Attachment N: The Obesity & Type II Diabetes Risk Assessment: Accelerometers – Follow-up (Child)

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 169 hours 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 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

AX3 Accelerometer

MOVED study Child Participant Information Sheet

- **What is an Accelerometer?**

  An accelerometer is like a Fitbit or a steps-tracker – it measures your activity by sensing your motion. It can also detect your sleep. It is placed on your wrist with an adjustable band and worn like a wristwatch to ensure comfort.

- **Why are we asking you to wear one?**

  We're asking you to wear an accelerometer so that we can get a better sense of your activity, like playing sports, walking, and sleeping, throughout the week.

- **How long do I have to wear it?**

  We will ask you to wear the accelerometer for 7 days in a row. It is **very important** that you do not take the accelerometer off at any time during the 7 days in a row so we can make sure we track your activity correctly.

- **Where can it be worn?**

  The accelerometer can be worn while doing all activities. It can be worn while taking a shower but **should be removed when swimming or submerging in water (like a bath)**.

- **Will you be able to locate where I am wearing the accelerometer?**

  No. The accelerometer does not contain a GPS or locating system. Its only purpose is to measure your activity and sleep.

- **What if it is uncomfortable?**

  If your accelerometer becomes uncomfortable to wear at any point, please tell your parent/caregiver to contact the study team.