLEM.

21 OTHER

97 DON'T KNOW

98 REFUSED

**CATI: IF C27=21 ASK C27\_O, ELSE GO TO C28.**

**C27\_O.** ENTER VERBATIM RESPONSE

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**C28. CATI: IF (C2 = 1 or 2 and C1d<>1 and C2b < 35 AND C25<>1) OR (C2 = 1 or 2 and C1d<>1 and C2b < 35 AND C25=1 AND C26<>1 or 3) ASK** "Are there any other reasons why you are not working full-time or looking for full-time work?"

**CATI: IF ((C1>1 AND C1a>1) or C2 <>1 or 2) AND C25=1 ASK** "Are there any other reasons why you are not working?"

**CATI: IF ((C1>1 AND C1a>1) or C2 <>1 or 2) AND C25>1 ASK** "Are there any other reasons why you are not looking for work?"

**INTERVIEWER:** DO NOT READ THE LIST, CHECK ALL THAT APPLY FROM REASONS R PROVIDES

**CATI: ELIMINATE RESPONSE FROM C27 FROM LIST**

01 YOU CAN’T FIND A JOB THAT PAYS ENOUGH.

02 YOU CAN’T FIND ANY JOB.

03 YOU CAN’T FIND SATISFACTORY CHILD CARE AT A REASONABLE COST.

04 YOU CAN’T ARRANGE TRANSPORTATION TO GET TO WORK.

05 YOU ARE AFRAID YOU WILL LOSE YOUR CURRENT HEALTH INSURANCE.

06 YOU ARE AFRAID YOU WILL LOSE YOUR HOUSING SUBSIDY OR THAT YOUR RENT WOULD GO UP.

07 YOU ARE AFRAID YOU WILL LOSE OTHER BENEFITS YOU MAY HAVE, SUCH AS FOOD STAMPS.

08 YOU NEED MORE SKILLS OR EDUCATION.

09 YOU NEED MORE EXPERIENCE.

10 YOU ARE PREGNANT OR HAD A BABY WITHIN THE PAST 3 MONTHS.

11 YOU WANT TO STAY HOME WITH YOUR CHILDREN.

12 YOU HAVE A CHILD WITH HEALTH PROBLEMS OR A DISABILITY.

13 YOU NEED TO CARE FOR SOMEONE IN YOUR FAMILY OTHER THAN A CHILD.

14 YOU HAVE HEALTH PROBLEMS.

15 YOU ARE CURRENTLY IN A SCHOOL OR TRAINING PROGRAM.

16 YOU ARE ON SSI OR DISABILITY.

17 YOU ARE GETTING FINANCIAL SUPPORT FROM A HUSBAND OR PARTNER.

18 A FORMER HUSBAND OR PARTNER IS HARASSING YOU OR OTHERWISE INTERFERING WITH YOUR ATTEMPT TO WORK.

19 YOU ARE FEELING DEPRESSED OR OVERWHELMED.

20 YOU ARE DEALING WITH A DRINKING OR DRUG PROBLEM.

21 OTHER

22 NO OTHER REASON

97 DON'T KNOW

98 REFUSED

**CATI: IF C28=21 ASK C28\_O, ELSE GO TO D1**

**C28\_O.** ENTER VERBATIM RESPONSE

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**CATI: RECORD END DATE (SECCEDDT) AND TIME (SECCEDTM)**

## SECTION D: HOUSEHOLD COMPOSITION & CHILD CARE

**CATI: RECORD START DATE (SECDSTDT) AND TIME (SECDSTTM)**

**D1.** Now I’m going to ask you some questions about you and your household.

Which situation best describes your marital status. Are you currently…

**INTERVIEWER:** READ LIST

01 Married, living with spouse **(GO TO D2)**

02 Single, never married

03 Separated or living apart from your spouse

04 Divorced

05 Widow/Widower

97 DON’T KNOW

98 REFUSED

**D1a.** Are you currently living with a partner?

01 YES

02 NO

97 DON’T KNOW

98 REFUSED

**D2.** Next, think about the people who lived in your household at least two nights a week last month.

How many adults age 18 years or older livedin your household for at least two nights a week during the month of [**PRIOR MONTH**]? Please include yourself, [**CATI: IF D1 = 1, INSERT** “your spouse” IF **D1a = 1, INSERT** “your partner”], adult family members, and any other adults **age** 18 years or older who livedin your household for at least two nights a week during the month of [**PRIOR MONTH**]?

**INTERVIEWER:** IF R SAYS ZERO, REMIND R TO INCLUDE SELF IN THE COUNT.

**INTERVIEWER**: IF GREATER THAN 10, CODE THE RESPONSE AS 10

# ADULTS: \_\_\_\_\_\_\_\_\_ [RANGE 1-10]

97 DON’T KNOW

98 REFUSED

**IF (D1=1 OR D1a=1) AND D2=1, ASK**

**D2\_CONF.** Earlier you said you lived with a spouse or partner but now you are saying

only 1 adult, you, live in your household. Can you help me with this?

**INTERVIEWER:** IF R DOES NOT LIVE WITH SPOUSE:  
1) SELECT OPTION 01 R DOES NOT LIVE WITH SPOUSE  
2) DO NOT RE-READ D1, AND   
3) SELECT OPTION 03 SEPARATED OR LIVING APART FROM YOUR SPOUSE AND CLICK NEXT TO CONTINUE  
  
IF R DOES LIVE WITH SPOUSE:  
1) SELECT OPTION 02 R DOES LIVE WITH SPOUSE  
2) DO NOT RE-READ D2  
3) ENTER THE NUMBER 2 AND CLICK NEXT TO CONTINUE

01 R DOES NOT LIVE WITH SPOUSE/PARTNER **(GO TO D1 AND REVISE  
ANSWER)**

02 R DOES LIVE WITH SPOUSE/PARTNER **(GO TO D2 AND REVISE ANSWER)**

**D3.** How many children, age 17 or younger livedin your household for at least two nights a week during the month of [**PRIOR MONTH**]? Please include your own children and any other children who lived in your household.

**INTERVIEWER**: IF GREATER THAN 10, CODE THE RESPONSE AS 10

# ANY CHILDREN: \_\_\_ [RANGE 0-10]

97 DON’T KNOW

98 REFUSED

**CATI: CREATE VARIABLE “OHHMBR” WHERE**

**IF D2=2-10 OR D3=1-10, OHHMBR=1 (YES OTHERS IN HHLD)**

**ELSE OHHMBR=0 (NO OTHERS IN HHLD OR UNKNOWN)**

**CATI: RECORD END DATE (SECDEDDT) AND TIME (SECDEDTM)**

## SECTION E: INCOME, FOOD SECURITY, & MATERIAL HARDSHIP

**CATI: RECORD START DATE (SECESTDT) AND TIME (SECESTTM)**

**CATI: IF OHHMBR=0, USE FIRST TEXT FILL THROUGHOUT SECTION. ELSE USE SECOND TEXT FILL.**

E1\_INTRO: Now, I am going to ask you some questions about the income that came into your household in [PRIOR MONTH].

CATI: OHHMBR=1, ADD:

Unless the question concerns income for a specific person, like you, please include any income from all adults and children who lived together in your household for at least two nights a week in [PRIOR MONTH].

Again, I want to assure you that none of your answers will be discussed with anyone.

**INTERVIEWER:** PRESS NEXT TO CONTINUE

**Monthly Income**

**E1.** During [**PRIOR MONTH**]:

Did you work for pay?

01 YES

02 NO

97 DON’T KNOW

98 REFUSED

**CATI: IF OHHMBR=1, ASK E1a. ELSE GO TO E2.**

**E1a.** Did any other adults or children who lived in your household work for pay or were self-  
 employed?

01 YES

02 NO

97 DON’T KNOW

98 REFUSED

**E2.** In [**PRIOR MONTH**], did you [**CATI: IF OHHMBR=1, INSERT** “or anyone else in your household”] receive:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **YES** | **NO** | **DON’T**  **KNOW** | **REFUSED** |
| **E2a.** SNAP, also known as Food Stamps, including EBT cards from the government that can be used at the store to buy food? | 1 | 2 | 97 | 98 |
| **E2b.** Child Support? | 1 | 2 | 97 | 98 |
| **E2c.** TANF or any cash assistance, not including child support money or child care payments? | 1 | 2 | 97 | 98 |
| **E2d.** Unemployment Insurance Benefits or UI? | 1 | 2 | 97 | 98 |
| **E2e**. Social Security Disability Insurance benefits, or SSDI | 1 | 2 | 97 | 98 |
| **E2f.** Supplemental Security Income benefits, or SSI | 1 | 2 | 97 | 98 |
| **E2g.** The Special Supplemental Nutrition Program for Women, Infants, and Children or WIC? | 1 | 2 | 97 | 98 |
| **E2h.** Heating or Cooling Assistance? | 1 | 2 | 97 | 98 |
| **E2i.** Free or reduced-price school lunch? | 1 | 2 | 97 | 98 |
| **E2j.** Alimony? | 1 | 2 | 97 | 98 |
| **E2k.** Medicaid, CHIP, **[STATE HEALTH INSURANCE PROGRAM]** or other government health insurance? | 1 | 2 | 97 | 98 |

**E3.** In **[PRIOR MONTH]** did you [**CATI: IF OHHMBR=1, INSERT** “or anyone else in your household”] receive money from any other source, such as rent from boarders, a pension, other government benefits, or any other income we have not already talked about?

01 YES

02 NO

97 DON’T KNOW

98 REFUSED

**E4.** What was the total monthly income for you [**CATI: IF OHHMBR=1, INSERT:** “and everyone else living together in your household”] in [**PRIOR MONTH**]? Please include income from all of the sources that you just mentioned, plus any other income.

**PROBE**: Your best estimate is fine.

AMOUNT: $ \_\_\_ \_\_\_ \_\_\_, \_\_\_ \_\_\_ \_\_\_. [RANGE = 0 – 999996]

999997 DON’T KNOW

999998 REFUSED

**CATI:**

**IF E4 IS LESS THAN OR EQUAL TO $10,000, GO TO E6.**

**IF E4 IS GREATER THAN $10,000 AND LESS THAN 999997, ASK E4\_confirm.**

**IF E4 = 999997 OR 999998, GO TO E5a.**

**E4\_confirm.** Just to confirm, you said that the total monthly income for you **[CATI: IF  
 OHHMBR=1, INSERT:** “and everyone else living together in your household”]  
 in [**PRIOR MONTH**] was [**INSERT E4**]. Is that correct?

01 YES (**GOTO E6**)

02 NO

97 DON’T KNOW **(GO TO E5a)**

98 REFUSED **(GO TO E5a)**

**E4\_revised.** What would you say was the correct amount of total monthly income for everyone   
 living together in your household?

AMOUNT: $ \_\_\_ \_\_\_ \_\_\_, \_\_\_ \_\_\_ \_\_\_. [RANGE = 0 – 999996]

999997 DON’T KNOW

999998 REFUSED

**CATI: IF E4\_revised IS 0 - 999997, GO TO E6. ELSE, CONTINUE WITH E5a.**

**E5a.** Would you say it was more or less than $1,500?

**INTERVIEWER:** DO NOT READ LIST

01 MORE THAN $1,500 (**GO TO E5b**)

02 EXACTLY $1,500 (**GO TO E6**)

03 LESS THAN $1,500 (**GO TO E5c**)

97 DON’T KNOW (**GO TO E6**)

98 REFUSED (**GO TO E6**)

**E5b.** Would you say it was:

**INTERVIEWER:** READ LIST

01 More than $1,500 but less than $2,000,

02 At least $2,000 but less than $2,500, or

03 $2,500 or more?

97 DON’T KNOW

98 REFUSED

**CATI: ALL E5b GO TO E6**

**E5c.** Would you say it was:

**INTERVIEWER:** READ LIST

01 At least $1,200 but less than $1,500,

02 At least $800 but less than $1,200,

03 At least $500 but less than $800, or

04 Less than $500?

97 DON’T KNOW

98 REFUSED

**GO TO E10**

**Financial Strain**

**E10.** How much do you agree or disagree with the following statement?

My financial situation is better than it was last year at this time.

Would you say you…

01 Strongly Agree

02 Agree Somewhat

03 Neither Agree nor Disagree

04 Disagree Somewhat, or

05 Strongly Disagree?

97 DON’T KNOW

98 REFUSED

**Material Hardship Scale**

**E11a.** In the last 12 months, that is since **[CURRENT MONTH] [CURRENT YEAR-**  
 **1]**, was there ever a time when, **[you/you or your household]** did not pay the full   
 amount of the rent that you are responsible for?

01 YES

02 NO **(GO TO E11b)**

97 DON’T KNOW **(GO TO E11b)**

98 REFUSED **(GO TO E11b)**

**E11a.1** In the last 12 months, about how many months has this happened?

**INTERVIEWER:** DO NOT READ LIST

01 1

02 2-3

03 4-6

04 7 OR MORE

97 DON’T KNOW

98 REFUSED

**E11b.** In the last 12 months, has there been a time when **[you/you or your household]**   
 had service turned off by the gas or electric company, or the oil company would  
 not deliver oil because payments were not made?

01 YES

02 NO **(GO TO E11c)**

97 DON’T KNOW **(GO TO E11c)**

98 REFUSED **(GO TO E11c)**

**E11b.1.** In the last 12 months, that is since **[CURRENT MONTH] [CURRENT  
 YEAR-1]**, about how many months has this happened?

**INTERVIEWER:** DO NOT READ LIST

01 1

02 2-3

03 4-6

04 7 OR MORE

97 DON’T KNOW

98 REFUSED

**E11c.** In the last 12 months, have **[you/you or your household]** had cellular or landline  
 service disconnected because payments were not made?

01 YES

02 NO **(GO TO E11d)**

97 DON’T KNOW **(GO TO E11d)**

98 REFUSED **(GO TO E11d)**

**E11c.1** In the last 12 months, about how many months has this happened?

**INTERVIEWER:** DO NOT READ LIST

01 1

02 2-3

03 4-6

04 7 OR MORE

97 DON’T KNOW

98 REFUSED

**E11d.** In the last 12 months, was there ever a time when, because of cost, **[you/you or your household]** were not able to buy food?

01 YES

02 NO **(GO TO E11e)**

97 DON’T KNOW **(GO TO E11e)**

98 REFUSED **(GO TO E11e)**

**E11d.1** In the last 12 months, about how many months has this happened?

**INTERVIEWER:** DO NOT READ LIST

01 1

02 2-3

03 4-6

04 7 OR MORE

97 DON’T KNOW

98 REFUSED

**E11e.** In the last 12 months, that is since **[CURRENT MONTH] [CURRENT YEAR-  
 1]**, was there ever a time when, because of cost, **[you/you or your household]**   
 were not able to buy prescription medicine**?**

01 YES

02 NO

97 DON’T KNOW

98 REFUSED

**E11f.** In the last 12 months, was there ever a time when, because of cost, **[you/you or   
 members of your household]** were not able to see a doctor or get medical   
 assistance?

01 YES

02 NO

97 DON’T KNOW

98 REFUSED

**Assistance/Services & Transportation Assistance**

**E12.** Do you have reliable access to a vehicle?

01 YES

02 NO

97 DON’T KNOW

98 REFUSED

**Food Insufficiency**

**E14.** Which of these statements best describes the food eaten by **[you/you and the people in your household who usually ate with you]** in [**PRIOR MONTH**]: Did you have…

01 Enough of the kinds of food you wanted,

02 Enough but not always the kinds of food you wanted to eat,

03 Sometimes not enough to eat, or

04 Often not enough to eat?

97 DON’T KNOW

98 REFUSED

**E14a.** In [**PRIOR MONTH**], did **[you/you or anyone in your household]** ever skip a  
 meal because there wasn't enough money for food?

01 YES

02 NO **(GO TO E15)**

97 DON’T KNOW **(GO TO E15)**

98 REFUSED **(GO TO E15)**

**[CATI: ASK IF E14a=1, ELSE GO TO E15]**

**E14b.** In the past 12 months, about how many months has this happened?

01 1 Month

02 2 or 3 months

03 4 to 6 months

04 7 or more months

97 DON’T KNOW

98 REFUSED

**Overall Financial Well-Being**

**E15.** In general, how do **[your/your household]** finances usually work out at the end of the month? Is there…

01 Some money left over,

02 Just enough to make ends meet, or

03 Not enough money to make ends meet?

97 DON’T KNOW

98 REFUSED

**E15a.**  Do you ever borrow from family and/or friends to get cash for basic household  
 necessities, such as food, rent, or utilities?

01 YES

02 NO (**GO TO F1**)

97 DON’T KNOW (**GO TO F1**)

98 REFUSED (**GO TO F1**)

**E15b.** How often do you do this?

**INTERVIEWER:** IF R SAYS “JUST ONE TIME” SELECT OPTION 05 ONCE A YEAR

01 Every week

02 A couple times a month

03 Every month

04 A couple times a year

05 Once a year

97 DON’T KNOW

98 REFUSED

**CATI: RECORD END DATE (SECEEDDT) AND TIME (SECEEDTM)**

## SECTION G: HOUSING AND MOVING

**CATI: RECORD START DATE (SECGSTDT) AND TIME (SECGSTTM)**

**Housing Assistance**

**G1**. When you were enrolled in the study, you were receiving housing assistance from [PHA NAME]. Are you still receiving assistance from **[PHA NAME],** such as receiving a housing voucher or living in public housing?

01 YES (GO TO NEXT SECTION)

02 NO (GO TO G4a)

97 DON’T KNOW (GO TO NEXT SECTION)

98 REFUSED (GO TO NEXT SECTION)

**Assistance with Housing/Landlord Issues**

**G4a.** What would you say was the main reason you no longer receiving housing assistance?

01 NEVER ABLE TO USE VOUCHER (VOUCHER NEW ADMISSIONS ONLY)

02 INCOME TOO HIGH/OVER INCOME

03 EVICTED

04 HOUSING AUTHROITY TERMINATED SUBSIDY DUE TO A PROBLEM (BROKE PROGRAM RULES,  
VIOLATED LEASE, ETC.)

05

06 LEFT SUBSIDIZED HOUSING TO BUY A HOME

07 NO LONGER NEEDED IT

08 DISSATISFIED WITH SUBSIDIZED HOUSING

09 OTHER (SPECIFY)

97 DON'T KNOW

98 REFUSED

**CATI: IF G4a<>8 GO TO G4b**

**G4a\_O.** ENTER VERBATIM RESPONSE

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**CATI: IF G4a<>4 GO TO G5**

**G4b.** Why did you lose your housing assistance? Was it because of…

01 NONPAYMENT OF RENT OR LATE RENT,

02 NONPAYMENT OF MORTGAGE BY YOU OR SOMEONE ELSE

03 ABSENT FROM UNIT FOR 90 OR MORE DAYS,

04 PROBLEMS WITH VISITORS (STAYED MORE THAN 7 DAYS OR   
 BEHAVIOR),

05 DAMAGING UNIT,

06 HOUSEKEEPING VIOLATIONS,

07 ONE-STRIKE VIOLATION,

08 INCOME INCREASE, OR

09 SOME OTHER REASON, SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**CATI: IF G4b<>9 GO TO SECTION H**

**G4b\_O.** ENTER VERBATIM RESPONSE

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**CATI: RECORD END DATE (SECGEDDT) AND TIME (SECGEDTM)**

## SECTION H: PROGRAM GROUP EXPERIENCES

**CATI: RECORD START DATE (SECHSTDT) AND TIME (SECHSTTM)**

**CATI: IF G1=1 USES FIRST (PRESENT TENSE) TEXT FILL, ELSE USE SECOND (PAST TENSE) TEXT FILL**

**Stepped and Tiered Groups Only:**

**H\_INTRO.**

**[Recertifying households only:]** You may recall that starting in **[REF\_DATE]** **[PHA NAME]** changed the way it calculated your rent. **[PHA NAME]** may have referred to this as the **[STEPPED/TIERED]** rent.

**[All respondents]** I would like to ask you a few questions about the way in which your rent is being calculated and how that affects you.

**[HCV only]** When I use the word “rent,” I will be referring to the portion of the rent that you pay to your landlord.

I will also use the term “income review” OR “recertification.” This is when you provide information on your income to the housing authority to determine whether you’re still eligible for housing assistance and how much you have to pay in rent.

**INTERVIEWER:** PRESS NEXT TO CONTINUE

**Knowledge and awareness**

**H1.** [**CATI: IF RULES=”STEPPED”]** Thinking about how [PHA NAME] [calculates/calculated] the amount your household [pays/paid in rent. which of the following rent rules [apply to you /applied to you while you {HCV:} still had a voucher/{PH:} were living in public housing]? For each one, would you say…..Yes, no, or you’re not sure?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | Not Sure | Refused |
| H1a. My rent [increases/increased] every year by a fixed amount. | 1 | 2 | 97 | 98 |
| H1b. If my family’s income goes up, my rent share won’t go up. | 1 | 2 | 97 | 98 |
| H1c. My family’s eligibility for the [HCV/PH] program will be checked every three years instead of every year. | 1 | 2 | 97 | 98 |
| H1d. If I [have/had] difficulty paying my rent, I may [be/have been] able to have my rent lowered through a hardship request to the housing authority. | 1 | 2 | 97 | 98 |
| H1e. If another adult [moves/moved] into my household and [goes/went] on the lease, their income [will/would] not affect my rent. | 1 | 2 | 97 | 98 |

**[CATI: IF RULES=”TIERED”]** Thinking about how [PHA NAME] [calculates/calculated] the amount your household [pays/paid] in rent, which of the following rent rules [apply to you /applied to you while you {HCV:} still had a voucher/{PH:} were living in public housing]? For each one, would you say…..Yes, no, or you’re not sure?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | Not Sure | Refused |
| H1a. Recertifications are now conducted every three years – in other words, my household only [needs/needed] to have its income reviewed every three years instead of every year. | 1 | 2 | 97 | 98 |
| H1b. If my family’s income [goes/went] up in between the three-year recertifications, my rent [won’t/wouldn’t] go up until my next three-year recertification. | 1 | 2 | 97 | 98 |
| H1c. If my family’s income [goes/went] up in between the three-year recertifications, I don’t need to report my change in income to the housing authority until my next three-year recertification. | 1 | 2 | 97 | 98 |
| H1d. If I [have/had] difficulty paying my rent, I may [be/have been] able to have my rent lowered through a hardship request to the housing authority. | 1 | 2 | 97 | 98 |
| H1e. If another adult [moves/moved] into my household and [goes/went] on the lease, their income [will/would] not affect my rent until my next three-year recertification. | 1 | 2 | 97 | 98 |

**Control Group Only:**

**[CATI: IF RULES=”STANDARD”]** Thinking about how [PHA NAME] [calculates/calculated] the amount your household [pays/paid] in rent, which of the following rent rules [apply to you /applied to you while you {HCV:} still had a voucher/{PH:} were living in public housing]? For each one, would you say…..Yes, no, or you’re not sure?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | Not Sure | Refused |
| H1a. Recertifications [are/were] conducted yearly, and my rent [is/was] adjusted for my family’s income at each yearly recertification. | 1 | 2 | 97 | 98 |
| H1b. If my family’s income [goes/went] up in between the yearly recertifications, my rent [will/would] go up at or before my next recertification. | 1 | 2 | 97 | 98 |
| H1c. If my family’s income [goes/went] up in between the yearly recertifications, I [need/needed] to report my change in income to the housing authority. | 1 | 2 | 97 | 98 |
| H1d. If I [have/had] difficulty paying my rent, I may [be/have been] able to have my rent lowered through a request for an interim certification to the housing authority. | 1 | 2 | 97 | 98 |
| H1e. If another adult [moves/moved] into my household and [goes/went] on the lease, my rent will be adjusted based on my new family income including that new household member’s income. | 1 | 2 | 97 | 98 |

**Stepped and Tiered Groups Only:**

**Hardships**

**H4.** At any point in the past two years, did you face any financial circumstance where you needed a hardship to lower your rent?

01 YES

02 NO **(GO TO H10a)**

97 DON’T KNOW **(GO TO H10a)**

98 REFUSED **(GO TO H10a)**

**H5.** [IF YES] At any point in the past two years, did you request a hardship from the [PHA NAME] to lower your rent?

01 YES

02 NO **(GO TO H9)**

97 DON’T KNOW **(GO TO H10a)**

98 REFUSED **(GO TO H10a)**

**H6.** On how many different occasions did you submit a hardship request for a reduction? Would you say:

01 Just once

02 Two or three times

03 Four or five times

04 Six to ten times, or

05 More than ten times?

97 DON’T KNOW

98 REFUSED

**H7.** **[CATI: IF H6=2, 3, 4, 5, 8, 9 SHOW]** Thinking about **[when/the last time]** you   
 submitted a request, did the housing authority lower your rent?

01 YES **(GO TO H10a)**

02 NO

97 DON’T KNOW **(GO TO H10a)**

98 REFUSED **(GO TO H10a)**

**H8.** Were you told any of the following reasons why the housing authority did not reduce your  
 rent?

01 Your income wasn’t low enough **(GO TO H10a)**

02 You didn’t have the right documentation **(GO TO H10a)**

03 Some other reason **(GO TO H8\_0)**

04 Or, they never gave you a reason **(GO TO H10a)**

97 DON’T KNOW **(GO TO H10a)**

98 REFUSED **(GO TO H10a)**

**CATI ASK IF H8=3, ELSE GO TO H10a**

**H8\_O.** What was the reason?

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(GO TO H10a)**

97 DON’T KNOW **(GO TO H10a)**

98 REFUSED **(GO TO H10a)**

**H9.** Why didn’t you request a hardship from the **[PHA NAME]** to lower your rent?

01 You didn’t know that such hardship exemptions to reduce rent were available.

02 You didn’t think you qualified for the hardship request policy.

03 You didn’t think the hardship exemption would lower the rent enough to be worth requesting.

04 You didn’t want to deal with the housing authority .

05 You never got around to submitting a request.

06 Some other reason (Please specify:\_\_\_\_\_\_\_\_\_\_\_)

97 DON’T KNOW

98 REFUSED

**CATI ASK IF H9=5, ELSE GOTO H10a**

**H9\_O.** What was the reason?

01 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

97 DON’T KNOW

98 REFUSED

**Retrospective Income**

**H17.** [Currently/at your most recertification], to calculate your rent and subsidy, the housing authority [uses/used] your family income from the 12 months before your income review. Compared with the old rules, how much harder was it for you to provide the income documentation required under the alternative rules? Would you say it was:

01 Much harder

02 Somewhat harder

03 About the same, or **(GOTO H19)**

04 Not as hard? **(GOTO H19)**

97 DON’T KNOW **(GOTO H19)**

98 REFUSED **(GOTO H19)**

**Overall impressions**

**H21. [CATI: Recertifying households only]**

Before you switched to the [STEPPED/TIERED] rent rules, **[PHA NAME]** checked your income every year and calculated your rent share as a percent of your household income each year. If you had a choice, would you prefer to continue with the way the **[PHA NAME]** calculates your rent now, or would you prefer to go back to the old rules?

01 Continue with current way

02 Go back to the old rules

97 DON’T KNOW

98 REFUSED

**CATI: RECORD END DATE (SECHEDDT) AND TIME (SECHEDTM)**

## SECTION I: BENEFITS CLIFFS, PHA COMMUNICATION AND TRUST, AND STRESS

**CATI: RECORD START DATE (SECHSTDT) AND TIME (SECHSTTM)**

**Benefits Cliff**

**I1.** Government benefits (things like SNAP and housing benefits) are often reduced when people increase their income—for example, by getting a new job, getting a promotion or raise, or working additional hours.

In the past [2.5 years], did you ever not increase your income because you were worried about losing government benefits or having them reduced?

01 YES

02 NO

97 DON’T KNOW

98 REFUSED

**I2.** **[IF YES]** I’m going to ask about how the potential reduction of different types of government benefits influenced your decision.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | A lot | Somewhat | Not at all | Was not receiving | Not Sure | Refused |
| I2a. How much did your worry about having *SNAP* benefits reduced influence your decision not to increase your income? | 1 | 2 | 3 | 9 | 97 | 98 |
| I2b. How much did your worry about having *child care assistance* reduced influence your decision not to increase your income? | 1 | 2 | 3 | 9 | 97 | 98 |
| I2c. How much did your worry about having *Medicaid* reduced influence your decision not to increase your income? | 1 | 2 | 3 | 9 | 97 | 98 |
| I2d. **[Voucher households only]:** How much did your worry about having your *Section 8 voucher* amount reduced influence your decision not to increase your income? | 1 | 2 | 3 | 9 | 97 | 98 |
| I2e. **[Public housing households only]:** How much did your worry about your *public housing rent* going up influence your decision to not increase your income? | 1 | 2 | 3 | 9 | 97 | 98 |
| 12f. How much did your worry about having *another government benefit* reduced influence your decision not to increase your income? | 1 | 2 | 3 | 4 | 97 | 98 |

**PHA communication and trust**

**I3.** How much do you agree or disagree with the following statements?

**I3a**. I can count on **[PHA]** to give me the information I need about my housing subsidy.

01 Strongly agree

02 Somewhat agree

03 Somewhat disagree

04 Strongly disagree

97 DON’T KNOW

98 REFUSED

**I3b**. I feel confident about making decisions about work based on the information **[PHA]** gives me about how it calculates my rent.

01 Strongly agree

02 Somewhat agree

03 Somewhat disagree

04 Strongly disagree

97 DON’T KNOW

98 REFUSED

**I3c**. I feel confident that **[PHA]** is correctly administering the rent policy that applies to me.

01 Strongly agree

02 Somewhat agree

03 Somewhat disagree

04 Strongly disagree

97 DON’T KNOW

98 REFUSED

**Stress**

**I4.** In the last month, how often have you felt that you were unable to control the important things in your life?

01 YES

02 NO

97 DON’T KNOW

97 REFUSED

**I5.** In the last month, how often have you felt confident about your ability to handle your personal problems?

01 YES

02 NO

97 DON’T KNOW

97 REFUSED

**I6.** In the last month, how often have you felt that things were going your way?

01 YES

02 NO

97 DON’T KNOW

97 REFUSED

**I7.** In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?

01 YES

02 NO

97 DON’T KNOW

97 REFUSED

**CATI: RECORD END DATE (SECHEDDT) AND TIME (SECHEDTM)**

## SECTION Z: CLOSING SECTION/INCENTIVE PAYMENT

**CATI: RECORD START DATE (SECZSTDT) AND TIME (SECZSTTM)**

**INCNTV\_OPTN.** Those are all the questions I have to ask you today. Thank you for the time you’ve spent talking with me and for your participation in this study. You will receive **<INCENTIVE\_TX>** for completing the survey with us today. You can receive this payment as a Visa gift card that we will send you in the mail that will arrive in about 3 weeks, or as an electronic gift card that we will email to you within 24 hours. Which do you prefer?

01 A mailed Visa gift card

02 or an electronic gift card?

97 DON'T KNOW/NO PREFERENCE

**Z1.** In order to send your gift card, I need to confirm your name and address.

I have your name listed as **[FLNAME]** and spelled as (**INTERVIEWER:** SPELL   
 NAME).Is that correct?

01 YES **(GO TO Z4)**

02 NO **(GO TO Z3)**

98 REFUSED **(GO TO Z2)**

**Z2.**  In order to send your gift card, I am required to verify the spelling of your name. I have  
 your name listed as **[FLNAME]** and spelled as [**INTERVIEWER:** SPELL NAME]. Is  
 that correct?

01 YES **(GO TO Z4)**

02 NO **(GO TO Z3)**

98 REFUSED **(GO TO Z4)**

**CATI: PROVIDE TEXT BOX FOR ENTRY OF CORRECTED NAME WHILE ORIGINAL NAME IS DISPLAYED FOR COMPARISON PURPOSES**

**Z3. INTERVIEWER:** ENTER CORRECTED NAME.

**[FLNAME]**

**Z4.** Is this your current address? **[FULLADD, RCITY, RSTATE, RZIP]**

**INTERVIEWER:** READ ADDRESS TO R, SPELLING EACH WORD.

**INTERVIEWER, IF R REFUSES SAY**: We won’t be able to send your gift card without a correct mailing address.

01 YES **(GO TO Z6)**

02 NO **(GO TO Z5)**

98 REFUSED **(GO TO Z6)**

**CATI: PROVIDE TEXT BOX FOR ENTRY OF CORRECTED ADDRESS WHILE ORIGINAL ADDRESS IS DISPLAYED FOR COMPARISON PURPOSES**

**CATI: CREATE CDMO USING DATA ENTERED AT Z5 TO REPLACE:**

**FULLADD – FULL ADDRESS**

**RCITY – CITY**

**RSTATE – STATE**

**RZIP – ZIP**

**Z5**. Please tell me your address.

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INTERVIEWER:** ENTER CORRECTED ADDRESS. READ BACK THE ADDRESS INFORMATION TO R, SPELLING THE WORDS.

**INTERVIEWER, IF R REFUSES SAY**: We won’t be able to send your gift card without a correct mailing address.

**IF INCNTV OPTN=02, SKIP TO Z8, ELSE ASK Z6**

**Z6.**  Is there another address you would like me to use to sendyour $**[INCENTIVE]** gift card?

01 YES

02 NO **(GO TO Z8)**

98 REFUSED **(GO TO Z8)**

**CATI: PROVIDE TEXT BOX FOR ENTRY OF SUPPLEMENTAL ADDRESS**

**Z7.** What address would you like me to use?

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Z8.**  I also need to confirm your phone number in case we have any questions about the interview.

**CATI: DISPLAY RPHONE1**

**INTERVIEWER:** READ THE PHONE NUMBER. Is this correct?

01 YES **(GO TO Z10)**

02 NO **(GO TO Z9)**

98 REFUSED **(GO TO THANK)**

**Z9.** **INTERVIEWER:** ENTER CORRECTED PHONE NUMBER. READ BACK TO R   
 TO CONFIRM.

9999999999 REFUSED

**CATI: PROVIDE TEXT BOX FOR ENTRY OF CORRECTED PHONE NUMBER. DISPLAY ORIGINAL PHONE NUMBER FOR COMPARISON PURPOSES**

**Z10.** Is this a home, work, or cell phone number?

01 Home

02 Work

03 Cell

98 REFUSED

**TEXT\_CONF.** May we text you at this phone number?

01 YES

02 NO

**CATI: IF EMAIL ADDRESS ON FILE, DISPLAY EMAIL\_CONF; ELSE GO TO GC\_EMAIL.**

**EMAIL\_CONF.** Is this your current email address?

**<EMAIL>**

01 YES

02 NO

**GC\_EMAIL.** What is your current email address?

1. ENTER EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CATI: IF INCNTV\_OPTN=02, GO TO EP\_CHOICE; ELSE GO TO GC\_CHOICE.**

**GC\_CHOICE.** OK, we will send you a **<INCENTIVE\_TX>** Visa gift card in the mail. It will arrive in about three weeks.

1. CONTINUE **(GO TO THANK)**

**EP\_CHOICE.** Okay, we will email you an electronic gift card.

**INTERVIEWER:** CLICK ON RYBBON HYPERLINK TO NAVIGATE TO RYBBON BROWSER. FILL IN R’S EMAIL ADDRESS AND SUBMIT.

**INTERVIEWER:**IF RESPONDENT HAS QUESTIONS OR NEED FURTHER ASSISTANCE, PROVIDE NUMBER FOR HELP LINE: (XXX) XXX-XXXX.

**[ENTER RYBBON LINK HERE]**

**INTERVIEWER:**AFTER CLOSING RYBBON BROWSWER,PLEASE HIT ENTER TO CONTINUE SURVEY.

**THANK.** Thank you very much for your time and assistance.

**[IF INCNTV\_OPTN=01,98 DISPLAY:** You should receive your gift card in about 3 weeks. **ELSE DISPLAY:** You should receive your gift card within 24 hours.]

If you have any questions about the study or your gift card, can contact **[STUDY CONTACT]** at DIR, the company in charge of conducting this survey. The toll-free number is **(XXX) XXX-XXXX**.

**INTERVIEWER:** PRESS “NEXT” TO END SURVEY.

**CATI: RECORD END DATE (SECZEDDT) AND TIME (SECZEDTM)**

**FIELD\_GC.** Was the R given a gift card in the field?

1 YES **(GO TO GIFTCARD1)**

2 NO **(GO TO CNOTES)**

**GIFTCARD1.**

**INTERVIEWER:** ENTER THE 16 DIGIT GIFT CARD NUBERS, SEPARATING EACH 4 DIGITS WITH A HYPEN (-) OR A SPACE.

PLEASE ENTER THE 3-DIGIT SECURITY CODES (CVV) FROM THE BACK OF THE GIFT CARD.

GIFT CARD #1: \_ \_ \_ \_-\_ \_ \_ \_-\_ \_ \_ \_-\_ \_ \_ \_

CVV #1: \_ \_ \_

GIFT CARD #2: \_ \_ \_ \_-\_ \_ \_ \_-\_ \_ \_ \_-\_ \_ \_ \_

CVV #2: \_ \_ \_