Attachment P: The Obesity and Type II Diabetes Risk Assessment: Semi-Structured Interviews: Consent

JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH
ADULT ORAL CONSENT SCRIPT

Study Title: The Mobility Opportunity Vouches to Eliminate Diabetes and Obesity (MOVED) Study

Principal Investigator: Dr. Craig Pollack

IRB No.: 00030088

PI Version Date: June 8, 2026 Version 1

My name is ___ and I am with the Johns Hopkins Bloomberg School of Public Health. We are talking to you because you are enrolled in the Mobility Opportunity Vouchers to Eliminate Diabetes and Obesity (MOVED) Study. We'd like to ask you about participating in an interview with a member of our team, which is an additional part of the MOVED study.

- We are interested in learning more about how housing and neighborhood environments impact your family's health, including conditions like obesity and type II diabetes.
- We ask you to join this part of the study because you are already enrolled in the MOVED study. You do not have to join, it is your choice. There will be no penalty if you decide not to join.
- If you say yes, we will ask you to complete an interview with a member of our team. The interview will last approximately 90 minutes. We will complete this interview at your home, over Zoom, or in a setting of your choice.
- You may feel embarrassed or uncomfortable by some of the questions we ask. You do not have to answer any question you do not want to answer.
- To make sure we accurately capture everything you say, I will take notes during the interview. With your permission, we would also like to audio record the interview to ensure we do not miss anything. If there is ever a time that you would like me to turn off the recorder, please let me know.
- No one will hear the recording except members of the research team and the person who transcribes it. After the recording has been transcribed, we will erase it. We will remove your name and any other identifying information from the transcript. In other words, no one will know who you are, but many people may read the words you share because we believe they are important. Nothing you say will be traced back to you.

- There is a risk that someone outside the study will see your information. We will do our best to keep your information safe by removing your name and any other identifying information. When we share your information with other researchers, we will ask them to use the same protections.
- We will keep your interview responses confidential to the extent allowed by law. But if we hear that someone may be at risk of harm, we may need to report that to the authorities. We also want to inform you that our research team is required by law to report to authorities' certain serious situations if we see them in the home or if they are shared with us during an interview. These situations include: suspected child abuse or neglect; suspected elder abuse or neglect; and threats of immediate harm to yourself or to someone else
- We will let the community know about the results of the study by publishing our findings. This information will not identify participants individually but rather share more general findings from the study.
- We will pay you a $100 electronic gift card to join this part of the study.
- 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 or call XXX-XXX-XXXX.
- You may contact Craig Pollack, the Principal Investigator, at cpollac2@jhmi.edu or Rachel Deitch, the Project Coordinator, at rdeitch1@jhu.edu about your questions or problems with this work.
- Call or contact the **Johns Hopkins Bloomberg School of Public Health IRB Office** if you have questions about your rights as a study participant. Contact the IRB if you feel you have not been treated fairly or if you have other concerns. The IRB contact information is:
  Telephone: 410-955-3193
  Toll Free: 1-888-262-3242
  E-mail: bsph.irboffice@jhu.edu
- [if yes] Is it okay if I turn on the tape recorder now? May I begin?