



RESEARCH DESIGN, DATA COLLECTION, AND ANALYSIS PLAN (RDDCAP)

EVALUATION OF THE COMMUNITY CHOICE DEMONSTRATION

NEW ORLEANS, LA ■ CUYAHOGA, OH ■ LOS ANGELES, CA ■ NEW YORK CITY, NY ■ PITTSBURGH METRO, PA ■ MINNEAPOLIS METRO, MN ■ NASHVILLE, TN ■ ROCHESTER METRO, NY



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Research Design, Data Collection, and Analysis Plan (RDDCAP)

Evaluation of the Community Choice Demonstration

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1. Introduction

This study will evaluate the effects of the \$50 million Community Choice Demonstration (Demonstration) that Congress funded to expand the residential choices of families with children and help them access lower-poverty areas.¹ A total of 12 public housing agencies (PHAs) in nine sites across the United States participate in the Demonstration. These agencies were selected through a competitive process administered by HUD.^{2,3} These agencies and their partners are aiming to offer mobility-related services to more than 10,000 families with children participating in the Housing Choice Voucher (HCV) program over an approximately four-and-one-half-year period beginning in August 2022.

Applying a mix of qualitative methods and a randomized controlled trial, a study team led by Abt Associates, in partnership with the Urban Institute and supported by evaluation partners, outside consultants, and an Expert Panel,⁴ will study the effectiveness of mobility-related services in facilitating moves to and retention in specifically designated “areas of opportunity.” The evaluation will initially produce a Rapid Cycle Evaluation Report in 2024 and a Process and Impact Evaluation Report in 2025 (Phase 1 Process and Impact Evaluation Report). Additional evaluation reports on the Demonstration will follow.

The Demonstration will study the effects of two interventions. The first intervention, Comprehensive Mobility-Related Services (CMRS), will provide a comprehensive set of services that aims to address all of the principal obstacles that HCV participants experience accessing lower-poverty areas, including financial barriers, knowledge and skill gaps, hesitancy on the part of families to move to opportunity areas, hesitancy on the part of property owners in opportunity areas to participate in the HCV program, and challenges that affect families’ ability to stay in opportunity areas once there. The second intervention, Selected Mobility-Related Services (SMRS), will test up to three smaller bundles of services selected from the broader CMRS to determine whether they can effectively assist families in accessing opportunity areas at a lower cost.

¹ The “Community Choice Demonstration” is the name that HUD has adopted to describe the Housing Choice Voucher Mobility Demonstration that was authorized and funded through the Consolidated Appropriations Act, 2019 and the Further Consolidated Appropriations Act, 2020.

² A 13th PHA, the Los Angeles County Development Authority (LACDA), was originally selected to participate but subsequently withdrew from the Demonstration. The Housing Authority of the City of Los Angeles (HACLA) remains in the Demonstration and has assumed responsibility for the enrollment targets originally shared between the two agencies. An agreement has been reached between the two PHAs to allow HACLA to administer vouchers in opportunity areas within LACDA’s jurisdiction throughout the course of the Demonstration.

³ After completion of the Research Design, Data Collection and Analysis Plan, the Chester County site exited the Demonstration. As of the time of publication of the RDDCAP, the Demonstration had a total of 10 PHAs in eight sites, with a total projected enrollment of 15,288 households, of whom more than 9,000 will be offered mobility-related services.

⁴ The study team includes Abt Associates, the Urban Institute, MEF Associates, Sage Computing, and Social Policy Research Associates. Outside consultants to the study team include Stefanie DeLuca, Ingrid Gould Ellen, Jennifer O’Neil, Sarah Oppenheimer, and Katherine O’Regan. See Appendix 4 for the list of Expert Panel members who will provide additional guidance to the study team.

The confirmatory research questions for the first phase of the Demonstration focus on the effects of being offered CMRS on the share of families who move to an opportunity area and the duration of residency in an opportunity area. The study will also assess the impacts of being offered CMRS on a range of secondary outcomes, such as the share of new voucher recipients who use their vouchers to find a unit (in any location) and the share of existing voucher families who move (to any location). In addition, the study will examine which services appear to be most effective in facilitating moves to an opportunity area and the site- and household-level factors that appear to affect the likelihood that a family moves to an opportunity area, which may shed light on possible ways to strengthen mobility-related services in the future. The second phase of the Demonstration will examine the impacts of SMRS on these same outcomes as well as the contrast between CMRS and SMRS.

In addition to generating actionable knowledge about the effectiveness of mobility programs in different contexts, the study will lay the groundwork for future long-term follow-up to assess the effects of being offered mobility-related services on the health and educational outcomes and economic mobility of children and their families.

This introduction briefly reviews the policy context for the Demonstration (Section 1.1), provides an overview of the Demonstration and evaluation (Section 1.2), and describes the plans for reporting evaluation findings during Phase 1 of the Demonstration in 2024 and 2025 (Section 1.3).

1.1 Policy Context

Nationwide, about 2.3 million households participate in the HCV program, HUD’s largest rental assistance program. Approximately 950,000 of these households are families with children. Most families in the HCV program (HCV families) have tenant-based vouchers and can choose to live in any qualifying rental unit they find on the private market, as long as the owner is willing to participate in the HCV program. (A small percentage of HCVs are in the form of project-based vouchers, which are attached to specific structures. Families who move into a project-based voucher unit generally have the option after a year of requesting a tenant-based voucher to move to a unit of their choice.)

With research showing that the neighborhood in which a child grows up affects the child’s earnings and educational attainment as a young adult (Chetty, Hendren, and Katz 2016), significant policy attention has focused on whether families with children participating in the HCV program can be assisted to move to areas that will provide a strong foundation for children’s future economic and educational achievement. This interest is grounded not only in the ability of HCV families to move to new units but also in research suggesting that, without this assistance, HCV families are unlikely to lease housing in areas that have low poverty rates or are associated with economic mobility. A 2019 study of the neighborhoods in which HCV families with children lived in the 50 largest metropolitan areas illustrates this challenge. The study found that only 14 percent of HCV families with children leased housing in census tracts with poverty rates below 10 percent, while about 25 percent of the rental units affordable to HCV families were located in such neighborhoods. The study similarly found that only 5 percent of HCV families found housing in areas identified as “high opportunity” on the Opportunity Atlas scale derived from the Chetty and Hendren research noted above, while about 18 percent of

the rental units affordable to HCV families were located in such neighborhoods (Mazzara and Knudsen 2019).

The interest in using vouchers to maximize the life opportunities of participating families is longstanding and was explored in an earlier demonstration, the Moving to Opportunity (MTO) Demonstration, launched in 1994. MTO provided important evidence about the effects on public housing residents living in high-poverty areas of being offered a voucher that could only be used in a low-poverty area on a range of child and adult outcomes, notably finding reductions in adult obesity (Ludwig et al. 2011) and improvements in mental health (Sanbonmatsu et al. 2012). More recently, Chetty, Hendren, and Katz (2016) found that the MTO treatment had a positive effect on the future earnings and educational achievement of children who were younger than 13 when they moved with an MTO voucher to a low-poverty area.

While MTO generated important evidence about the potential effects of neighborhood on child and adult outcomes, it did not study the impacts of the most practical method for shaping the locational outcomes of HCV participants: the provision of mobility-related services on a voluntary basis to interested families. That is the focus of the current study, which is the largest study to date to assess the effects of providing mobility-related services to HCV participants.

This study builds on several earlier studies of mobility-related services. For example, research on the Baltimore Housing Mobility Program (DeLuca and Rosenblatt 2017) identified comprehensive services as key to facilitating mobility, and the Creating Moves to Opportunity (CMTO) Demonstration, a randomized controlled trial in Seattle and King County, Washington, demonstrated that a comprehensive approach could have a large impact in facilitating voluntary moves to opportunity areas (Bergman et al. 2020).

CMTO provided mobility-related services only to families selected off of the waitlist to newly receive a voucher (waiting list families). This Demonstration, by contrast, will examine the effects of providing mobility-related services to both existing HCV program participants (existing voucher families) and waiting list families. In addition, this Demonstration will provide evidence on whether and to what extent the positive findings of CMTO are replicable in a similar study conducted in other cities. Among other factors that may affect the likelihood and extent of success in facilitating moves to opportunity areas are: the nature and quality of the mobility-related services provided to participating families, the quality of HCV program administration, the racial and ethnic composition of participating families, and the extent of racial and ethnic segregation and discrimination in the marketplace, the tightness of the rental market, the willingness of landlords to rent to voucher families, and the way in which opportunity areas are defined.

This Demonstration will also help shed light on the role that different factors play in determining whether individual participants offered mobility-related services choose to move to an opportunity area, including their satisfaction with their current neighborhood and unit, their satisfaction with their children's current schools, the extent to which school quality and neighborhood safety play a role in their decision about where to live, their race and ethnicity, and their expressed comfort living in communities that include a large proportion of people of a different race or ethnicity. This information may help policymakers determine how to strengthen mobility-related services in the future.

Another key policy issue to be addressed by the study is the cost of mobility-related services. By comparing the costs of the intervention to its benefits, policymakers will be in a better position to weigh the costs and advantages of making mobility-related services more widely available. The CMTD study provides an initial estimate of costs for comprehensive mobility-related services and is currently testing the costs and effectiveness of two streamlined approaches. The Community Choice Demonstration will also assess the costs of both comprehensive and selected mobility-related services, in this case at nine sites in a variety of locations across the United States.

A central question to be addressed in the second phase of the study is whether a more limited bundle of selected mobility-related services can produce much of the benefits of comprehensive mobility-related services (in terms of facilitating moves to an opportunity area) at a lower cost. This will be important for determining whether, and if so, how, mobility-related services should be scaled up and offered to a greater share of HCV participants.

Finally, this study will lay the groundwork for examining whether the offer of mobility-related services leads to improvements in child or adult outcomes in such domains as health, education, and economic mobility. These outcomes will take time to emerge and will be studied in future phases of this research.

1.2 Overview of the Demonstration and Evaluation Approach

1.2.1 Demonstration Timeline

The Demonstration has two main phases: Phase 1 consists of a Planning Period, a six- to nine-month Pilot, and 18–20 months of implementation after the Pilot. During the Phase 1 Pilot and Years 1 and 2 after the Pilot, families who enroll in the Demonstration will be randomly selected either to be offered CMRS or the control condition. Phase 2 consists of the next two and a half years of implementation, during which there will be three-way random assignment with different treatment groups of families offered CMRS and SMRS, along with a control group.

Phase 1

The Planning Period (approximately May 2021 through July 2022) focused on planning and training. The Planning Period is being followed by a six- to nine-month Pilot, starting when each site is ready to begin operations, intended to enable the sites to gain experience with the various phases of the Demonstration—from outreach to enrollment to mobility-related services—and work through any challenges that emerge. Most sites started their Pilots in August, September, or October 2022.

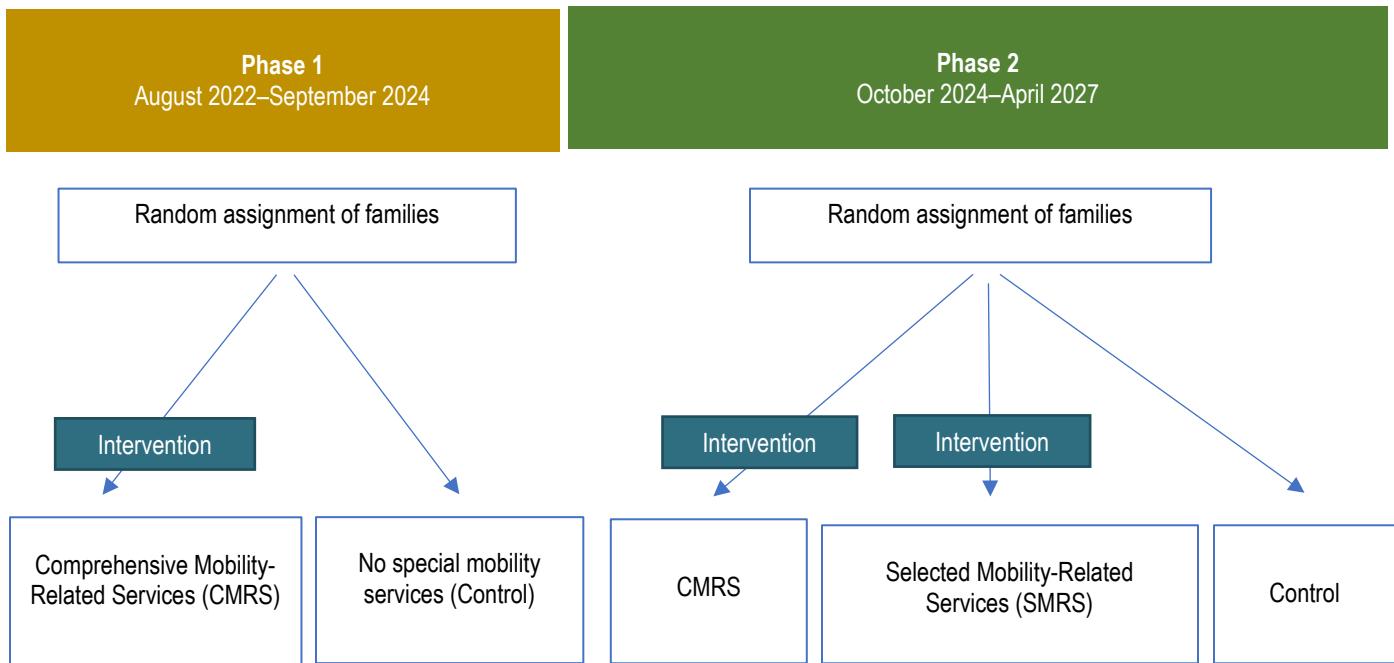
During the Pilot and continuing through the end of September 2024, families enrolling in the study will be randomly assigned to one of two groups: (a) a group offered CMRS or (b) the control group, which will be offered no special mobility-related services but will receive the “business-as-usual” services typically provided by the PHA. (See the left section of Exhibit 1-1.) PHAs will be responsible for enrolling families into the study and providing CMRS to families in the treatment group, either on their own or in partnership with an outside service provider.

Phase 2

In the period from October 2024 through April 2027, each of the sites will add a second intervention, SMRS. During this phase, families enrolling in the study will be randomly assigned to one of three groups: (a) a group offered CMRS; (b) a group offered SMRS; or (c) the control

group. (See the right section of Exhibit 1-1.) The precise bundle of services to be offered as SMRS will be determined in 2024, before Phase 2 begins, based on the analysis conducted as part of the Rapid Cycle Evaluation and SMRS Recommendations Brief Report (Rapid Cycle Evaluation Report). The study has the capacity to evaluate up to three different SMRS bundles, with each SMRS bundle implemented at three sites. As with CMRS, PHAs will be responsible for providing SMRS to families in the SMRS group, either on their own or in partnership with an outside service provider.

Exhibit 1-1. Random Assignment During the Demonstration Phases



1.2.2 Demonstration Actors

The Demonstration will be implemented by nine **sites**, consisting of 12 PHAs identified in Section 2.2. Many of the PHAs will bring in outside partners to provide some or all of the mobility-related services.

Study participants will include **Existing Voucher Families** and families on the waiting list for assistance (**Waiting List Families**). To be eligible to participate in the Demonstration, these families must have at least one child aged 17 or younger living in the household.

As the sponsor of the Demonstration, **HUD** will oversee both the implementation of the Demonstration by the PHAs and their partners and the evaluation of the Demonstration by the study team.

The Technical Assistance (TA) Provider, **FirstPic**, will work closely with the study sites to help them deliver effective mobility-related services.

The **study team** will provide support to the PHAs in the areas of outreach, recruitment, and enrollment. It will also provide the PHAs and their partners with tools to enroll families in the

study and track the delivery of mobility-related services. The study team will also collect and analyze data and produce reports about study outcomes and impacts.

An **Expert Panel** will provide feedback to the study team and HUD on the design and implementation of the program evaluation. A list of Expert Panel members is provided in Appendix 4.

1.2.3 CMRS, SMRS, and Defining Opportunity Areas

In this section, we briefly describe the CMRS, SMRS, and approach to defining opportunity areas. More details on the CMRS and process for defining opportunity areas are provided in Chapter 2.

Comprehensive Mobility-Related Services. HUD’s technical assistance provider, FirstPic, led the development of a definitive list and description of CMRS, under HUD’s direction and with input from the study team, and documented this in the “CMRS Guide.” The guide was shared with the sites and the Expert Panel for feedback before being finalized. The CMRS includes the following components:

- **Pre-Move Services:** individualized coaching for families
- **Search Assistance:** assistance identifying available units in opportunity areas
- **Financial Assistance:** funding to cover security deposits and flexible assistance to cover application fees, transportation costs, and other costs that could pose a barrier to moving to an opportunity area
- **Owner Incentives:** a holding fee that compensates owners if voucher-holders fail to complete the lease, a lease-up bonus, and a damage mitigation fund
- **Post-Move Services:** check-ins with the family and owner following the move to ensure things are going smoothly and troubleshoot challenges

Where needed, the participating PHAs have made administrative policy changes to facilitate moves to opportunity areas, including changes to voucher payment standards to ensure they are adequate to enable families to afford units in opportunity areas and procedures to expedite unit inspections.

Selected Mobility-Related Services. In the Rapid Cycle Evaluation Report, the study team will make recommendations for which services to include in the SMRS based on our analysis of the data collected for the Rapid Cycle Evaluation Report and the experience of the sites and families with CMRS. Our recommendations will be informed by the views of the participating PHAs and mobility services staff, HUD, and the Expert Panel. Ideally, one would like to find an SMRS bundle that is less expensive than the CMRS but has a policy-relevant impact on moves to opportunity areas. Since there are nine sites, we plan to test up to three SMRS bundles. Testing three SMRS bundles, with each bundle implemented in three sites, should provide reasonable statistical power to detect effects.

Defining Opportunity Areas. The study team worked with HUD and each of the nine sites to determine which neighborhoods are considered opportunity areas for the purposes of the Demonstration. The study team’s approach, which we discuss in more detail in Chapter 2, had four main steps:

1. The study team, with input from HUD and the Expert Panel, defined a set of minimum criteria for determining whether a census tract is eligible to be considered an opportunity area. The minimum criteria focused on: (a) the family poverty rate; (b) the share of rental units occupied by HUD-assisted families with children; (c) the Child Opportunity Index percentile within the metropolitan area; (d) the Opportunity Atlas percentile within the metropolitan area; and (e) elementary school test scores of nearby schools.
2. The sites participating in the Demonstration reviewed the tracts within their jurisdiction that met the minimum criteria. They determined if they wished to request the exclusion of any of those tracts or the addition of any other tracts. Sites were required to provide a reasonable explanation for excluding tracts and an evidence-based rationale for adding tracts.
3. The study team reviewed the rationales offered by the sites for their proposed exclusions and additions and assessed the overall performance of the opportunity areas for each jurisdiction against a set of standardized measures.
4. The study team worked collaboratively with each site to agree on a final set of opportunity areas for that site.

1.2.4 Evaluation Approach

Following the **mixed-methods approach** of MTO and CMTO, the study team plans to combine a randomized controlled trial (RCT) of comprehensive and selected mobility-related services (CMRS and SMRS) at nine sites with in-depth qualitative research that will include interviews with families, landlords, and PHA and mobility services staff. We will also carefully examine the costs of CMRS and its individual components.

Through this mixed-methods approach in Phase 1—which will include integrated Process, Impact, and Cost Studies—we will determine the extent to which CMRS is effective in helping HCV families access opportunity areas in each region and also generate policy-relevant insights about how to strengthen and tailor mobility-related services in future replications to work effectively in a wide range of markets for a broad range of households. We will do this by carefully investigating the programmatic and contextual factors associated with larger and smaller impacts on mobility; the challenges that PHAs and mobility services staff experience; and the obstacles that may prevent households offered mobility-related services from moving to an opportunity area.

Our work in Phase 1 will also lay the groundwork for analysis in Phase 2 of SMRS impacts and long-term follow-up of CMRS impacts. The SMRS will be a subset of the CMRS that HUD will select, based on our recommendations in the Rapid Cycle Evaluation Report. Since there are nine sites, it may be feasible to test several different bundles of SMRS. The goal of Phase 2 will be to determine if a subset of services costing less than CMRS can achieve a policy-relevant impact on mobility outcomes.

Research Questions. The research questions motivating the Process, Impact, and Cost Studies are included at the beginning of each of those chapters in this research design, with a full set of research questions provided in Appendix 5. In brief, the Process Study will identify which of the CMRS services appear to have been most important in facilitating moves to opportunity areas. The Impact Study will examine whether and to what extent CMRS and SMRS are effective in helping families move to and remain in opportunity areas and whether SMRS is as effective as CMRS. The Process and Impact studies will jointly examine the extent to which different site

contexts and family characteristics affect the success of the program. The Cost Study will provide estimates of the costs of delivering mobility-related services.

As reflected in Appendix 5, the study has three categories of research questions that are defined as follows:

- **Confirmatory research questions** are pre-determined questions that will be assigned the most importance in the research reports and will have quantitative results that are subjected to a multiple comparison adjustment. These are the most important questions the study was funded to address from a policy perspective for which the study will have adequate power to measure. Because there is a chance that one or more of the many impacts assessed by the study will be statistically significant as a matter of chance, it is important to pre-select the most important of those impact measures. The measures identified in Chapter 7 as the primary measures for answering the confirmatory research questions represent these pre-selected measures; these measures are also briefly listed below.
- **Secondary research questions** are other policy-relevant questions on which the study expects to be able to provide quantitative evidence and for which the study should have adequate power to measure.
- **Exploratory research questions** are policy-relevant questions for which the study is expected to provide useful evidence but not necessarily a definitive answer. This could be because the answers will rely on qualitative evidence collected with modest sample sizes or because the study may be underpowered to detect some policy-relevant impacts.

During Phase 1, the study will have the following confirmatory research questions:

1. **For voucher families with children, what is the effect of offering CMRS on moves to an opportunity area during the 12 months following random assignment?**
 - a) **What is the effect for existing voucher families?**
 - b) **What is the effect for waiting list families?**
2. **For voucher families with children, what is the effect of offering CMRS on the duration of residency in an opportunity area in the 24 months following random assignment?**

During Phase 2, the study will continue with the first research question and modify the second research question to examine the duration of residency in an opportunity area over a 36-month period. In Phase 2, the study will also add three additional confirmatory research questions.

9. **For voucher families with children, what is the effect of offering a particular SMRS package on moves to an opportunity area in the 12 months following random assignment?**
10. **For voucher families with children, what is the effect of offering a particular SMRS package on the duration of residency in an opportunity area in the 24 months following random assignment?**
11. **Are families offered a particular SMRS package less likely to move to an opportunity area in the 12 months following random assignment than similar families who are offered CMRS?**

NOTE: the numbering of research questions here and throughout this research design document reflects the numbering in Appendix 5.

In our [Registration of the Community Choice Demonstration](#) at the American Economic Association's registry for randomized controlled trials, the study team listed the following as the confirmatory outcomes that will be used to answer these research questions:

- Having a new lease-up in an opportunity area during the first 12 months after random assignment
- Number of months residing in an opportunity area during the first 24 months after random assignment (for Phase 1 report)
- Number of months residing in an opportunity area during the first 36 months after random assignment (for Phase 2 report)

Experimental Design. HUD has designed the Community Choice Demonstration as a multi-site randomized controlled trial with two phases of enrollment. The study will enroll families during a period of approximately four and one-half years. During Phase 1 implementation—the Pilot and the first 18–20 months of enrollment after the Pilot—the sites will randomize enrolled families to either CMRS or the control business-as-usual condition. During Phase 2, which will take place over the following two and a half years, the sites will randomize enrolled families to one of three groups: CMRS, SMRS, or the control group. The recruitment, randomization, and data collection protocols established during the first two years of enrollment under Phase 1 will continue under Phase 2 when SMRS is added to the experiment. Exhibit 1-1 above shows the randomization of families in each phase of the Demonstration.

The impact analysis will estimate impacts for three experimental contrasts:

- CMRS versus Control (Families enrolled in Phases 1 and 2)
- SMRS versus Control (Families enrolled in Phase 2)
- SMRS versus CMRS (Families enrolled in Phase 2)

Because families will be randomly assigned to the offer of SMRS only during the last two and a half years of enrollment (Phase 2), the samples of families used to estimate the impacts of SMRS—both against the control condition and against CMRS—will only include families enrolled during these two and a half years.

HUD has planned at least three time points to report impacts for the study. Each reporting point will examine impacts for a distinct sample:

- Families enrolled through June 2023 using PIC data through March 31, 2024 (CMRS versus Control only)
- Families enrolled through September 2024 using PIC data through June 30, 2025 (CMRS versus Control only)

- Total enrolled sample through April 2027 using PIC data through December 31, 2027 (all three experimental contrasts)⁵

We discuss the outcomes and methods for the impact analysis in Chapter 7.

Data Sources. The following data sources will be used to inform the three main components of the evaluation:

1. Process Study

- Qualitative interviews;
 - Two rounds of semi-structured interviews with the head of household in select participating families. Some of these interviews will be with heads of household who are in the search process, and some will be with heads of household who have leased-up;
 - Two rounds of semi-structured interviews with a selection of landlords with units in opportunity areas;
 - Two rounds of semi-structured interviews with PHA and service provider staff to capture information on implementation of the Demonstration;
- Quantitative data on the outreach, recruitment, and enrollment process; and
- Data on service usage from the Service Delivery Tool (or from the PHA if they are not using the Service Delivery Tool).

2. Impact and Outcome Analyses

- Enrollment data: Baseline Information Form and Baseline Survey data from heads of household via a web-based enrollment tool;
- PHA and HUD administrative data on characteristics of voucher families and their units, including unit location.

3. Cost Analysis

- Two rounds of semi-structured interviews on program costs conducted with PHA and service provider staff.⁶

1.3 *Deliverables*

We will deliver two main reports in Phase 1 of the evaluation: the Rapid Cycle Evaluation Report in 2024 and a Process and Impact Evaluation Report in 2025 (Phase 1 Process and Impact Evaluation Report). These reports will disseminate evidence about the effectiveness of CMRS in facilitating moves to opportunity areas, which services within CMRS are likely most cost-

⁵ Each of these three samples potentially includes families enrolled during the Pilot. See Chapter 7 (Section 7.2.1) for a discussion of how we will decide whether to include the Pilot families in the impact analysis.

⁶ The cost interview guide data will be supplemented with information on service delivery obtained through the service delivery tool or reasonable facsimile, and itemized expenditure reports and monthly invoices to HUD.

effective and important for generating opportunity moves, and how study outcomes are influenced by site- and household-level contextual factors.

In addition to these primary deliverables, we will also produce recommendations for which services to include in the SMRS (included within the Rapid Cycle Evaluation Report) and a research design (this document). We have previously delivered to HUD a high-level summary of the CMRS (which we have incorporated into this research design) and recommendations for defining opportunity areas.

1.3.1 Rapid Cycle Evaluation and SMRS Recommendations Brief Report

In the Rapid Cycle Evaluation Report, we will provide HUD with an assessment of which components of the CMRS are likely most effective, based on initial outcomes data and perceptions from PHA staff, mobility services staff, landlords, and participating families. Based on this information and our analysis of the services that have been utilized and their costs, we will recommend to HUD the identification of specific SMRS to test in Phase 2 of the Community Choice Demonstration. The Rapid Cycle Evaluation Report will also provide concise feedback to HUD on challenges reported by PHA staff, resident services providers, and participating families that might potentially be addressed through technical assistance. In addition, the Rapid Cycle Evaluation Report will discuss factors differentiating the experiences or service needs of existing voucher families versus waiting list families, and feedback from landlords.

In addition, we will report on the results to date of the impact analysis. Based on quarterly HUD administrative records, we will use addresses to determine whether families reside in opportunity areas. For both the treatment and control group, using a combination of data from the PHAs and data from HUD administrative records, we will report the following for each site and for the Demonstration as a whole and analyze differences between treatment and control group families, as well as differences across sites:

- **Waiting list families:** (1) number of waiting list families enrolled at each site; (2) number/share that have leased-up with a voucher; (3) number/share that have not leased-up but still have time remaining before voucher expiration; (4) number/share that have requested an extension of time to use their voucher; (5) number/share that have moved to an opportunity area; and (6) average length of time between random assignment and leasing-up with a voucher.
- **Existing voucher families:** (1) number of existing voucher families enrolled at each site; (2) number/share that have moved at all; (3) number/share that have moved to an opportunity area; (4) average length of time since random assignment; and (5) average length of time between random assignment and moving.

While the statistical power will be lower than for the later Phase 1 report, the enrollment targets imply that the entire Rapid Cycle Evaluation Report sample will be more than five times as large as that in the initial CMTO impact analysis (Bergman et al. 2020).⁷ These data may also shed light on the extent to which each site has made progress in implementing the Demonstration

⁷ If the enrollment targets are met, we expect to have a sample of 2,419 families in the rapid cycle evaluation impact analysis sample. This is more than five times the number of families (427 families) in Bergman et al. 2020.

intervention and enrolling families. This may have implications for interpreting the findings to date and for the technical assistance that sites may need to ensure effective implementation.

1.3.2 Phase 1 Process and Impact Evaluation Report

The Phase 1 Process and Impact Evaluation Report will integrate the results of the Process, Impact, and Cost analyses for the first two and half years of implementation after the Phase 1 Pilot. The report will summarize our findings on the effect of CMRS on moves to opportunity areas, the fidelity of implementation and implementation challenges, and the effectiveness and costs of the components of CMRS. The report will include an overview of the research questions, a description of the evaluation methodology, and sections devoted to answering each of the research questions, drawing on and integrating the impact, process, and cost analyses as appropriate.

We will use the Process Study to provide context for understanding the impact analysis findings and the findings of the cost analysis. The report will also address the limitations of our analysis.

As with the Rapid Cycle Evaluation, regular, cross-team discussions and review of site visit reports will ensure that qualitative data are fully integrated into the quantitative analysis process and interpretation of Impact Study results. The report will include detailed chapters dedicated to the in-depth analysis of qualitative results, including quotes from interviews to illustrate key themes.

1.4 Organization of this Document

The following chapters of this Research Design, Data Collection, and Analysis Plan describe in detail the elements of the intervention, the study's implementation approach and support of PHAs in Phase 1, the mixed-methods evaluation strategy (including the Process, Impact, and Cost Studies), the preparations for Phase 2 research and beyond, and data security measures.

Chapter 2 provides an overview of the CMRS intervention. It describes the steps that we used to define opportunity areas within each site, the sites that have been selected to participate in the Demonstration, the enrollment schedule, the services to be included within the CMRS intervention, and the plans for the Phase 1 Pilot.

Chapter 3 describes how the Demonstration will recruit and enroll participants. It details plans for outreach and recruitment of existing voucher families and waiting list families, enrollment of eligible families into the study, and random assignment of families into the treatment group that receives the intervention or the control group that receives existing services.

Chapter 4 describes the supports the study team and the Technical Assistance provider will provide to help sites implement the Demonstration. The chapter also outlines options for customization to accommodate the local context of a PHA, and tools and training to support PHAs throughout study implementation.

Chapter 5 describes how fidelity and enrollment targets will be monitored during the Demonstration. It also includes a description of the Phase 1 Pilot of the CMRS and how the Pilot will be monitored.

Chapter 6 describes the study team's plans for qualitative data collection and analysis for the Process Study and the collection and analysis of quantitative information on outreach,

recruitment, and service delivery that will contribute to the analysis. Among other things, the Process Study will identify which of the CMRS services appear to have been most important in facilitating moves to opportunity areas, explore challenges with implementation and the extent to which different site contexts affect program success, assess whether the Demonstration was implemented with fidelity, and provide context for understanding the results of the Impact Study.

Chapter 7 describes the study team's plans for quantitative data collection and analysis for the Impact Study. Among other outcomes, the Impact Study will examine the impacts of being offered CMRS and SMRS on the share of new lease-ups in an opportunity area within 12 months of random assignment (as a measure of initial moves), duration of residency in an opportunity area within the first 24 months after random assignment (as a measure of persistence) and a range of secondary outcomes, including housing quality, the lease-up rates and average time between voucher issuance and lease-up for waiting list families and the share of existing voucher families that move and the timing of their moves relative to study enrollment. For Phase 2 reports, the Impact Study will also compare the impacts of CMRS and SMRS.

Chapter 8 describes how the study team will conduct the Cost Study. The cost analysis will determine the per-participant and service-level costs associated with CMRS and SMRS. Together with findings from the process and impact analyses, the service-level cost estimates will be weighed in a qualitative determination of whether some services appear more cost-effective than others.

Chapter 9 describes how the study team will select SMRS interventions to test in Phase 2, and briefly summarizes what will happen in Phase 2 of the Demonstration and in the extended follow-up period.

Chapter 10 describes how the study team will protect the personally identifiable information (PII) collected about and from the families participating in the Demonstration.

The document concludes with **appendices** and a list of **references**.

2. Key Study Components: Sites, Opportunity Areas, and CMRS

This chapter describes the basic building blocks of the Demonstration: the sites that have been selected to participate in the Demonstration, the enrollment schedule, the steps used to define opportunity areas within each site, and the services that are included within the CMRS intervention.

2.1 Site Selection

HUD has selected nine sites for the Demonstration. These sites are shown in Exhibit 2-1.

Exhibit 2-1. Nine Demonstration Sites

Metropolitan Area	Lead PHA (Acronym; PHA code)	Partner PHA (Acronym; PHA code)
Chester County, PA (Philadelphia area)	Housing Authority of Chester County (HACC; PA046)	Chester Housing Authority (CHA; PA007)
Cleveland, OH	Cuyahoga Metropolitan Housing Authority (CMHA; OH003)	
Los Angeles, CA	Housing Authority of the City of Los Angeles (HACLA; CA004)	
Minneapolis, MN	Minneapolis Public Housing Authority (MPHA; MN002)	Metropolitan Council's Housing and Redevelopment Authority (Metro HRA; MN163)
Nashville, TN	Metropolitan Development and Housing Agency (MDHA; TN005)	
New Orleans, LA	Housing Authority of New Orleans (HANO; LA001)	
New York City, NY	New York City Department of Housing Preservation and Development (HPD; NY110)	
Pittsburgh, PA	Allegheny County Housing Authority (ACHA; PA006)	Housing Authority of the City of Pittsburgh (HACP; PA001)
Rochester, NY	Rochester Housing Authority (RHA; NY041)	

2.2 Target Population and Enrollment Goals

The Demonstration will enroll two types of families with children:

- Families who currently hold housing vouchers (“existing voucher families”) and have a child aged 17 or younger living in the household with their parent or guardian at the time of enrollment.
- Families currently on a PHA waitlist for the HCV program (“waiting list families”) who are eligible for the HCV program and meet the Demonstration’s eligibility criteria of having a child aged 17 or younger living in the household with their parent or guardian at the time of enrollment.
 - Among eligible waiting list families, families with at least one child aged 13 or younger who live in a census tract where the family poverty rate is 30 percent or higher will be

given an admissions preference for the limited number of vouchers available for waiting list families through the Demonstration.⁸

2.2.1 Enrollment Schedule

As currently designed, most of the families enrolled in the Demonstration will be existing voucher families, and only 10 percent or less will be waiting list families. This is a notable difference from the CMTO study, which focused on waiting list families in its first two phases of implementation.⁹

Eight of the nine sites have identical enrollment goals of 1,911 families per site. The ninth site, Chester County, has a lower target of 1,649 families because of the relatively low number of families served by the PHAs in this site. The expected numbers of enrolled families by year are shown in Exhibit 2-2.

⁸ If there is an insufficient number of families that meet the Demonstration preference, PHAs may select the next eligible family on the waiting list with a child aged 17 or younger.

⁹ In the fall of 2020, CMTO began implementing mobility-related services for families who already participate in the HCV program (Devlin-Foltz, Le, and Birkebak, 2021).

CHAPTER 2: KEY STUDY COMPONENTS: SITES, OPPORTUNITY AREAS, AND CMRS

Exhibit 2-2. Expected Enrollment Schedule

PHASE	All Families							
	Typical Site				Total Across All Sites			
	CMRS	SMRS	Control	Total	CMRS	SMRS	Control	Total
Phase 1 Pilot (Aug. 2022–Jan. 2023)	37	0	37	74	333	0	333	666
Phase 1 (Feb. 2023–Sept. 2024)	381	0	375	756	3,274	0	3,209	6,483
Phase 2 (Oct. 2024–Apr. 2027)	364	357	360	1,081	3,296	3,223	3,259	9,788
Total	782	357	772	1,911	6,903	3,233	6,801	16,937
Existing Voucher Families								
PHASE	Typical Site				Total Across All Sites			
	CMRS	SMRS	Control	Total	CMRS	SMRS	Control	Total
	35	0	35	70	315	0	315	630
Phase 1 Pilot (Aug. 2022–Jan. 2023)	35	0	35	70	315	0	315	630
Phase 1 (Feb. 2023–Sept. 2024)	363	0	363	726	3,078	0	3,078	6,156
Phase 2 (Oct. 2024–Apr. 2027)	337	330	337	1,004	3,009	2,946	3,008	8,963
Total	735	330	735	1,800	6,402	2,946	6,401	15,749
Waiting List Families								
PHASE	Typical Site				Total Across All Sites			
	CMRS	SMRS	Control	Total	CMRS	SMRS	Control	Total
	2		2	4	18	0	18	36
Phase 1 Pilot (Aug. 2022–Jan. 2023)	2		2	4	18	0	18	36
Phase 1 (Feb. 2023–Sept. 2024)	18		12	30	196	0	131	327
Phase 2 (Oct. 2024–Apr. 2027)	27	27	23	77	287	287	251	825
Total	47	27	37	111	501	287	400	1,188

Note: Enrollment shown for the typical site applies to all sites except for Chester County. The Chester County site is smaller than other sites and has a total enrollment target of 1,649 families (1,349 existing voucher families and 300 waiting list families).

2.2.2 Possible Adjustments to the Proportion of Existing Voucher and Waitlist Families

As designed, the Demonstration relies heavily on existing voucher families to fill the large study sample. This has the advantage of limiting the number of vouchers that need to be provided to PHAs for waiting list families in the study. At the same time, the heavy reliance on existing voucher families introduces several risks that could affect the interpretation of the impacts of the intervention. For example, recruiting existing families who are open to moving to an opportunity area could prove to be difficult. Furthermore, some existing families recruited into the Demonstration may choose not to move at all, while others may already have a unit in mind to which they want to move. The result could be few moves to opportunity areas by existing families, reducing the overall impact measured for the combined sample of existing and waiting list families. While serving waiting list families includes the risk of low lease-up rates (in opportunity or other areas), the CMTD study provides strong evidence, based on a randomized controlled trial, that comprehensive mobility-related services can generate a large impact on moves to opportunity areas for waiting list families.

Shifting some of the treatment group families from existing to waiting list voucher families could help mitigate the risk that the effect of the intervention on existing families will be limited. Larger samples of waiting list families at each PHA would also have some advantages for the analysis, permitting site-level estimates of impact on waiting list families. See Chapter 7, Impact Study, for further discussion of minimum detectable effects of site-level analysis.

Increasing the sample of waiting list families could be achieved in several ways. PHAs could be allowed to recycle mobility vouchers that are returned by families who are unsuccessful in finding housing during the search period or who later relinquish their vouchers and re-use them as mobility vouchers for the Demonstration. PHAs could also be encouraged to offer participation in the Demonstration to waiting list families using the PHAs' regular turnover vouchers or incremental allocations of vouchers that are not special-purpose vouchers.

As of the date of this update to the research design, only one site—Chester—has chosen to target an appreciably larger number of waiting list families than the minimum required by their grant agreement with HUD.

2.3 Approach to Identifying Boundaries of Opportunity Areas

Prior to beginning the Demonstration, the precise boundaries of the opportunity areas within each site needed to be identified. The selection of opportunity areas was not predetermined but instead was part of the research design and required working with the PHAs participating in the Demonstration, HUD, and the expert panel to develop an appropriate and workable methodology. In selecting opportunity areas, we sought to achieve balance among several considerations: providing a high level of opportunity based on standard opportunity measures, including enough rental units to be feasible, and providing some level of PHA discretion based on local circumstances.

The study team supported this key decision about the intervention through the following steps:

1. **We reviewed the opportunity area definitions that each PHA included in its proposal to ensure we fully understood the exact delineation of its proposed opportunity areas. We requested any additional information needed to identify these areas and the PHAs' jurisdictional boundaries.**
2. **We analyzed how the proposed opportunity areas performed on several key metrics to assess the comparability of the measures across sites. We focused on measures that are indicative of the challenges in finding a unit in an opportunity area and the level of opportunity afforded by the measures. We assessed:**
 - A. The extent of the challenge of accessing housing within the proposed opportunity areas.** For each site (and as context, for the two CMTD sites, Seattle, and King County), we calculated:
 - 1) **The share of units renting below 120 percent of the Small Area Fair Market Rent (SAFMR) in the PHA's jurisdiction that fall within opportunity areas.** It will likely be easier for families to find units in opportunity areas at sites that include a larger share of rental units below 120 percent of SAFMR. (This rent level was based on an expectation that PHAs may be able to raise payment standards to this level if needed to ensure families can afford units in opportunity areas.¹⁰)
 - 2) **The share of voucher families with children within the PHA's jurisdiction that live in the proposed opportunity areas.** This provided useful information on the challenges that voucher families may face in accessing rental units within the opportunity areas. In sites where a relatively large share of voucher families already lives in opportunity areas, the challenge of helping families access opportunity areas may involve a lower level of difficulty than in sites where relatively few voucher families live in opportunity areas.
 - 3) **The ratio of units renting below 120 percent of the SAFMR to the number of treatment group members expected to enroll in the Demonstration.** When this ratio becomes too low, it may be harder for families in the Demonstration to find units in opportunity areas.
 - B. How the proposed opportunity areas line up with conventional indicia of opportunity.** For each site, and for the two CMTD sites, we examined how the opportunity areas perform along the following measures of opportunity:
 - 1) Poverty rate
 - 2) Brandeis Child Opportunity Index¹¹

¹⁰ Another reason for using 120 percent of the FMR, rather than the standard maximum of 110 percent: even if a PHA limits its payment standard to 110 percent of the FMR, a voucher family can choose to spend up to an additional 10 percent of its income at the time of lease-up, allowing the family to access units with gross rents somewhat above the payment standard.

¹¹ The Child Opportunity Index provides a composite neighborhood-level measure of the quality of resources and conditions that matter for children to develop in a healthy way. It includes "29 indicators that measure

- 3) Opportunity Atlas data.¹²
- 4) School proficiency

C. The share of rental units occupied by HUD-assisted families with children within each tract and for the PHA's jurisdiction as a whole.

3. **We developed minimum criteria for census tracts to be included as an opportunity area.** Based on our analysis of the opportunity area designations proposed by the nine sites, we developed a set of minimum criteria for determining whether a tract can be an opportunity area. After obtaining input on these criteria from HUD and the Expert Panel, we set the following minimum criteria for census tracts to be included as an opportunity area:
 - A. **Maximum poverty rate.** A maximum family poverty rate for the tract, based on the 2015-2019 five-year ACS, defined as follows:
 - 1) For PHA jurisdictions with an overall family poverty rate below 10 percent, the PHA jurisdiction's overall rate.
 - 2) For PHA jurisdictions with an overall family poverty rate at or above 10 percent, a family poverty rate that is the higher of: (a) 10 percent or (b) three-quarters of the PHA jurisdiction's overall rate.
 - B. **Maximum assisted housing percentage.** A maximum share of housing units in the tract occupied by HUD-assisted families with children equal to three-quarters of the rate for the PHA's jurisdiction as a whole. In this calculation, the numerator was the number of HUD-assisted families with children in a tract that HUD tabulated from the same database used to generate the Picture of Subsidized Households, provided by HUD on 9/8/2021, and the denominator was total families from the 2014-2018 five-year ACS.
 - C. **Minimum school performance.** A tract value for a 2019 HUD school proficiency index of the 25th percentile or greater for the PHA's jurisdiction. The measure, described in Mast (2018) and made available through HUD's Geospatial Data Storefront, is based on the test scores of 4th grade students and factors in the performance of economically disadvantaged students where test score data are available for this subpopulation.
 - D. **Opportunity thresholds.** At least one of the following for the tract:
 - 1) A Child Opportunity Index 2.0 score (normed for the metropolitan area) of at least 50. The data were downloaded on 6/21/2021. We use the All Child Opportunity Score, overall COI, metro normed variable in our analysis. The variable represents the percentile (based on the child population) for the score in each tract.
 - 2) A minimum Opportunity Atlas Income Percentile (normed for the metropolitan area) of at least 75. To norm the scores for the metropolitan area, we developed percentiles

neighborhood-based opportunities for children including but not limited to access and quality of early childhood education (ECE), high-quality schools, green space, healthy food, toxin-free environments, [and] socioeconomic resources." Noelke et al. 2020.

¹² The Opportunity Atlas is an "atlas of children's outcomes in adulthood by the Census tract in which they grew up using anonymized longitudinal data covering nearly the entire U.S. population." Chetty et al. 2020. We use the data on children's household income in adulthood to create a scale.

that reflect the share of rental units falling below the assigned percentile value for the “mean percentile rank in the national distribution of household income in 2014-2015.” We assigned these percentiles to each census tract. These data were downloaded on 03/05/2021 and 03/08/2021.

- 3) A school proficiency index value at the 75th percentile or greater (based on the number of rental units) for the PHA’s jurisdiction. (See above for the description of the HUD school proficiency index used.)

We selected the thresholds for the minimum tract criteria to balance four goals:

- Each tract provides a reasonable level of opportunity.
- Taken together, the tracts identified as opportunity tracts perform well on standard opportunity measures.
- Taken together, the tracts identified as opportunity tracts include enough rental units for the program to be reasonably successful.
- PHA flexibility to add or exclude tracts based on local knowledge and data is preserved.

4. **We sought PHA input on whether to add or exclude tracts from the list of opportunity tracts.** PHAs had the ability to request the exclusion of certain tracts that meet the minimum criteria or the addition of tracts that do not. PHAs could exclude a tract based on a sound rationale and could add a tract if they offered a sound evidence-based reason. Furthermore, any added tracts could not have family poverty rates in excess of 20 percent and had to have a low concentration of HUD-assisted families with children (we did not employ a fixed cut-off).
5. **We evaluated the requests by PHAs to add or exclude tracts from those that met the minimum criteria.** The study team evaluated these requests in two ways.
 - A. The study team considered the merits of the rationales offered by PHAs for adding or excluding individual tracts to ensure the rationales were reasonable.
 - B. The study team examined how the complete set of opportunity tracts performed as a whole to ensure they met certain minimum standards in common across the sites. After making decisions about individual tracts, we applied the following criteria to guide a final determination of whether the overall set of a PHA’s opportunity areas were acceptable:
 - 1) **Opportunity:**
 - a. The weighted average metro-adjusted Child Opportunity Index 2.0 score must be at least 60.
 - b. The weighted average metro-adjusted Opportunity Atlas score must be at least 70.
 - 2) **Feasibility:**
 - a. The ratio of rental units (of one or more bedrooms) that rent below 120 percent of the SAFMR in opportunity areas to treatment group households must be at least 25.
6. **We worked with the sites to finalize the definitions.** We worked collaboratively with the sites to resolve any differences of opinion and develop a resolution that advances the study

goals. Most sites requested only a small number of deviations from the proposed opportunity areas.

Appendix 18 shows the maps of the opportunity areas that Abt and the sites agreed upon for each of the nine participating sites. A spreadsheet with the tract (and in some cases block group) identifiers for opportunity areas and the balance of the PHA's (or PHAs') jurisdictions has been provided to HUD to accompany this research design document.¹³ A full list of the data sources considered in analyzing opportunity areas and deciding on minimum criteria is in Appendix 19.

The opportunity area designations will remain fixed at least through the end of Phase 1 of the Demonstration. A decision about whether to update them for Phase 2 or at some future date will be made in consultation with HUD and the Expert Panel.

For purposes of our impact analysis, we will count as an opportunity move any move to one the following:

- A tract identified as an opportunity area within the PHA's jurisdiction.
- A tract outside the PHA's jurisdiction but within the same metropolitan area that meets the minimum tract criteria for being an opportunity area.

Moves outside of the metropolitan area will be recorded but not considered to be opportunity moves, regardless of the characteristics of the tracts to which the family moves. Study resources do not permit the identification of opportunity tracts outside of the metropolitan areas in which the study sites are located.

2.4 Comprehensive Mobility-Related Services (CMRS)

This section describes the set of Comprehensive Mobility-Related Services (CMRS) that will be provided to families in the first of two treatment groups of the Demonstration.

After reviewing the obstacles that CMRS are intended to address, this overview describes the services and administrative policies being developed to address these obstacles.

2.4.1 Obstacles to Accessing Opportunity-Rich Areas

Five types of obstacles make it difficult for HCV families to move to and stay in opportunity areas: (1) financial barriers, (2) family knowledge and skill gaps, (3) family hesitancy to move to opportunity areas, (4) property owner hesitancy to rent to HCV families, and (5) post-move challenges. HUD designed the CMRS to address each of these five obstacles, as summarized in Exhibit 2-3.

¹³ A note about the New Orleans site. The site will start the Pilot focusing on opportunity areas within Orleans Parish only. However, the PHA is working to form partnerships with neighboring Parishes to enable it to administer vouchers within 10 miles of the boundaries of Orleans Parish, which would allow it to expand the list of opportunity areas to include qualifying tracts within this zone. Without this expansion, the study team has concerns that there may not be enough units in opportunity areas to support a successful demonstration.

Exhibit 2-3. Obstacles and How They Are Addressed by CMRS

Obstacles	How the CMRS Addresses
1. Financial Barriers:	
<ul style="list-style-type: none"> Traditional payment standards are frequently not competitive enough in opportunity areas Searching and applying for housing in opportunity areas is more costly than in other areas 	<ul style="list-style-type: none"> Requirement to adopt adequate payment standards in opportunity areas Assistance with paying security deposits and other fees Administrative policy changes (if needed) that ensure participating families can afford units in opportunity areas
2. Family Knowledge and Skill Gaps:	
<ul style="list-style-type: none"> Families may have limited information about opportunity areas and whether existing social supports will be available in new neighborhoods Families may have limited information about and experience with HCV search and lease-up processes, which can be confusing Families may have credit barriers and a past history of being rejected for tenancy. 	<ul style="list-style-type: none"> Individualized coaching and group workshops to help build families' knowledge Identification of specific available units in opportunity areas Help navigating search, application, and lease-up processes
3. Family Hesitancy to Move to Opportunity Areas:	
<ul style="list-style-type: none"> Families may fear the unknown or be wary of effort involved in moving Families may have deep ties to current neighborhood (schools, amenities, friends) Families may have priorities that are harder to meet in an opportunity area (e.g., larger units or public transit) 	<ul style="list-style-type: none"> Individualized coaching that emphasizes planning and motivation building to help families envision living in an opportunity area
4. Property Owner Hesitancy:	
<ul style="list-style-type: none"> The bureaucracy of the HCV program causes many owners to hesitate to rent to HCV families HCV holders often submit less competitive rental applications Some property owners have negative impressions of HCV holders 	<ul style="list-style-type: none"> Assistance with addressing credit and rental history challenges and preparing strong applications Outreach to address owner concerns Administrative policy changes to streamline and expedite lease-up process Damage mitigation fund to cover damage claims that exceed security deposit Signing bonus to encourage owners to rent to HCV families
5. Post-Move Challenges:	
<ul style="list-style-type: none"> Some families may experience hostility from their neighbors, discrimination, or other challenging situations In some cases, there may be owner-tenant conflicts 	<ul style="list-style-type: none"> Post-move check-ins with families Post-move check-ins with property owners

2.4.2 Services Provided by Mobility Coaches and Leasing Coordinators

HUD has broken down the CMRS into seven phases, including study enrollment (Phase 1). For ease of presentation, we have grouped the six phases following study enrollment into three categories (shown in Exhibit 2-4):

- Pre-search:** Preparing the family to search for housing in opportunity areas
- Search:** Helping families identify and apply for housing in opportunity areas
- Post-move:** Helping families retain their tenancies in opportunity areas

The CMRS will be provided by mobility services staff. Among these staff, there are two key roles: mobility coaches and leasing coordinators. The mobility coaches will work with families to prepare them for their housing search. The leasing coordinators will work with families to connect them with owners who have available units. In some of the communities participating in the Demonstration, the coaches and leasing coordinators will be employees of the PHAs (i.e., the mobility services provider will be the PHA itself). In others, they will work for mobility services provider agencies under contract to the PHA. In both cases, coaches and leasing coordinators will coordinate with PHA HCV administrative staff.

Exhibit 2-4 illustrates the services to be offered at different phases of the program. Details on the services after enrollment follow.

Exhibit 2-4. Comprehensive Mobility-Related Services Provided by Coaches and Leasing Coordinators

Phase	Work with Families	Work with Owners
1. Study enrollment Pre-search 2. Pre-move appointment 3. Family preparation	<p>Individual Coaching</p> <ul style="list-style-type: none"> ▪ Motivation building ▪ Mapping family systems ▪ Education about opportunity areas ▪ Housing needs assessment ▪ Review barriers to moving ▪ Family preparation plan <p>Optional Group Workshops</p> <ul style="list-style-type: none"> ▪ Housing search workshop ▪ Renter's workshop ▪ Banking and budgeting workshop 	<p>Outreach / Identifying Units</p> <ul style="list-style-type: none"> ▪ Proactive owner outreach ▪ Unit referrals
Search 4. Searching and applications 5. Leasing-up	<p>Search Assistance</p> <ul style="list-style-type: none"> ▪ Unit referrals ▪ Assistance with developing applications ▪ Unit & neighborhood tours <p>Family Financial assistance</p> <ul style="list-style-type: none"> ▪ Security deposits ▪ Flexible financial assistance 	<p>Owner Incentives</p> <ul style="list-style-type: none"> ▪ Signing bonus ▪ Unit holding fee
Post-move 6. Post-move 7. Completed search	<p>Post-Move Family Services</p> <ul style="list-style-type: none"> ▪ Family post-move check-ins 	<p>Post-Move Owner Services</p> <ul style="list-style-type: none"> ▪ Owner post-move check-ins ▪ Damage mitigation fund

Pre-Search: Work with Families

- **Individual Coaching** services provide tailored one-on-one support to families to build motivation and prepare families for moves to opportunity areas.
- During the first pre-move appointment, coaches learn about the family's reasons for participating in the Demonstration and the family's aspirations. Throughout the pre-move and move-in process, family coaches use **motivation building** techniques to reinforce a family's interest in moving to an opportunity area while listening to and supporting the family's own vision for what they want out of a neighborhood.
- Coaches **map family systems** to help families visualize where their social supports such as school, friends, work, and healthcare are located and discuss what resources the family will need in their new community. This mapping process allows families to begin to identify which opportunity areas they might want to live in.
- Coaches use opportunity area maps and neighborhood descriptions to review the benefits of moving to an opportunity area and **discuss potential opportunity areas** that might be a good fit for a family given their specific needs.
- During the **housing needs assessment**, coaches help families identify their non-negotiable housing needs compared with a negotiable wish list. This information is then shared with the leasing coordinator so that the family can be provided with referrals that best match their housing needs.
- Coaches determine if the family has any **barriers to moving**, such as poor credit or rental history or a criminal record. Coaches and the family discuss how to mitigate these barriers. Mitigation may include developing an application cover letter that speaks to these concerns or referring the family to a financial coaching organization, housing rights organization, or legal aid organization.
- Coaches work with families to develop a **family preparation plan** that puts on paper the neighborhoods the family can afford, the timeline for attending appointments to mitigate barriers to moving, the family's housing search timeline, steps to prepare for the literal move, and post-move activities or services that will establish the family in their new neighborhood.

Optional Group Workshops address the family's information gaps around opportunity areas, the housing search process, and best practices for renters.

- The **housing search workshop** supplements individualized coaching and offers an additional opportunity for families to learn about and practice search activities such as using online search engines and the PHA's address locator, choosing between different types of units, and making a good impression when interacting with property owners.
- The **renter's workshop** is targeted toward families who have never rented their own place before or who are relatively new to renting and living on their own. This workshop covers key topics like move-in procedures, reading a lease, paying rent and utilities, common maintenance issues, PHA inspection procedures, and tenant rights.
- PHAs may choose to offer a **money management workshop** that reviews the basics of managing a bank account and creating a family budget.

Pre-Search: Work with Owners

Proactive owner outreach builds a pipeline of owners who can lease to families in the program.

- The leasing coordinator conducts frequent and **proactive owner outreach** to affordable units in opportunity areas. The leasing coordinator contacts the owner, requests more information on the unit, introduces the mobility program and explains its benefits to owners, and gauges the owner's interest in renting to applicants with HCVs. Through this outreach, the leasing coordinator **identifies available units** with interested owners in opportunity areas that would meet each family's housing needs.

Search: Work with Families

Search assistance services help the family identify, visit, and apply for appropriate units in opportunity areas.

- Coaches provide families **assistance with developing applications**, ensuring that each application is complete, accurate, and highlights the family's strengths as a prospective renter.
- Based on the results of owner outreach, the leasing coordinator makes **unit referrals** to families by sharing the information available on the unit and connecting the family to the owner directly to introduce themselves and set up unit tours.
- Mobility program staff can facilitate **unit and neighborhood tours** in a number of ways: ensuring families have transportation to the unit tours, modeling appropriate behavior to make successful owner introductions, accompanying the family on the tour, and debriefing after the tour to discuss benefits and tradeoffs of the unit and surrounding neighborhood.

Family financial assistance helps families cover costs associated with moving.

- Families may request that the mobility program pay for the **security deposit** up to twice the monthly rent amount for the family's first unit in an opportunity area.
- Mobility staff have the discretion to provide each household up to \$750 in **flexible financial assistance** to cover costs such as unit application fees, transportation to units, move-in fees, utility arrears, or other items deemed necessary (e.g., grab-bars for a shower).

Search: Work with Owners

Incentives to encourage property owners to rent to HCV families.

- Owners receive a **signing bonus** each time they lease up a property in an opportunity area to a family in the mobility program. The bonus equals a fixed percentage of one month's rent.
- The mobility program will pay a **holding fee** for units after a family's application has been accepted but before the lease signing. The owners must accept responsibility for making needed repairs and can only keep the holding fee if the family is at fault for backing out of the lease.

Post-Move: Work with Families

Post-move services are meant to ensure that the family is settling into their new home and to promote long-term tenancy in the opportunity area.

- Coaches conduct **post-move check-ins with families** soon after they move, offering neighborhood welcome packets and assistance with things like enrolling children in school and switching utilities to the new unit. Coaches also work with families to ensure that they can keep or reestablish appropriate social supports and activities in their new community and to help them address challenging situations that they encounter, such as hostility from neighbors and discrimination. Additional periodic check-ins with the coach can be scheduled as needed.
- Each year, around three months before the lease period ends, the coach conducts a check-in to determine whether the family is satisfied with their current unit/neighborhood or if they want to move at the end of their lease. For families who want to move again, the coach sets up another pre-move appointment, and the search process starts over.

Post-Move: Work with Owners

Owners also receive **post-move** services:

- Leasing coordinators conduct **post-move check-ins with property owners** to ensure everything is going smoothly and help to resolve issues.
- A **damage mitigation fund** reimburses owners for repairs or lost rental income due to damage that occurs during a mobility family's tenancy. Funds may only be accessed after the owner has exhausted the family's security deposit fund.

2.4.3 Administrative Policy Changes

In addition to providing the CMRS, HUD has required the PHAs participating in the Demonstration to adopt administrative policy changes intended to open up a wider range of units and facilitate speedy lease-up for families participating in the mobility program. Exhibit 2-5 illustrates these administrative policy changes.

Exhibit 2-5. Categories of Administrative Policy Changes

Changes to make it easier to find housing in opportunity areas <ul style="list-style-type: none">• Increased payment standards• Longer search times	Changes to facilitate speedy lease-up <ul style="list-style-type: none">• RFTA filing assistance• Fast inspections
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Changes to Make It Easier to Find Housing in Opportunity Areas:

- To ensure that families participating in the mobility program can afford housing in opportunity areas, **increased voucher payment standards** may be needed. This can be accomplished by adopting SAFMRs or through other changes in the voucher payment standards that ensure families can afford a reasonable choice of units in opportunity areas.

- **Longer search times:** Under regular program rules, PHAs have discretion to vary the time allotted for families to find a unit with their voucher. To give families the ability to conduct a thorough search for units in opportunity areas, HUD will require that PHAs allow an initial search time of at least 90 days with the possibility of a 30-day extension.

Changes to Facilitate Speedy Lease-Up:

- **RFTA filing assistance:** In order for a family to lease-up with a voucher, the PHA must approve a request for tenancy approval (RFTA). To speed this process, the leasing coordinator will answer questions and is available to help the property owner and family fill out the RFTA. The PHA's mobility program staff will assist with turning in the paperwork and making sure the PHA processes the RFTA promptly.
- **Fast inspections:** The leasing coordinator and mobility program staff will coordinate to schedule and conduct an inspection in a timely manner after the PHA receives the RFTA packet. Some PHAs may certify their program's leasing coordinator to become a Housing Quality Standards inspector to streamline the inspection process. The PHA's administrative fees would pay for such certification.

3. Outreach, Recruitment, and Enrollment

This chapter describes how the PHAs participating in the Demonstration will conduct outreach and recruitment to likely eligible families and enroll them into the study (Section 3.1).¹⁴ The enrollment discussion includes the procedures for the random assignment of families into one of the two treatment groups (mobility-related services group) or the control group (standard services group). Section 3.2 provides an overview of what will happen during the Individual Enrollment Meetings, and Section 3.3 outlines the processes for tracking and monitoring recruitment and enrollment. The chapter then describes post-random assignment activities (Section 3.4). The chapter ends with a discussion of how outreach, recruitment, and enrollment will address potential barriers to equitable implementation of the Demonstration (Section 3.5).

Throughout this chapter, when we refer to ***outreach***, we mean the activities that reach out to likely eligible existing voucher families or waiting list families. By ***recruitment***, we mean the activities associated with bringing interested families to a briefing to learn more about the Demonstration. By ***enrollment***, we mean families attending an Individual Enrollment Meeting at which they provide informed consent, complete the baseline data collection, and are randomly assigned to a mobility-related services group or the standard services group. We use the term ***PHA staff*** to refer to PHA staff or their agents responsible for outreach, recruitment, and enrollment.

3.1 Family Outreach and Recruitment

Over the approximately four- and one-half-year enrollment period (August 2022 – April 2027), the 12 participating PHAs (at nine study sites) will seek to enroll more than 16,000 families into the Community Choice Demonstration study, including both families offered mobility services and families in the control group. Reaching this target will require a strong but flexible outreach and recruitment process with coordinated monitoring of progress among the PHA staff, the study team, the TA Provider, and HUD.

This section provides an overview of the recruitment goals for the Demonstration (3.1.1) and the recruitment procedures for existing voucher families (3.1.2) and waiting list families (3.1.3). The section closes with a description of the content and structure of the Demonstration briefings.

3.1.1 Outreach and Recruitment Procedures and Goals

Through the Demonstration’s outreach activities, the sites will inform likely eligible families about the opportunity to receive mobility-related services to support their moves to opportunity areas. Through outreach and further recruitment activities, the sites will aim to recruit enough families to meet the enrollment goals established for each site participating in the Demonstration. The sites have separate enrollment goals for the two types of families to be enrolled in the Demonstration: waiting list and existing voucher families. The sites’ enrollment goals and the outreach and recruitment procedures they will employ to achieve them are detailed in a Recruitment and Enrollment Plan (REP) developed by each site in partnership with the study team and with input from HUD. See Chapter 4 for an overview of the requirements applicable to the REP and the process for developing it.

¹⁴ This chapter is adapted from a Recruitment and Enrollment Training Manual prepared for the participating sites.

The recruitment of waiting list families will start with the PHA’s current waiting list and a waiting list preference specific to this Demonstration. Each PHA has created a special admissions preference that prioritizes, for the limited number of vouchers allocated to waiting list families in connection with the Demonstration, families on the waiting list who have a child aged 13 or younger and live in a census tract with a family poverty rate of 30 percent or higher.¹⁵ Family participation is completely voluntary.

Recruitment of existing voucher families will require a careful balancing act. On the one hand, PHAs will need to reach a large enough sample of existing voucher families and motivate them to enroll in the Demonstration to allow the evaluation to detect statistically significant impacts on mobility outcomes. On the other hand, PHAs will need to avoid enrolling large numbers of households who either are unlikely to move at all or are not interested in moving to an opportunity area or receiving mobility-related services. Another concern is to avoid enrolling families at the wrong time—for example, when they have already identified a unit they want to move into or when they are at a stage when they may decide to stay in their current unit and not move at all.

Often recruitment plans for randomized controlled trials are designed to prioritize meeting enrollment targets. Given the need to avoid recruiting existing voucher families who already have identified a unit or are unlikely to move at all, the study team is planning a different approach for this study. Participating PHAs will be encouraged to engage in proactive outreach to enroll as many existing voucher families as possible who might be interested in receiving mobility-related services and have enough time left before their current lease expires (or they otherwise need to move) to take advantage of the mobility-related services. Progress toward the enrollment goals will be carefully monitored, but the study team expects that some sites will not meet their goals during the study’s enrollment period. Given the study’s large size, shortfalls at some of the smaller PHAs should not affect the study’s ability to detect impacts, at least for the Demonstration as a whole.

Projected Enrollment Rates

Certain elements of the outreach and recruitment schedule are fixed, but sites will have flexibility to adjust the schedule to fit their needs and staff capacity. The site liaisons will support sites in adapting the schedules in this manner.

The size of each site’s outreach pool and how many initial invitation letters to send will be based on projected enrollment rates for each site. This section provides some initial projections for enrollment and the corresponding numbers of families that need to be invited each month to meet the study’s enrollment goals. The enrollment percentages will be refined based on the Phase 1 Pilot and then regularly monitored to see whether each site is recruiting too many or too few families to meet its enrollment goal.

The Demonstration’s overall enrollment goals are evenly split across the nine sites (except for Chester, which has a somewhat smaller goal). Eight of the nine sites will each seek to enroll 1,911 households over the enrollment period—1,800 existing voucher families and 111 waiting

¹⁵ Each PHA’s preference policy is described in its Administrative Plan. Details on how each PHA will administer these preferences are documented in the site’s REP.

list families.¹⁶ During the six- to nine-month Phase 1 Pilot Phase, most PHAs are targeting enrollment of 70 existing voucher families and 4 waiting list families. Over the remainder of the enrollment period, sites will seek to enroll approximately 38 families per month. Approximately two enrollments per month will be waiting list families, with the balance comprised of existing voucher families. (In practice, sites will likely group their enrollment of waiting list families, enrolling them quarterly or semi-annually rather than monthly.)

We assume that existing voucher families will enroll in the study at a lower rate than waiting list families because they already have housing assistance and may be satisfied with their current locations. Waiting list families may also perceive that enrolling in the study accelerates their receipt of an HCV.¹⁷

To enroll enough households to meet enrollment targets, our outreach and recruitment plan assumes that each site will need about 330 existing voucher families and about 5 waiting list families in each monthly outreach and recruitment group. These are initial assumptions only and will need to be tested during the Phase 1 Pilot and throughout the full implementation phase so we can adjust as necessary.

Exhibit 3-1 shows initial projections on the percentage of eligible households that will ultimately consent to enroll in the study. Exhibit 3-1 is based on the following projected enrollment rates:

- That 29 percent of existing voucher families who receive an invitation will attend a group Demonstration briefing; and 11 percent of those who receive an invitation letter will have at least one child aged 17 or younger and be willing to consent to enroll in the study.
- That 57 percent of waiting list families who receive an invitation will attend a Demonstration briefing; and ultimately, 30 percent of waiting list families who receive an invitation letter will be deemed eligible for the HCV program and consent to enroll in the study.

The percentages in Exhibit 3-1 are rough projections based on adjusting enrollment rates from the Seattle/King County CMTD program. We used 75 percent of the CMTD recruitment experience to estimate the response rate for existing voucher families and 150 percent of the CMTD experience to estimate the response rate for waiting list families. In CMTD, 38 percent of families invited to participate came to an enrollment session. We have reduced this estimate by 25 percent for existing voucher families (from 38 percent to 29 percent) because we expect existing voucher families to be less likely to respond than waiting list families in CMTD. By contrast, we have used 150 percent of the CMTD estimate for waiting list families (from 38 percent to 57 percent) because we expect the availability of a special preference in the Demonstration to increase take-up.

¹⁶ One PHA (Chester, PA) will seek to enroll somewhat fewer households (1,649).

¹⁷ Waiting list families that do not consent to participate in the study will not receive a voucher through the Demonstration. These families will return to the waiting list and retain the position that they had prior to the application of the Demonstration preference.

Exhibit 3-1. Projected Outreach, Recruitment, and Enrollment Rates in a Typical Site

	Families Expected to Respond	Number of Families per Year in Phase 1 (Feb. 2023–Sept. 2024)	Number of Families per Month in Phase 1 (Feb. 2023–Sept. 2024)
Existing Voucher Families			
Initial Invitation Letters Sent		3,964	330
Attend Demonstration Briefing	29%	1,149	96
Attend Enrollment Meeting	18%	713	59
Consent to Enroll	11%	436	36
Waiting List Families			
Initial Invitation Letters Sent		60	5
Attend Demonstration Briefing	57%	34	3
Attend Enrollment Meeting	47%	28	2
Consent to Enroll	30%	18	2
Total Households Enrolled		454	38

Actual recruitment rates will likely vary across sites. The study team will work closely with PHA staff to adjust the projections based on PHA feedback and historical experience at the PHA—including things such as biannual recertification, Phase 1 Pilot, and early program experience. Given the large numbers of families likely to be needed to meet the enrollment targets for the study, we expect that many PHAs will end up inviting the same families to participate in more than one year. We hope families who decline to participate in Year 1 may agree in subsequent years, though there is certainly a possibility that response rates will change over time. This will need to be monitored closely.

Until response rates are fully known, the study team recommends that the sites send out fewer invitation letters each month than shown in Exhibit 3-1 to avoid inundating the mobility service staff before they are ready. The Phase 1 Pilot period (described further in Chapter 5) will provide a good opportunity to learn more about response rates. To the extent that PHAs do not send invitation letters to every existing voucher family who meets the criteria for an invitation specified in the site’s Recruitment and Enrollment Plan (REP)—for example, every family with recertification in six months who has a child 17 or younger—we recommend that the invited families be randomly selected from among the families who meet the invitation criteria.

3.1.2 Identifying and Recruiting Existing Voucher Families

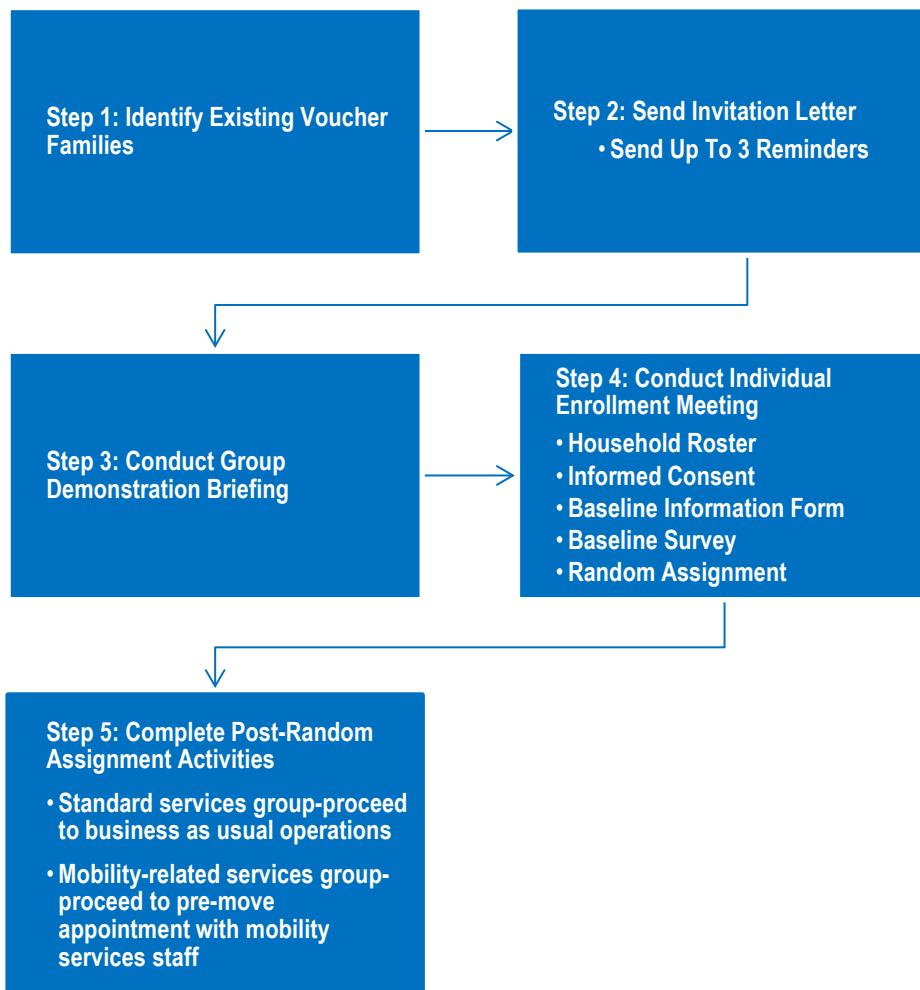
This section provides details on the timing and strategy for identifying and inviting existing voucher families to enroll in the Community Choice Demonstration. It includes parameters for the outreach and recruitment efforts, the development of basic recruitment language, and templates for outreach materials.

For most sites, outreach and recruitment activities will occur on a rolling basis, with new groups of existing voucher families regularly added to the pool eligible for outreach as more families approach their dates for recertification. Site liaisons will help PHAs establish an initial outreach schedule while developing their site’s REP. How often recruitment letters need to be issued and to how many households are decisions likely to be finalized after some trial and error during the Phase 1 Pilot period is described in Chapter 5.

Process Flow: Existing Voucher Families

There are five steps in the outreach, recruitment, and enrollment processes for existing voucher families, as shown in Exhibit 3-2. In this section, we provide the specifics for conducting the first two steps: (1) identifying existing voucher families, and (2) sending invitation letters.

Exhibit 3-2. Overview of Outreach and Recruitment Efforts—Existing Voucher Families



Step 1: Identify Existing Voucher Families

Step 1: Identify Existing Voucher Families

Rather than waiting for existing voucher families to request a new voucher to move—at which point a substantial share of families will already have a unit in mind—we recommend that PHAs invite families to enroll in the Community Choice Demonstration. Invitations should be issued only to households PHAs have determined will likely be eligible for the Demonstration. Existing voucher families must have a child aged 17 or younger residing in the household to be eligible for the Demonstration.

The study team recommends that PHAs reach out to existing voucher families approximately six months before their annual recertification date. (We recommend using the annual recertification date, rather than the lease-end date to avoid complications around month-to-month leases and other lease terms that are not annual.) Proactively reaching out to families well in advance of

their lease-end date helps ensure there will be ample time to provide mobility-related services before their lease expires. This is not a formal eligibility requirement, however.

PHAs may sort their list of existing voucher families by household composition (i.e., presence of a child aged 17 or younger) to create a list of families to target for outreach and recruitment. Once that list is created, the list will be sorted by recertification date. The PHAs will then group the families into cohorts based on their target outreach month. For example, any family with a recertification date of April 2023 could be flagged for outreach in October 2022 (the October 2022 cohort). PHAs have flexibility in deciding when and how often they review their list. PHAs may draw a list annually to plan the flow of enrollment for the upcoming year, or they may draw and sort a new list each month to draw from the most current existing voucher family list.

Each PHA will create an outreach database with the existing voucher families' PHA Household ID Number, Head of Household name, address, phone, and email. This information will be used to generate customized outreach materials to send to the Heads of Households in each monthly outreach group. The database should be updated each month with each new group of families added. This is the recommended process, but sites can work with their site liaison to determine their own frequency and process as appropriate. Should the number of families identified for possible outreach in a given month based on a PHA's sorting of its list of existing voucher families exceed the number of families needed for outreach in that month, the PHA should randomly select families to reach the desired number of cases.

Step 2: Send Invitation Letter

Step 2: Send Invitation Letter

The study team will discuss the PHA's outreach methods during planning meetings to support the PHA in completing its REP, including providing guidance to sites that might want to customize the methods to their individual context.

Once the PHA identifies which families to invite (see Step 1 above), the basic approach consists of sending an initial invitation letter and a series of follow-up communications. Outreach efforts will continue for up to eight weeks for each cohort of invited families.

The study team recommends that initial invitation letters be traditional paper letters, sent via U.S. Postal Service, plus an email as backup. An actual letter with the logos of the Demonstration, PHA, and HUD will help legitimize the study. The study team has provided the sites with a letter template and study brochure. The invitation letter should include:

- An overview of the Community Choice Demonstration.
- An invitation for families to enroll in the Demonstration.
- Instructions on what to do next if interested:
 - Families will have the option of attending a group Demonstration briefing to learn more about the Demonstration (Step 3 in Exhibit 3-2). Families who need accommodations, cannot make one of the scheduled group Demonstration briefings, or are eager to enroll, can skip the briefing and proceed directly to an Individual Enrollment Meeting (Step 4 in Exhibit 3-2).

- Families can contact the PHA staff with questions or for additional information, to reserve a spot at an upcoming group Demonstration briefing, or to schedule an Individual Enrollment Meeting.
- Contact information, including the PHA’s phone number and links to the PHA website.

Sending Reminders

If there is no response to the initial letter, the study team recommends at least three follow-up attempts over an eight-week period (the “reminder” bullet from Step 2 in Exhibit 3-2). The study team will work with the PHA staff to determine what mode will most likely reach their families—postcard, email, text, or phone follow-up. Regardless of format, all reminders will include a required information statement that standardizes communication about the Demonstration, a reminder that the PHA is trying to reach the family to tell them about this unique opportunity, and information on how to contact the PHA. Emails can also include direct links to sign up for the group Demonstration briefing and to the PHA website for more information. At any time during this eight-week active recruitment period, families can sign up to attend a group Demonstration briefing. After the third reminder with no response within two weeks, active follow-up will cease.

Supplemental Outreach and Recruitment Activities

It may be difficult for PHAs to recruit enough existing voucher households through the invitation letter and reminders alone. The study team has identified several supplemental activities that PHAs could consider to further make families aware of the Demonstration. Some are informational only, to prepare families to respond positively to the invitation letter when they receive it. Some are more active.

Examples of supplemental outreach and recruitment activities:

- Annual recertification briefings, where PHA staff can introduce the Demonstration to existing voucher families and address any questions they may have. We will provide training materials to help recertification staff understand the Demonstration and how to recruit families into it.
- Including information about the Demonstration in any briefings the PHA conducts about how to use a voucher to move to a different unit.
- Adding information about the Demonstration to the voucher issuance packet.
- Providing information about the Demonstration on websites or social networks maintained by the PHA, their partners (mobility services staff), and other PHA partners.
- Informing local stakeholders (resident advisory boards or landlord advisory boards) about the study through newsletters.
- If a PHA is struggling to reach its Demonstration enrollment targets, the study team will help it think about developing materials to reach a wider audience, such as materials that Family Self-Sufficiency program staff can use to educate that program’s participants about the Demonstration.

As outreach efforts get underway, we expect some existing voucher families may hear about the Demonstration and want to enroll even though they did not receive an invitation. Other existing voucher families who were invited but did not respond during their eight-week active recruitment period may decide they want to enroll after all. Our evaluation design gives PHAs some flexibility on how to handle these situations, but in general, we recommend that PHAs allow existing voucher families to enter the Demonstration at any time as long as they are eligible, while encouraging families to consider whether the enrollment timing is right for them if they have less than four months before they need to move.

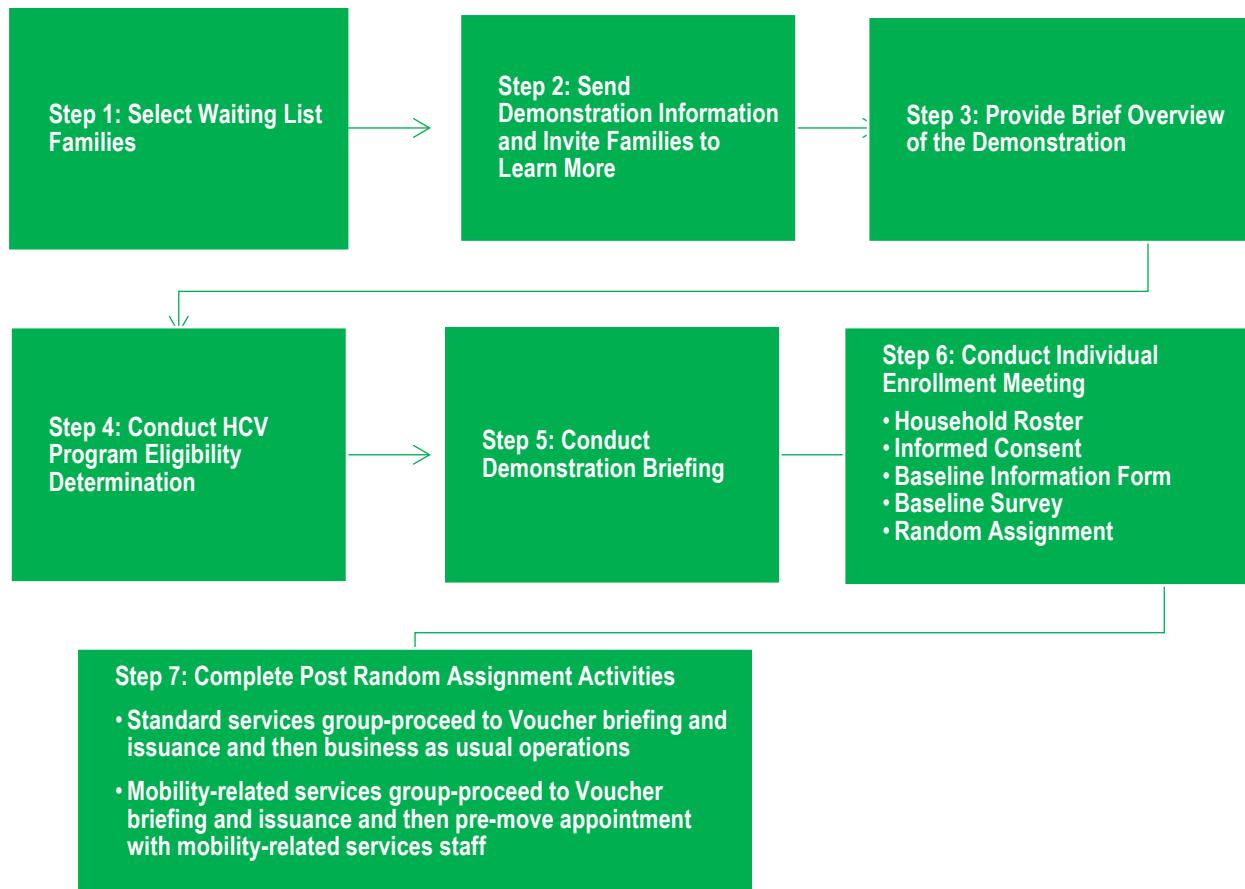
3.1.3 Identifying and Recruiting Waiting List Families

Before a PHA can begin outreach efforts with its waiting list families, it must adopt the waiting list preference needed for this Demonstration in its Administrative Plan and obtain approval from its boards. If applicable, it must also update its PHA Plan, which requires public comment and submission to HUD. The PHA must also apply the Demonstration preference to its waiting list.

Process Flow: Waiting List Families

There are seven steps in the identification, recruitment, and enrollment process for waiting list families, as shown in Exhibit 3-3. In this section, we provide the specifics for conducting the first four steps: (1) selecting waiting list families; (2) sending Demonstration information and inviting families to learn more; (3) providing an overview of the Demonstration; and (4) determining HCV program eligibility.

Exhibit 3-3. Overview of Process Flow: Waiting List Families



Step 1: Selecting Waiting List Families

Step 1: Select Waiting List Families

The first step in the recruitment process for waiting list families is the selection of waiting list families to contact about the Demonstration. PHAs will begin by applying the Demonstration preference to their waiting list.¹⁸

Once the waiting list has been sorted, PHAs will invite families in sequential order, starting with families assigned the Demonstration preference. If a PHA exhausts the list of waiting list families with the Demonstration preference, they will select the next families on the waiting list that have at least one child aged 17 or under.

PHAs have flexibility in determining how frequently they select families from the waiting list for enrollment into the Community Choice Demonstration, but most will do it on a quarterly basis.

Step 2: Sending Demonstration Information and Inviting Families to Learn More

Step 2: Send Demonstration Information and Invite Families to Learn More

Once a PHA has selected families from the waiting list, they will send the families a letter describing the Demonstration. This letter invites families from the waiting list to have their eligibility determined for the HCV program. It explains that to have a chance to receive a voucher immediately rather than going back on the waiting list, they must be willing to participate in the Demonstration. It also includes instructions for how families who are

interested can learn more about the Community Choice Demonstration and next steps for determining HCV eligibility. A template for this letter has been provided by the study team, and PHAs can adapt the letter with the approval of the study team. PHA staff will also enclose a Community Choice Demonstration brochure, provided by the study team, in this mailing to provide families with additional information about the Demonstration.

PHA staff will track outreach efforts at each stage so they can plan follow-up efforts. As with existing voucher families, follow-up attempts will incorporate a variety of communication modes to maximize the likelihood of a response. PHAs can use modes the PHA finds most effective with its families (such as postcards, follow-up letters, emails, text messages) over an eight-week period. Each site's REP will provide details on how the PHA staff will follow up and track responders and non-responders.

Step 3: Providing an Overview of the Demonstration

Step 3: Provide Brief Overview of the Demonstration

Waiting list families that express interest in the Community Choice Demonstration will be given additional information about participation in the Demonstration. The study team has provided PHA staff with Demonstration briefing materials to provide families with more information. PHA staff must have a conversation with interested families at this point and not simply rely on written information. Key points that the PHA will convey to interested families include that:

¹⁸ In accordance with the authorizing legislation, all PHAs are required to adopt a special Demonstration preference for the Mobility Demonstration Voucher (MDVs) and the turnover vouchers the PHA is making available for the Community Choice Demonstration. The waiting list preference is for families with at least one child aged 13 and under that live in a census tract with a family poverty rate of 30 percent or higher. HUD has provided the sites with guidance about how to structure this preference and obtain the information about applicants needed to apply it.

- A limited number of new vouchers were made available because of the Community Choice Demonstration, along with whatever number of turnover vouchers the PHA has dedicated for use in the Demonstration.
- Receiving one of these vouchers is contingent upon agreeing to be in the Demonstration and study.
- Participation in the Demonstration and study is voluntary.
- If the family decides not to participate in the Demonstration and study, they will retain their place on the agency's HCV waiting list.

PHA staff must also make sure that interested families understand that they still need to go through the regular HCV eligibility screening process to determine whether they are eligible to receive an HCV.

Step 4: Conducting HCV Program Eligibility Determination

Step 4: Conduct HCV Program Eligibility Determination

Once waiting list families indicate they are potentially interested in participating in the Demonstration, PHA staff will confirm that the family is eligible to participate in the Community Choice Demonstration—that is, they have a child 17 or under living with them. Additionally, if the waiting list family was selected via the Demonstration preference, staff will also confirm that the family has at least one child aged 13 or under living in the household with their parent or guardian and that their current address is in a census tract with a family poverty rate of 30 percent or higher.

If the family meets the criteria for participation in the Demonstration, PHA staff will proceed with their normal process for determining eligibility for the HCV program. HCV program eligibility procedures are site specific and may include a separate meeting, be an online process, or both. If the family is determined eligible for the HCV program, they will proceed to a Demonstration briefing.¹⁹

If the family is ineligible to receive an HCV, the PHA will notify the family that they are not eligible to participate in the HCV program at this time. This notification process will follow the PHA's normal protocols. A family determined ineligible for the HCV program will not proceed to a Demonstration briefing or any further steps for study enrollment.

3.1.4 Demonstration Briefings

After receiving an initial invitation letter or follow-up recruitment materials, interested existing voucher and waiting list families will connect with the PHA according to the instructions provided to them in the outreach materials. Some PHAs will ask the families to call the PHA to schedule a time to attend a Demonstration briefing, and some will ask the families to sign up online. The exact process for each PHA will be detailed in their REP.

¹⁹ The majority of sites are following the process described here; however, a handful of sites are customizing the order of these steps to better align with their existing procedures. For example, they may conduct voucher eligibility and the HCV briefing prior to the Demonstration briefing and enrollment. Each site's process will be documented in its REP and receive HUD approval prior to launching their Pilot.

Both existing voucher families and waiting list families will receive the same information about the Demonstration, but the process for accessing that information differs. These differences are described below.

Step 3 (Existing Families): Conduct Group Demonstration Briefing

For *existing voucher families*, PHAs have a choice between holding group Demonstration briefings or conducting individual briefings, although the study team expects most families to attend group Demonstration briefings (Step 3 in Exhibit 3-2).²⁰ As noted in the invitation letter (Step 2: Sending the Invitation Letter), existing voucher families who need accommodations, cannot make one of the scheduled group Demonstration briefings, or are eager to enroll can skip the briefing and go straight to the Individual Enrollment Meeting. For families that take this option, the PHA staff must ensure that they receive all of the same information provided during the group Demonstration briefing during the Individual Enrollment Meeting.

Step 5 (Waiting List Families): Conduct Demonstration Briefing

The same information will be provided to *waiting list families* as existing voucher families during the Demonstration briefing (Step 5 in Exhibit 3-3). Some PHAs will provide this information on a one-on-one basis—for example, in an individual briefing at the start of the same meeting that will serve as the Individual Enrollment Meeting. Others plan to have waiting list families attend group Demonstration briefings.

Content of Demonstration Briefings

The content of all Demonstration briefings, group or individual, will be the same for waiting list and existing voucher families. The briefings will include:

- An overview of Community Choice Demonstration that includes a summary of its:
 - Purpose.
 - Criteria for participation.
 - Mobility-related services.
 - Opportunity areas.
- A description of the participation requirements and voluntary nature of participation in the Demonstration and study. (For waiting list families, the description will also note that families must participate in the Demonstration and study to qualify for a voucher through this selection process. If they do not wish to participate, they may remain on the voucher waiting list.)

²⁰ Group Demonstration briefings minimize PHA costs and burden on PHA staff; to reach as many families as possible at once, the study team assumes these briefings will primarily be group sessions. Some practitioners believe that group Demonstration briefings are beneficial because families often ask questions or share information that benefit others in the room. Other practitioners believe that individual sessions are best because they can be tailored to meet a family's specific questions. PHAs may choose to offer individualized Demonstration briefings if they prefer.

- An explanation of random assignment.
- An opportunity for families to ask questions of the PHA staff.

The study team has provided sample session agendas and materials, including PowerPoint slides, for PHA staff to adapt for their use. The study team has also provided a pre-recorded video that includes all the required information and must be shown to all families during the Demonstration briefing. The video is available in English and Spanish; see Section 3.5.1 for more information on how the PHAs will ensure accessibility for all families. Sites are encouraged to provide a brief introduction and overview of the session using the PowerPoint slides, show the video, return to the PowerPoint slides to reinforce the points made in the video, and then take questions.

The study team expects group Demonstration briefings will be relatively short, lasting no more than 30 minutes each. This assumes that the primary purpose of the group Demonstration briefing is to provide an overview of the Demonstration and help families decide whether or not to proceed to an Individual Enrollment Meeting. Questions specific to a family or that require more detail to answer may be more easily addressed in the Individual Enrollment Meeting.

At the end of the group Demonstration briefing, interested families will either proceed directly to an Individual Enrollment Meeting or schedule an Individual Enrollment Meeting to be held in person or virtually at a future date. To reduce the possibility of losing interested families, it is ideal for families to be enrolled immediately following a group Demonstration briefing. If a family chooses to continue with enrollment, completing the informed consent process and baseline data collection through the Individual Enrollment Meeting will take approximately 90 additional minutes. (Individual Enrollment Meetings are described in detail in Section 3.2.1.)

Briefing Structures

As noted above, PHAs have several options for conducting the Demonstration briefings:

Group Webinars. Some group Demonstration briefings will be via videoconference. Families will need to have access to a computer/tablet and the internet to be able to participate virtually. Or, if families are willing to use their minutes, they can use their smartphones. A videoconference format allows PHAs to reach many families at once, but we recommend limiting these webinars to no more than 20 families at one time. Being online already will allow families to proceed directly to a virtual Individual Enrollment Meeting if the family wants to, and the PHA has enough enrollment staff available to accommodate them. If more families wish to enroll than the PHA has staff available, the PHA will schedule follow-up Individual Enrollment Meetings for the families they cannot accommodate immediately following the webinar. PHAs can choose the frequency of group webinars but should offer them at different times of the day and different days of the week so that more families can attend.

Group In-person Sessions. Group in-person briefings should be small to allow time for staff to answer questions from all attendees. PHAs should schedule no more than 20 families to participate in any one group session, with the assumption that some scheduled families will not attend. The key is to ensure that there is enough PHA staff available to conduct Individual Enrollment Meetings afterward. If more families wish to enroll than the PHA has staff available, the PHA will schedule follow-up Individual Enrollment Meetings for the families they cannot accommodate immediately following the session. We assume that in-person group

Demonstration briefings will be held in person at a PHA office, but group sessions could also be held in local community spaces such as a library or community center.

Individual Briefings. For their CMTO Demonstration, the Seattle and King County Housing Authorities used individual information sessions, which worked well. PHAs that wish to hold individual Demonstration briefings should feel free to do so. Individual briefings may be helpful for families who need additional assistance or would like to ask questions about the Demonstration in private. Individual Demonstration briefings may be necessary to provide information to families with limited English proficiency (if group sessions are not available in their preferred language) or to provide reasonable accommodations for people with disabilities. Given the smaller volume of waiting list families, individual Demonstration briefings may also be the best way to convey this information to interested waiting list families. Individual briefings can occur in-person or online.

For existing voucher families and waiting list families, these individual Demonstration briefings can feed directly into Individual Enrollment Meetings for those who wish to learn more. However, it will be important to confirm a waiting list family's voucher eligibility before its Individual Enrollment Meeting. One approach is for a combined Demonstration briefing and Individual Enrollment Meeting to take place for waiting list families as soon as their HCV program eligibility is confirmed.

3.2 *Individual Enrollment Meeting*

Step 4 (Existing Families): Conduct Individual Enrollment Meeting

Families who express an interest in participating in the Demonstration will need to attend an Individual Enrollment Meeting and formally agree to participate. The processes for conducting the Individual Enrollment Meetings are the same for existing voucher families (Step 4 in Exhibit 3-2) and waiting list families (Step 6 in Exhibit 3-3). PHA staff will use the Enrollment Tool to complete each component of the Individual Enrollment Meeting.

Step 6 (Waiting List Families): Conduct Individual Enrollment Meeting

This section lays out the processes for conducting Individual Enrollment Meetings with families—including an overview of the Individual Enrollment Meeting (3.2.1) and a description of the procedures associated with each of the five components that make up the Individual Enrollment Meeting (3.2.2).

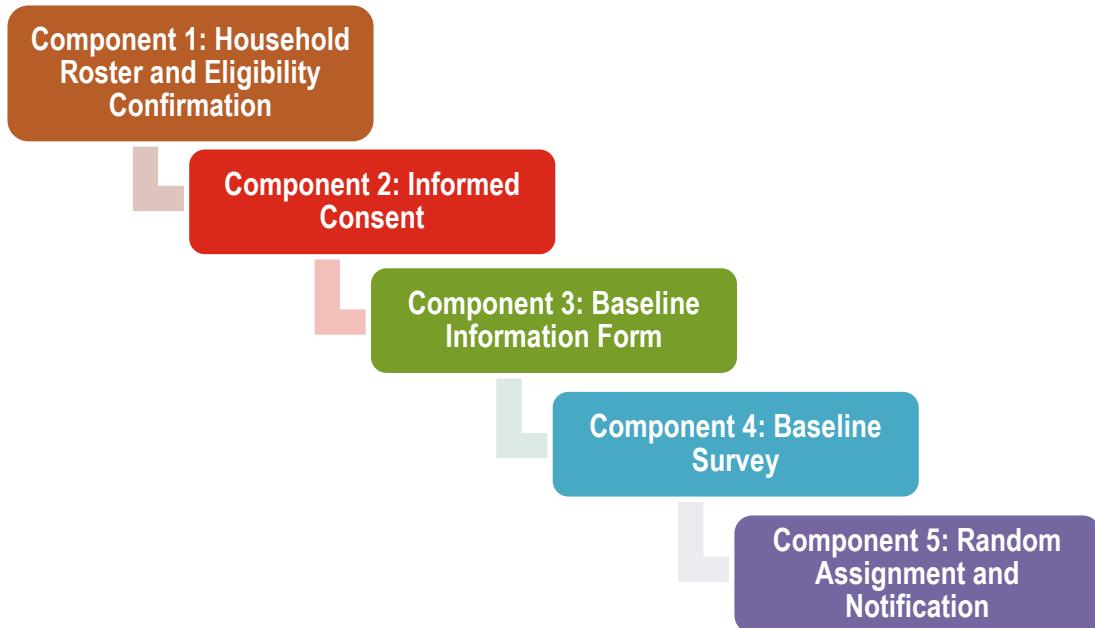
3.2.1 Overview of the Individual Enrollment Meeting

Enrollment into the study will be conducted by PHA staff (this term includes those assigned to the enrollment task by or on behalf of the PHA)²¹ who are not providing any mobility-related services to voucher families. Individual Enrollment Meetings will be one-on-one between a PHA staff member and a family's head of household. Meetings may be in-person or remote, with remote meetings held via videoconference (preferably) or by phone. These meetings, as with any

²¹ Some PHAs may choose to designate an agent to administer the Baseline Information Form (described in this section's Step 3), use the Enrollment Tool to determine a household's random assignment status, and enroll households in the study. Throughout this section, we use the terms "PHAs" or "PHA staff" to be inclusive of any such agents, whether or not they are formally employed by the PHA as staff members.

interactions with program participants, should never be recorded. The Individual Enrollment Meeting includes five components as shown in Exhibit 3-4.

Exhibit 3-4. Components of the Individual Enrollment Meeting



As described throughout this section, responsibility for entering the information into the Enrollment Tool is shared between PHA staff and the family. Exhibit 3-5 summarizes the roles and responsibilities during the Individual Enrollment Meeting. In rare instances, real-time entry into the Enrollment Tool may not be feasible. In these circumstances, PHA staff and the family will complete the required forms on paper. PHA staff will then enter the information as soon as the Enrollment Tool is available to them. See the section on Paper Procedures below for more detail.

Before the Individual Enrollment Meeting starts, PHA staff will make sure that all materials are available in the appropriate language and interpreters are accessible if needed. Staff will also ensure that paper forms are available in case of technical difficulties, such as internet issues. Prior to the Individual Enrollment Meeting, PHA staff should log in to the Enrollment Tool to ensure there are no complications. If conducting the enrollment in person, the head of household should have access to an electronic device such as a tablet or laptop. If they do not have access to such a device, PHA staff should provide one. The head of household will use the device to complete the steps they are responsible for during the Individual Enrollment Meeting.

Exhibit 3-5. Roles and Responsibilities During the Individual Enrollment Meeting

Step	PHA Staff	Head of Household (HOH)
Household Roster	Collects information from the HOH and inputs into the Enrollment Tool. Verifies the household is not already participating in the Demonstration.	Provides information to PHA staff verbally.
Informed Consent Forms	Reviews Informed Consent Forms with the HOH and other adult household members if present. Answers family's questions about the Demonstration and study.	Reads and signs the Informed Consent Forms. ²²
Baseline Information Form	Collects information from the HOH and inputs into the Enrollment Tool.	Provides information to PHA staff verbally.
Baseline Survey	Provides HOH with electronic device (or email link if virtual).	Completes survey on their own using a device (or email link) provided by PHA staff. ²³
Random Assignment	Initiates random assignment in Enrollment Tool. Once complete, provides family with Random Assignment Notification Letter.	Reviews Random Assignment Notification Letter.

Paper Procedures

PHA staff should make every effort to capture the data collected during the Individual Enrollment Meetings electronically through the Enrollment Tool. However, there will be times when electronic access to the Enrollment Tool may not be feasible. For example, families may be in areas with limited or no access to the internet, power outages may occur mid-meeting, or limited English proficiency or other accessibility issues may require paper data collection. The PHAs will be provided with copies of all forms used in the Individual Enrollment Meeting. However, even when paper forms are used, PHA staff must conduct random assignments in the Enrollment Tool.

3.2.2 The Five Components of the Individual Enrollment Meeting

Staff will use the Community Choice Demonstration's web-based Enrollment Tool to guide them through the five components of the enrollment process shown above in Exhibit 3-5 during the Enrollment Meeting.

Step 1: Household Roster and Confirmation of Household Eligibility

The first step of enrollment is for PHA staff to complete the Household Roster, data about the family recorded in the Demonstration's Enrollment Tool. Staff will also check that the family has not previously enrolled and confirm the family's eligibility for the Demonstration.

²² In cases where the head of household is not the parent/guardian of a child in the household, the parent or guardian of that child must sign the Other Adult Consent Form and the Parent/Guardian Permission Form in order for that child to be included in the study.

²³ In some instances, the Enrollment Tool may not be available—for example, due to poor internet connectivity or because of language or other accommodation needs. In these scenarios the enrollment data collection will be done on paper as described further in this section.

Complete Household Roster for Family

To complete the Household Roster, PHA staff will record the head of household's identifying information—name and Social Security number (SSN) or alternative ID for those without an SSN. If the head of household is an existing voucher family, staff will also enter the identification number the PHA uses to identify the household.

The Enrollment Tool automatically checks that the head of household was not previously enrolled in the Demonstration by comparing the information entered against all families entered previously to identify duplicate information. If the head of household was previously enrolled, staff will highlight this fact, give the date of the enrollment, and explain the family's next steps based on their random assignment status. Those assigned to a mobility-related services group will be referred to the mobility services staff to determine the next steps. Those assigned to the standard services group will be told that they are already enrolled in the study and selected to be in the standard services group that does not receive mobility-related services.

If the head of household was not previously enrolled, staff will continue to enter the names and ages of all household members (adults and children) and confirm the family's eligibility for the Demonstration.

Confirming that the Family Meets the Criteria for the Demonstration

Only families that meet the criteria for participation in the Demonstration will be allowed to proceed through the enrollment process. PHAs will have preliminarily determined that families meet these criteria when they select them and then send the initial invitation letter (Steps 1 and 2). For waiting list families, the PHAs will confirm that families meet the participation criteria when they provide a brief overview of the Demonstration (Step 3 in Exhibit 3-3) and conduct the family's program eligibility determination (Step 4 in Exhibit 3-3). The Demonstration PHA staff will restate the criteria during the Demonstration briefings, and finally, they will *confirm* that the family meets the criteria for participating in the Demonstration when they complete the Household Roster during the Individual Enrollment Meeting. Confirming this information is important, as it may have changed since it was recorded in the PHA's data system.

To participate in the Demonstration, existing voucher families:

- **Must have at least one child aged 17 or younger** living in the household with their parent or guardian at the time of enrollment.²⁴

To participate in the Demonstration, waiting list families:

- **Must meet the PHA's standard HCV program eligibility requirements.**
- **Must have at least one child aged 17 or younger** living in the household with their parent or guardian at the time of enrollment.

For waiting list families, both of these conditions should have been determined prior to the Individual Enrollment Meeting. Enrollment staff can rely on these prior determinations for confirmation of eligibility. For waiting list families selected through the Demonstration

²⁴ See Section 8 Housing Choice Vouchers: Implementation of the Housing Choice Voucher Mobility Demonstration, *Federal Register*, Vol. 85, No. 136, Wednesday, July 15, 2020, pages 42890-42914.

Preference, eligibility for that preference should also have been verified prior to the Individual Enrollment Meeting.

Once the Household Roster is complete and eligibility is confirmed, the head of household will proceed to the next step, Informed Consent.

Step 2: Informed Consent

After completing the Household Roster, PHA staff will begin the process of obtaining Informed Consent. Before any family member can consent to participate in the study, each adult family member must be properly informed about the study. The Informed Consent process builds upon the information provided in the Demonstration briefing.

There are three Informed Consent Forms, one for each of three different types of family members. Exhibit 3.6 describes which type of consent form is required for each type of family member, who will sign the form, and what the form authorizes.

Exhibit 3-6. Consent Forms Required by Family Member Type

	Head of Household²⁵	Children Aged 17 or Under	Other Adult Household Member
Required Consent Form	Head of Household Existing Voucher Families Informed Consent Form <i>or</i> Head of Household Waiting List Family Informed Consent Form	Parent/Guardian Permission Form	Other Adult Household Member Informed Consent Form
Purpose of Consent Form	Both forms enroll the family's head of household into the study and permit the research team to capture information on the household overall.	This form provides parent/guardian permission for each of the children aged 17 or under to be part of the study and collect information about them.	This form permits the research team to capture information for other adult household member(s).
Signatory of Consent Form	Head of household	Parent or legal guardian of each child enrolled	Other adult household member(s)

All of the Informed Consent Forms state that HUD will retain participant data for 30 years after the informed consent date. We will not submit raw qualitative interview data to HUD. Each Informed Consent Form addresses the following points:

- What is the Community Choice Demonstration?
- Who can be in the Community Choice Demonstration?
- What does it mean to be part of the Community Choice Demonstration?
- What are family members being asked to consent to now?
- What other data collection may they be asked to participate in?

²⁵ There are two head of household Informed Consent Forms—one for existing voucher families and one for waiting list families—because some of the risks and benefits vary by type of household.

- What other types of data may researchers collect over the longer follow-up survey?
- What are the benefits of participating in the Community Choice Demonstration?
- What are the risks of participating in the Community Choice Demonstration?
- Do I have to participate in the Community Choice Demonstration?
- Can I stop participating in the Community Choice Demonstration after I join?
- How will my information be protected?
- How long will the study last?
- Will my information be used in the future? Can it be used for additional studies?
- Who can I call with questions?

Each Informed Consent Form contains a statement of legal consent, a place for family members to indicate their consent, and a statement ensuring that these forms were reviewed and approved by the Office of Management and Budget. As part of obtaining Informed Consent, PHA staff will ensure that applicants know that participation in the study is voluntary, but that to be eligible to receive Community Choice Demonstration services, the family must consent to participate in the study. In the case of waiting list families, PHA staff will also make sure that families understand that receipt of a voucher through this particular process is contingent on study participation.

There are some differences across the three Informed Consent Forms. The two head-of-household Informed Consent Forms have subtle differences:

- *The Head of Household Existing Voucher Families Informed Consent Form* notes that the family already has a Housing Choice Voucher, and that they will retain their voucher, subject to HCV program rules, even if they decide not to be in the Community Choice Demonstration study.
- *The Head of Household Waitlist Family Informed Consent Form* notes that the family meets the criteria for the Demonstration that put them at the top of the waiting list, and that they will receive a voucher if they agree to be in the Community Choice Demonstration study. If they choose not to participate in the Community Choice Demonstration study, they will go back on the waiting list where they will retain their original place.

The *Parent/Guardian Permission Form* includes a section describing the information the study will collect about each child the parent/guardian permits to enroll in the study. The parent or legal guardian of each child enrolled must sign the form. To avoid duplicating some material, the *Parent/Guardian Permission Form* refers to the head of household Informed Consent Form for consent statements applicable to the household or just the head of household. The *Other Adult Household Member Informed Consent Form* includes much of the same information as the head of household Informed Consent Forms. The primary difference is that this form notes that whether or not the other adult agrees to participate has no bearing on the head of household's ability to enroll in the Demonstration.

Procedures for Head of Household Informed Consent

To obtain informed consent, a PHA staff member will meet with each head of household individually to explain the Demonstration using a standard script. If an existing voucher family has not attended a group Demonstration briefing, PHA staff will then show a **five-minute video** provided by the study team. (All waiting list families should have seen the video already.) The video will ensure that applicants across all nine sites receive consistent information about the study and participation requirements. The video will also reduce the burden on PHA staff and motivate applicants to enroll in the study.

As part of the standardized script, a PHA staff member will review the key aspects of the Informed Consent Form (Appendix 16) with the head of household, address any questions, and ask whether the head of household would like to enroll in the study.

If the Individual Enrollment Meeting is in person and the head of household is interested in enrolling, the staff member will give them the Informed Consent Form to read on a tablet or other electronic format supplied by the PHA, and the head of household will sign the form electronically, on the screen. This signature will automatically upload to the study's online Enrollment Tool.

If the Individual Enrollment Meeting is remote, the signature process will vary based on whether the head of household has access to the Internet through a desktop computer, tablet, or smartphone. If the head of household has access, the PHA staff member will display the Informed Consent Form on the screen, and the head of household can provide consent electronically through remote access.

If the head of household does not have access to a computer, tablet, or smartphone, the meeting may be conducted by phone. In this instance, or when electronic consent is not feasible, PHA staff will obtain **written consent on paper**. The staff member will mail two copies of a paper Informed Consent Form to the head of household in advance of the meeting. During the phone meeting, the staff member will review the form and all the key points of consent with the family. The head of household will sign one copy of the form and return it to the PHA by mail or in-person; they will keep the other copy for their records. Staff will record in the Enrollment Tool that informed consent has been obtained on paper. Regardless of whether consent was obtained electronically or on paper, each family will receive a copy of the signed Informed Consent Form for their records.

Procedures for Parent/Guardian Permission Form

In cases where the head of household is the parent/guardian of at least one child aged 17 or younger in the household, PHA staff will review the Parent/Guardian Permission Form with the head of household and record individually whether they give permission for each child listed in the Household Roster to participate in the study. ***The parent or guardian must consent to the participation of at least one child aged 17 or younger in order for the family to participate in the Demonstration.*** The Enrollment Tool will track whether or not parent/guardian permission was obtained for each child in the household. Parents/guardians can request that a child be withdrawn from the study at any point prior to the child's 18th birthday.

In cases where the head of household is not the parent or guardian of one or more children aged 17 or younger, the head of household cannot sign the Parent/Guardian Permission Form. This does not prevent the child or children from participating as long as the parent/guardian lives in

the household. In these cases, PHA staff will have the actual parent/guardian sign the Parent/Guardian Permission Form and also complete an Other Adult Household Member Informed Consent Form.

Procedures for Other Adult Household Members Informed Consent

If other adult household members are present during the Individual Enrollment Meeting, the PHA staff will attempt to obtain their informed consent at that time. Signature procedures will follow those established for the head of household. If other adult household members listed on the Household Roster are not present, the study will send the head of household a link via email inviting the other adult household members to enroll in the study. The email invitation will include instructions to watch the video explaining the study and the key components of informed consent, contact PHA staff to review the consent document if they have questions, and then provide their consent electronically. The email invitation will also include a copy of the Informed Consent Form for other household members to review. The Enrollment Tool will track which other adults have and have not consented. The study will automatically email other adult household members who have yet to consent up to three times, then active recruitment will stop. The consent of other adult household members is not required for the household to enroll in the Demonstration unless, as discussed above, they are the parent/guardian of one or more of the children in the household that will be participating in the study.

Step 3: Baseline Information Form Administration

Once the head of household consents, PHA staff will complete the Baseline Information Form with the family to obtain key baseline characteristics on all household members. The Baseline Information Form establishes contact information for the family, including the family's current physical address and contact information for three non-household members who will be able to reach the family's head of household if needed. The form also collects information about the children and other adults living in the household, including:

- Contact information for other adults living with the head of household.
- Relationship of other adult household members to the head of household.
- Employment status and job location for adult household members.
- School satisfaction, enrollment status, location of school, daycare setting, and child health.

The Enrollment Tool will guide staff in completing the Baseline Information Form for each enrolling family. The procedures for completing the form are the same whether the Individual Enrollment Meeting is in person or virtual. In either setting, the PHA staff member asks the head of household for the required information and records it into the Enrollment Tool in real time.²⁶

Step 4: Baseline Survey Administration

After informed consent has been obtained and PHA staff finish collecting the information in the Baseline Information Form, the head of household will self-administer the Baseline Survey online, using a link the PHA staff will send to the provided email address or smartphone number

²⁶ Enrollment staff will have paper copies of the Baseline Information Form and the Baseline Survey available in case access to the study's online Enrollment Tool is interrupted for any reason, so responses can be recorded manually and entered into the Tool later.

from the Enrollment Tool. Due to the personal nature of the data asked for, the PHA staff members will not be involved in recording the family's responses to the survey. Whether the Baseline Survey is completed during an in-person or remote Individual Enrollment Meeting, PHA staff must ensure that the head of household has a private space to fill in the survey.

The Baseline Survey gathers information about the household's current living situation, neighborhood preferences, finances, education and employment, and health status. This information will help the study team determine how family characteristics may impact the likelihood that a family moves to an opportunity area.

The categories of fields collected in the Baseline Survey include:

- Head of household personal information:

Race/ethnicity of the head of household, country of birth.

- Current living arrangements and satisfaction:

Living arrangement, length of residence in metropolitan area and neighborhood, neighborhood satisfaction and perception of neighborhood safety, perception of whether condition of home and neighborhood impacts parenting.

- Access to nearby services:

Type of childcare arrangements, regular activities, and services (childcare, after-school activities, employment, place of worship, primary care, other medical services) that are located nearby.

- Mental and physical health:

Subjective well-being and health-related information for the head of household, Kessler-6 measure of psychological distress (Kessler et al. 2003)²⁷, health insurance coverage, health-related information for the head of household.

- Housing search preferences, attitudes, and experiences:

Information about current housing search, amount of pressure to move soon, reasons to remain in current neighborhood, and reasons to move to new neighborhood.

- Financial well-being:

Financial hardship, food insecurity, education of the head of household, employment status, and location for the head of household.

²⁷ Kessler, Ronald C., Peggy R. Barker, Lisa J. Colpe, Joel F. Epstein, Joe C. Gfroerer, Eva Hiripi, Mary J. Howes, Sharon-Lise T. Normand, Ronald W. Manderscheid, Ellen E. Walters, and Alan M. Zaslavsky. 2003. "Screening for Serious Mental Illness in the General Population," *Archives of General Psychiatry* 60 (2): 184–189.

The Baseline Survey administration procedures will vary depending on whether enrollment is in person or remote.

In-Person Baseline Survey Administration

Enrollment staff will have the head of household complete the Baseline Survey on their own electronic device or using a computer or tablet provided by the PHA. To the extent possible, the survey should be completed in private, away from PHA staff and other people.

The head of household will have the option of reading the survey or having the questions and response options read aloud. If possible, families will be encouraged to use their own headphones to ensure privacy. After the head of household finishes the survey, they will notify the staff and return any tablets or computers.

Remote Baseline Survey Administration

If the Baseline Survey is to be completed remotely, PHA staff will send a unique survey link with login information to the head of household's provided email address or smartphone number. The head of household will complete the survey on their own electronic device. Heads of household completing the Baseline Survey remotely should contact the PHA staff person they are working with if they have any trouble accessing the Enrollment Tool. The PHA staff person will be able to contact the study team for assistance.

Enrollment staff will be able to review the case status in the Enrollment Tool at any time to see the date that the Baseline Survey was completed. Enrollment staff should monitor completion of the Baseline Survey by families who attended an enrollment briefing.

The study team expects that the head of household will often complete the Baseline Survey during the Individual Enrollment Meeting. When enrollment is done virtually, however, some heads of household will not complete the survey immediately, and PHA staff will need to follow up with the family by email, phone, and/or text reminders to remind them to complete the survey. Ideally, follow-up methods should be based on the family's stated preferred communication methods as collected during completion of the Baseline Information Form. The Enrollment Tool will also generate automatic reminder emails for families. If the survey is not completed 14 days after the Individual Enrollment Meeting, PHA staff can request that the study team set that household's record to inactive. Doing this will suspend the household from the study's active case list but will not delete its record.²⁸ If the head of household wants to restart their enrollment process later, they will be able to do so by contacting the PHA staff member, who will take the necessary steps to resume the process.

The head of household must complete the Baseline Survey in order to participate in the Demonstration, as Baseline Survey completion is required before a family can be randomly assigned. However, the head of household will have the option on the survey of indicating that they do not want to respond to a particular question.

Step 5: Random Assignment

Random assignment is the fifth and final component of enrollment. In an experimental research design such as this, random assignment ensures that the mobility services and standard services

²⁸ Note that moving the family to inactive status is optional, but many PHAs will opt to do this to help manage their records.

groups are balanced; that is, there are no systematic differences that could affect the outcomes measured in the study. Once the head of household completes the Baseline Survey, the PHA staff will use the Enrollment Tool to randomly assign the family to either a mobility-related services group that will be offered mobility-related services or to the standard services group that will not.

In Phase 1, members of the mobility-related services group will receive access to CMRS; in Phase 2, they receive access to either CMRS or SMRS. Random assignment will be stratified, with separate random assignments for the subgroups of existing voucher families and waiting list families in each PHA within each site.

Notification of Random Assignment Status

After the Enrollment Tool assigns the family to a mobility-related services group or the standard services group, the PHA staff person will inform the head of household of the family's assignment. All enrolled families will be provided with a random assignment letter that provides the family's assignment in writing, the services available to them, and any next steps for the Demonstration.

PHA staff will notify the head of household of the family's assignment in accordance with the procedures outlined in their REP. Some sites will do random assignments at the close of the Individual Enrollment Meeting and inform the family of their assignment at that time. Other sites will wait until after the Individual Enrollment Meeting ends to do random assignments and then follow-up with the family to inform them of their assignment. The specific procedures for each site (for both in-person and remote Individual Enrollment Meetings) are documented in the site's REP.

As part of the enrollment closeout step, all families will receive a Random Assignment Notification Letter, a copy of all forms that they signed, a \$25 incentive, and a list of national resources or organizations that provide assistance with finding food, paying bills, or locating other supportive services in the community such as support for domestic violence, child abuse, and suicide prevention. If the Individual Enrollment Meeting is done remotely or by telephone, the list of resources will be emailed or physically mailed at the end of the meeting.

3.3 Tracking and Monitoring Recruitment and Enrollment Efforts

The recruitment process will require close coordination of the PHA staff with the study team and TA Provider to ensure that the pace is sustainable and yields enough families enrolling in the Demonstration. However, tracking all of the outreach and recruitment efforts at a household level would put a large burden on PHAs. To reduce that burden, the study team will request PHA staff to provide outreach and recruitment data in the aggregate only (see below for details). The study team will collect data from the PHAs on recruitment success rates as part of routine monitoring calls that take place biweekly during the Phase 1 Pilot, monthly for the first twelve months of Phase 1 and quarterly thereafter. This section outlines the procedures for tracking recruitment and enrollment for existing voucher families and waiting list families.

3.3.1 Tracking Recruitment and Enrollment

PHAs should keep records in their own systems on their outreach methods and results. Enrollment data will be captured in the Enrollment Tool, but that Tool was not designed to capture data on the number of households to which the PHA conducted outreach.

Tracking of outreach and recruitment efforts should include PHAs' ongoing collection of basic performance metrics that reflect the monthly and cumulative progress of their outreach and recruitment effort. At a minimum, the study team requests that PHAs track the following recruitment summary metrics:

- Total invitation letters mailed per site/household type (in each month).
- Number of families (in each month) who attend a scheduled Demonstration briefing.
- Number of families (in each month) who attend a scheduled Individual Enrollment Meeting.

Exhibit 3-7 shows the tool the study team developed to help PHAs track these efforts during the Phase 1 Pilot period. Exhibits 3-8 and 3-9 show tools the study team developed to help PHAs track outreach and enrollment efforts for existing voucher and waiting list families during the full implementation period.

Exhibit 3-7. Phase 1 Pilot Period Enrollment Tracking Log, Planned Versus Actual

Month and Year	Number of Families		Number of Families				Number of Families		Number of Families		Notes	
Existing Voucher Families	Sent an Invitation Letter		Who Attended Group Demonstration Briefing				Who Attended an Individual Enrollment Meeting		Who Enrolled			
	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Target	Actual		
Pilot Month 1												
Pilot Month 2												
Pilot Month 3												
Pilot Month 4												
Pilot Month 5												
Pilot Month 6												
Total Existing Voucher Families												
Waiting List Families	Invited to Learn More about Demonstration		Who Respond to the Invitation and Seek to Learn More about Demonstration	Determined Eligible for HCV Program			Who Attended a Demonstration Briefing		Who Attended an Individual Enrollment Meeting	Who Enrolled		
	Target	Actual		Target	Actual	Target	Actual	Target		Target	Actual	Target
Pilot Month 1												
Pilot Month 2												
Pilot Month 3												
Pilot Month 4												
Pilot Month 5												
Pilot Month 6												
Total Waiting List Families												
Total All Families												

CHAPTER 3: OUTREACH, RECRUITMENT, AND ENROLLMENT

Exhibit 3-8. Full Implementation: Existing Voucher Families-Outreach, Recruitment, and Enrollment Tracking Log, Planned Versus Actual

Month and Year	Number of Invitations Sent		Number of Families Who Attended Group Demonstration Briefing		Number of Families Who Attended an Individual Enrollment Meeting		Number of Families Who Enrolled		Notes
	Target	Actual	Target	Actual	Target	Actual	Target	Actual	
2023									
February									
March									
April									
May									
June									
Etc.									

Exhibit 3-9. Full Implementation: Waiting List Families-Outreach, Recruitment, and Enrollment Tracking Log, Planned Versus Actual

Month and Year	Number of Families Invited to Learn More about Demonstration		Number of Families Who Respond to the Invitation and Seek to Learn More about Demonstration		Number of Families Determined Eligible for HCV Program		Number of Families Who Attended a Demonstration Briefing		Number of Families Who Attended an Individual Enrollment Meeting		Number of Families Who Enrolled		Notes
	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Target	Actual	
2023													
February													
March													
April													
May													
June													
Etc.													

PHAs will need to follow up on families who show initial interest in the Demonstration. Some families who initially sign up for a group Demonstration briefing or a voucher eligibility determination meeting may miss their scheduled meeting for a variety of reasons. Because these are families who have expressed interest in participating, they may be more receptive to follow-up outreach efforts than a family who did not respond to an initial outreach attempt.

Follow-up efforts for families who did not show up to an appointment should be more direct and personal. The study team recommends two to three follow-up calls and an email to try to re-engage families who miss a scheduled briefing or meeting. Site liaisons will work with PHAs to determine the appropriate level of follow-up for these families. We recommend tracking these families at the household level, at least initially. This tracking can be scaled back if interest is high enough that the no-shows do not matter.

Note: Based on the tracking and monitoring of recruitment data, it may be necessary for PHAs to adjust their recruitment plans. For example, it may be necessary to adjust the number of families invited to each session—downward if there is greater interest than expected or upward if interest is lacking.

3.4 Next Steps After Random Assignment

The post-random assignment activities for existing voucher families and waiting list families are similar but have important differences. Families admitted from the waiting list participate in the standard voucher briefing for new admissions and receive a voucher; existing voucher families seeking to move will go through the PHA’s standard process for voucher families who move. A more complete description of post-random assignment activities for each existing voucher family and waiting list family is provided below.

This section provides an overview of the activities that happen after notification of random assignment for existing voucher families (Step 5 in Exhibit 3-2) and waiting list families (Step 7 in Exhibit 3-3).

3.4.1 Post-Random Assignment Activities for Existing Voucher Families

Step 5: Complete Post-Random Assignment Activities

After receiving their random assignment letter and gift card incentive, existing voucher families assigned to the standard services group will proceed with the business-as-usual operations applicable to all HCV holders. This includes annual recertification activities and, if the family chooses to move, using any standard services offered by their PHA.

Families assigned to the mobility-related services group, by contrast, will be given the contact information of the mobility services staff who will be providing them with mobility-related services. PHA staff will let the head of household know that the mobility services staff will contact the family within the next 48 hours and that the family can contact the mobility services staff rather than waiting to hear from them. The details for these procedures are laid out in each PHA’s REP.

3.4.2 Post-Random Assignment Activities for Waiting List Families

Step 7: Complete Post-Random Assignment Activities

After receiving their random assignment letter and gift card incentive, waiting list families will proceed to a voucher briefing where they receive information about voucher issuance followed by receipt of a voucher.²⁹

Families in the standard services group will be informed of the standard services offered by the PHA and their community partners and can access these services at their discretion. Families randomized into the mobility-related services group will, like existing voucher families, be given the contact information of the mobility services staff who will provide them with mobility-related services. They will be informed that the mobility services staff will contact the family within the next 48 hours and that the family can contact the mobility services staff rather than waiting to hear from them. The details for post-random assignment activities for waiting list families are laid out in each PHA's REP.

3.5 Addressing Potential Barriers to Equitable Enrollment and Random Assignment

Regardless of whether Individual Enrollment Meetings are in person or remote, PHA staff will make efforts to ensure that all interested applicants who meet the criteria for participation are able to participate. This includes accommodation for people with disabilities and people with limited English proficiency (LEP).

3.5.1 Ensuring That All Interested Applicants Can Participate

As a recipient of federal funds, PHAs already have procedures and policies in place to ensure access and inclusion in their communications and interaction with the families they assist and the general public. Site liaisons will review PHA procedures for ensuring access and inclusion by people with disabilities and LEP and note them in each site's REP.

Providing Reasonable Accommodation

People with disabilities will be provided reasonable accommodation to participate in the study, including effective communication methods throughout. PHAs will have the primary responsibility for receiving and responding to requests for reasonable accommodation and effective communication methods. PHAs should follow their PHA's standard procedures for addressing these issues. Where the study team's assistance is needed to respond adequately, PHA staff should request assistance from the site liaison.

Ensuring Access to People with Limited English Proficiency (LEP)

Families enrolling in the Demonstration must be able to provide consent in their preferred language, and the study will make efforts to ensure meaningful access for those with LEP. HUD and the study team will provide documents related to study enrollment (the Household Roster, Baseline Information Form, Informed Consent and Parent/Guardian Permission Forms, and the Baseline Survey) in English, Spanish, Arabic, Armenian, Bengali, Chinese (Simplified), Chinese (Traditional), Haitian Creole, Hmong, Kurdish (Sorani), Polish, Russian, Somali, and Vietnamese. The study team selected these languages based on information from the PHAs about

²⁹ At least two sites will have waiting list families attend the voucher briefing prior to random assignment, though the voucher itself will not be issued until after random assignment. The order of the recruitment and enrollment steps for each site will be documented in their REP and approved by HUD prior to the launch of the site's Pilot.

what languages they would need most often. Following their standard practices, PHAs will also engage interpreters as needed. PHAs are responsible for translating outreach and recruitment materials into languages other than English.

Completing Enrollment in More Than One Session

Some families may not be able to complete their enrollment in a single meeting. This could happen, for example, when the family does not have time to respond to the Baseline Survey or when a remote session is interrupted by family responsibilities. PHAs will work with such families to help ensure they complete their enrollment.

4. Implementation Support, Planning, and Training

Prior to and throughout the Demonstration, the study team will coordinate with the TA Provider and with HUD to ensure the Demonstration is implemented effectively and with fidelity to its goals and design. This chapter describes the training and support available to PHAs participating in the Demonstration. It first describes the support roles of the TA Provider and the study team's site liaisons and then discusses planned communications between the sites and the support teams, implementation planning between the site liaisons and the PHAs culminating in an REP, and training that will be provided to PHA staff and mobility services staff.

4.1 Support Roles of TA Provider and Site Liaisons

HUD has engaged with a TA Provider to provide technical assistance to PHAs participating in the Demonstration. Both the study team and the TA Provider will provide training and support to PHA staff throughout the Demonstration. The study team will provide training and support to PHA staff to help them recruit and enroll families into the Demonstration, collect baseline information from participating families, and report enrollment and services data. The TA Provider will provide training and support to the sites on the provision of mobility-related services and any special administrative policies needed to implement the Demonstration.

The study team, HUD, and the TA Provider will meet biweekly during the Phase 1 Pilot and the first six months of Phase 1 (and as needed for the remainder of the Demonstration) to ensure all parties are informed about site progress. Chapter 5 provides more detail on the timing and purpose of those meetings. Both the TA Provider and study team members will conduct site visits to the participating PHAs to conduct training. During the Phase 1 Pilot, site visits by the study team will observe the implementation of recruitment, enrollment, random assignment, and fidelity to the model.

4.1.1 Role of the TA Provider

The TA Provider supports the PHAs in several ways:

- **Provides Training and Support for Mobility-Related Services.** In coordination with HUD, the TA Provider developed the *CMRS Guide*, which includes a definitive list and description of the CMRS, as well as program materials. The guide was shared with the study team and sites for feedback before being finalized. The TA Provider will work closely with the sites to provide training and support for the delivery of the CMRS.
- **Supports PHAs on Program Design.** PHAs needed to establish a number of new administrative policies and processes in support of the Demonstration, including updating payment standards, creating waiting list preferences, and creating other policies and processes that can aid opportunity-area moves. The TA Provider has provided help with these new policies and processes.
- **Supports PHAs on Program Implementation.** The TA Provider will provide ongoing support to sites and the mobility services staff through regularly scheduled virtual meetings and on-site visits. The first on-site visit during the Phase 1 Pilot will allow the TA Provider to shadow program staff in the delivery of services and to meet with the site's point(s) of contact to discuss the status of the program. Any implementation-related challenges can be workshopped in depth during this visit. It is anticipated that this visit will be held in person if

possible. On-site visits will occur quarterly during Year 1 after the Phase 1 Pilot and bi-annually thereafter.

Weekly remote check-ins with PHA staff throughout the Phase 1 Pilot, and bi-weekly check-ins thereafter, will help the TA Provider develop relationships with program staff, monitor progress, and provide assistance to the PHA staff as needed. Quarterly project status meetings with the PHA staff, for quarters during which there is no site visit, will allow the TA Provider to maintain a relationship with the PHA(s) and assist in any issues related to implementation.

4.1.2 Role of the Study Team's Site Liaisons

Each Demonstration site is assigned a site liaison who is to be the PHA's main contact with the study team. Site liaisons play an integral role in the Demonstration by helping the sites develop a customized REP, providing training and support to implement that plan, and monitoring the site's fidelity to its plan. Site liaisons will support PHA staff and monitor fidelity through regular meetings with individual sites and regular and careful review of recruitment, enrollment, and other Demonstration data. Site liaisons are staff from Abt Associates and partners MEF Associates and Social Policy Research Associates. The site liaisons will ask that each PHA partner designate one person to serve as their point of contact.

Core Roles of The Site Liaisons

- **Customization of Recruitment and Enrollment Plans.** During planning, site liaisons worked with each site to customize individual REPs for PHA staff to follow day-to-day. A standard template was provided that each site liaison customized to meet that site's unique needs and staffing arrangements (this template is included in Appendix 7). The REPs are living documents that can be modified over time if outreach, recruitment, and enrollment procedures are adjusted. PHAs shared their REPs with HUD for review and approval before being finalized.
- **Training of PHA staff.** Site liaisons have provided recruitment and enrollment training to PHA staff using customized training materials. Following the completion of all training modules by PHA staff, site liaisons are advising the study team that the PHA is ready to begin the Phase 1 Pilot. The study team will also facilitate any re-training of staff and training of newly onboarded staff as needed. Sites have not been allowed to begin the Phase 1 Pilot until PHA staff are fully trained by the study team.
- **Monitoring Fidelity to the Demonstration.** Site liaisons will carefully and regularly monitor for fidelity to the Demonstration's goals and procedures laid out in the REPs and the CMRS guide. Any issues or concerns found during ongoing fidelity monitoring will be documented following a standardized process and addressed promptly. Site liaisons will complete a detailed Fidelity Monitoring Checklist (see Appendix 6) to evaluate each PHA on a monthly basis for the Phase 1 Pilot and the first six months of Phase 1 and then quarterly thereafter. Chapter 5 provides additional detail on how fidelity to the Demonstration will be assessed and reported.

PHA Communication with the Site Liaison

Site liaisons will hold regular individual site meetings with relevant PHA staff during the Phase 1 Pilot periods and throughout Phase 1. Initial meetings during the planning provided an opportunity for site liaisons to learn more about their sites' agency and HCV program procedures, as well as to inform PHAs about the evaluation and what would be required of them.

The schedule for meetings is shown in Exhibit 4-1. Site liaisons will develop customized schedules with their individual sites, but they should generally adhere to the schedule shown.

Exhibit 4-1. Site Liaison Meeting and Site Visit Schedule

Demonstration Period	Meeting Frequency	Site Visits
Planning	Monthly with email follow-up as needed in the early planning stages	
Training Period (2-month period before Pilot start date)	Biweekly calls as the REPs are closer to finalization	2-day site visit
Phase 1 Pilot	Weekly in weeks 1-3 of Pilot, biweekly thereafter	2-day site visit, approximately 4 to 6 months after Pilot launch
Phase 1 Demonstration	Monthly for first 12 months, quarterly thereafter	2-day site visit approximately 10 to 12 months after Pilot launch

Site liaisons will circulate a draft agenda in advance of each call or site visit. The structure of the agendas, once sites enter the Pilot Phase, follows the same basic format, aligning with the topic areas of the Fidelity Monitoring Checklist. Site liaisons will provide their contact person with draft agenda items and ensure that sites' evaluation-related questions and concerns are a priority in the conversations.

The consistent format of the calls and collaborative nature of the conversations are designed to minimize work and stress for PHA staff while ensuring sites adhere to evaluation protocols. These conversations will be augmented by standardized reports from the Enrollment Tool and Service Tool that show progress in meeting enrollment goals, progression through key CMRS milestones by the treatment group, and completeness of evaluation data being collected by the site. Site liaisons record their notes in the Fidelity Monitoring Checklist.

4.2 Outreach and Recruitment Planning

For the Demonstration to be implemented consistently, all participating PHAs must work with a site liaison from the study team to develop a comprehensive REP.

Each site's REP identifies any partner organizations and key staff at the PHA and partner organizations. The plan also describes the PHA's procedures to:

- Conduct outreach to two groups of likely eligible families: existing voucher families who are six months away from their annual recertification and waiting list families selected by the PHA for the Demonstration.
- Ease concerns families may have about participating in the Demonstration.
- Underscore that the services are intended for families who are open to considering moving to an opportunity area of their choosing, and some are only available if a move to an opportunity area is made.
- Offer briefings to explain the Demonstration in more detail, conducted in person or by videoconference; for reasons of budget and staff efficiency, PHA staff will be encouraged to conduct Demonstration briefings in small groups unless the PHA opts to do them one-on-one.

- Ensure consistency in messaging by using a pre-recorded overview video (in English or Spanish), and a required statement about the Demonstration on all materials using standard language. However, PHAs can use the REP to describe how they will adapt materials to differentiate between existing voucher families and waiting list families.
- Ensure that all briefings are accessible to people with disabilities and people with limited English proficiency, that reasonable accommodation is provided as needed, and that all outreach methods and materials are accessible for persons with vision and hearing impairments.

A standard template of a Recruitment and Enrollment Plan is included in Appendix 7.

4.2.1 Site-Level Customization Decisions

Participating PHAs customize outreach and recruitment to meet the needs of their sites along multiple dimensions:

- Number of existing voucher families to invite to each group Demonstration briefing and the number of waiting list families to invite to a Demonstration briefing. These numbers will be based on the expected take-up rate for the Demonstration, the number of existing voucher families, and the number of waiting list families who qualify for the Demonstration preference. The capacity of PHA staff and service provider staff will be another consideration.
- Type of outreach methods, such as U.S. mail, email, text, or phone. Successful outreach will likely use a mix of methods, as some families will respond better to mail and others to email or text.
- Number and frequency of outreach efforts. The study team is helping the PHAs establish initial parameters for outreach for each type of family, existing voucher families and waiting list families. The study team will work with the PHA staff to monitor and adjust the extent of outreach efforts as needed.
- Duration of the recruitment period for each group of invited existing voucher families. This is how long PHA staff will continue outreach efforts after the first communication.

The study team's site liaisons are working closely with each PHA to confirm site-level decisions and customize its outreach, recruitment, and enrollment procedures to align with its existing HCV procedures.

The site-level decisions made by the PHAs are recorded in the REPs, with one plan for each of the nine Demonstration sites. Each site's plan provides an overview of the Demonstration, the PHA's criteria for inviting households to participate, and its enrollment targets. The REP describes how the PHA will reach out to likely eligible families to inform them about the study and how outreach and recruitment efforts will be tracked and monitored. The plan describes processes for enrollment, random assignment notification, and provision of the \$25 gift card incentive families receive for completing the Baseline Survey. The REP also includes provisions for ensuring accessibility for all families.

The customized plans also describe how sites with two PHAs will share responsibility for meeting the recruitment and enrollment goals and adjust over time if needed.

4.2.2 Consistent Content and Messaging

All communication materials to families must deliver a consistent message about the Demonstration across all participating PHAs.

Required Information Statement

PHAs must include the same required information statement (italicized below) in written, digital, or audio materials for the Demonstration to ensure key study components are communicated to interested families consistently across all sites. The required information statement is intended to cover the key aspects of the program but be short enough to easily fit into all outreach and recruitment materials. It is intended to encourage families to seek more information at the group Demonstration briefings (existing voucher families) or individual Demonstration briefings (waiting list families).³⁰

The Community Choice Demonstration (Demonstration), funded by the U.S. Department of Housing and Urban Development (HUD), will provide selected families with services to help expand their housing choices and access housing in communities that provide good opportunities for children and their families (opportunity areas). Families must have a Housing Choice Voucher or be on the waiting list and found eligible for a Housing Choice Voucher and have a child aged 17 or younger living with them to be eligible to enroll in the Demonstration.

The Demonstration includes an independent study that will examine whether the services provided through the Demonstration are successful in helping families to access housing in opportunity areas. To participate in the Demonstration and receive services, a family must agree to also participate in the study. Some of the families who enroll in the Demonstration will be offered services to help them find housing in these areas, but not all families who agree to participate in the Demonstration will be chosen to receive these services. To make sure that each family has an equal chance of being chosen to receive these services, the selection process will be done at random, like pulling names from a hat. Selection will not be decided by any specific individual; instead, it will be randomly determined by a computer. Participation in the Demonstration will be voluntary, and a family can choose to withdraw at any time.

Additional Elements

In addition to the required statement in consistent language, all Demonstration outreach and recruitment materials should contain:

- A brief overview of the study.
- Contact information so households can find out how to learn more about the study or enroll.
- Assurances about the voluntary nature of participation.
- The logo the PHA is using for the Community Choice Demonstration.

PHAs can customize materials as needed based on the type of household. All customized materials should be submitted to the site liaisons for review and approval by the study team.

³⁰ The required information statement is not intended to be the detailed overview of the Demonstration in the Demonstration briefing that will inform a family's decision to enroll in the study.

4.3 PHA Training Plan

The study team and TA Provider provide formal training to the staff of participating PHAs during the two-month period prior to the start of each site’s Pilot.

The site liaisons work closely with the PHAs to ensure that a broad range of PHA staff—regardless of whether they do outreach, recruitment, and enrollment for the Demonstration or not—have copies of the outreach materials and a standard set of talking points to ensure that they can address basic questions and direct families to the right person.

4.3.1 Study Team Training Schedule and Methods

The study team is taking a “train-the-trainer” approach to building the capacity of participating PHAs and their partners. The study team has trained the site liaisons on all aspects of conducting outreach, recruitment, and enrollment. Site liaisons then trained the PHA staff one to two weeks prior to the launch of the Pilot.

Training first covers general study procedures followed by site specific recruitment and enrollment procedures. Site liaison and study team support will be available to PHA staff throughout the Demonstration as new staff are onboarded.

Customized Site Training Sessions Pre-Pilot Launch

Prior to the Pilot launch, site liaisons are conducting two-day training with all PHA staff involved with recruitment and enrollment. Other PHA staff, such as program administrators, directors, and other support staff may choose to join parts of this training to better understand the Demonstration. Training is provided by site liaisons and the study team in-person when permitted by PHA policies or remotely by virtual webinar when in-person meetings are not allowed. Regardless of whether the training occurs remotely or in person, training occurs one to two weeks prior to the start of the Pilot at each site. Training for new staff will occur as they are onboarded (see below for more detail). Some recruitment and enrollment training modules contain consistent information for all sites—for example, the Demonstration overview, the role of site liaisons, the Demonstration briefing, data security and reportable incidents, and use of the Enrollment and Service Tools. Other training modules are customized because they reference site specific procedures developed during the recruitment and enrollment planning stage that may vary from site to site.

Additional training, like the Service Tool training, may be provided in groups with multiple sites attending, supplemented by individual site follow-up sessions since there is both information that all sites will need to hear as well as some site customization.

All training is recorded and made available to PHA staff at any time on the Demonstration website, along with all written training materials. Recording of the training sessions will ensure that new staff receive the same training and messaging as those trained originally, ensuring consistency in Demonstration implementation.

New Staff Training

It is expected that PHAs will need to add staff either to expand capacity or because of attrition. In order to allow PHAs to onboard new staff quickly, the study team will use a hybrid approach to training—using self-guided modules, observation of colleagues, and virtual meetings with site liaisons and study team members.

The study team is creating video recordings of those modules that do not require variation across sites:

- Demonstration overview.
- Understanding the role of site liaison.
- Demonstration briefing.
- Guidelines for obtaining informed consent.
- Data security.
- Reportable incidents.
- Use of the Enrollment and Service Tool.

These recorded sessions will serve as self-guided training modules for new staff. Recordings of the original site trainings are also available for new staff to review.

New staff will observe their colleagues conducting all aspects of recruitment and enrollment to see how the process will work in their site. After new staff have observed one or two Demonstration briefings and one or two Individual Enrollment Meetings, they will participate in virtual training with the study team.

The virtual training with the study team will cover those modules that require customization by site:

- Enrollment process flow for existing voucher families.
- Enrollment process flow for waiting list families.
- Conducting Individual Enrollment Meetings.
- Review of key points for each of the recorded sessions.

4.3.2 Study Team Training Plan Modules

Exhibit 4-2 shows the training modules that will be provided by the study team to the PHA staff. The exhibit shows the topic areas of each module along with the facilitator and training type (group or individual site).

Site Training on Recruitment and Enrollment

All PHA staff will receive training on a core set of capabilities that will allow them to consistently plan and manage the outreach and recruitment processes. As part of this training, all PHA staff will receive the following support tools:

- Scripts and tips that support communication with prospective families to encourage them to enroll and address perceived barriers to enrollment.
- A compilation of Frequently Asked Questions and responses about the Demonstration and what enrollment means for families.
- Guidance on determining recruitment schedules and selection of the outreach sample.
- Options in recruiting methods to allow flexibility at the local level.

- Plans for monitoring recruitment and, ultimately, enrollment progress.

Exhibit 4-2. Study Team—Site Training Modules

	Training Module	Facilitator and Training Type	Module Topic Areas
1	Overview of the Community Choice Demonstration Study	<i>Site Liaisons</i> <i>Site-specific sessions; in-person for initial training and remote for additional staff training</i>	<ul style="list-style-type: none"> • Objectives of Demonstration • Introduction to the study team • Study timeline • Introduction to training modules
2	Understanding the Role of Site Liaison	<i>Site Liaisons</i> <i>Site-specific sessions; in-person for initial training and remote for additional staff training</i>	<ul style="list-style-type: none"> • Overview of Site Liaison role in overall study • Support available to PHAs • Expected communication and site visit schedule • Role in monitoring fidelity
3	Outreach and Recruitment	<i>Site Liaisons and Study Leadership Team</i> <i>Site-specific sessions; in-person for initial training and remote for additional staff training</i>	<ul style="list-style-type: none"> • Recruitment goals • Required recruitment language • Determining outreach schedules and samples • Tracking and monitoring outreach and recruitment data • Adjusting the recruitment plan • Ensuring access to all eligible families
4	Informed Consent	<i>Site Liaisons and Study Leadership Team</i> <i>Site-specific sessions; in-person for initial training and remote for additional staff training</i>	<ul style="list-style-type: none"> • Why Informed Consent is important • Overview of Informed Consent requirements • Obtaining participant cooperation • Assuring confidentiality • Avoiding refusals • Understanding the risks and benefits of participation • What data will be collected and how will it be used • Explaining differences between program participation and study participation
5	Baseline Information Form and Baseline Survey	<i>Site Liaisons</i> <i>Site-specific sessions; in-person for initial training and remote for additional staff training</i>	<ul style="list-style-type: none"> • Overview and purpose of the Baseline Information Form • Overview and purpose of the Baseline Survey • FAQs • Mock interviews • Provision of incentives
6	Understanding Random Assignment	<i>Site Liaisons</i> <i>Site-specific sessions; in-person for initial training and remote for additional staff training</i>	<ul style="list-style-type: none"> • Overview of definition and purpose of using random assignment • Details on random assignment process customized for individual sites • Referring families after random assignment (hand-off procedures) • Monitoring random assignment

	Training Module	Facilitator and Training Type	Module Topic Areas
7	Data Security and Safe Data Handling	<p><i>Site Liaisons</i> <i>Site-specific sessions, in-person for initial training</i></p> <p><i>Site-specific sessions remote for additional staff training</i></p>	<ul style="list-style-type: none"> Review of guidelines, regulations, and policies Overview of what PII is and protocols for protection of PII Review guidelines for protecting security of data Staff training and completion of Agreements (if required) Protocols for handling of data on paper documentation Data incident reporting (including incident scenarios and suggested alternatives)
8	Reportable Incidents	<p><i>Site Liaisons</i> <i>Site-specific sessions, in-person for initial training</i></p> <p><i>Site-specific sessions remote for additional staff training</i></p>	<ul style="list-style-type: none"> Review possible reportable incidents PHAs may encounter when working with voucher families Protocols and step-by-step guidelines for managing reportable incidents Reporting procedures
9	Enrollment Tool	<p><i>Enrollment Tool Development Team</i> <i>Site-specific sessions, remote and in-person for initial training</i></p> <p><i>Site-specific sessions remote for additional staff training</i></p>	<ul style="list-style-type: none"> Overview of purpose and functions of Enrollment Tool Step-by-step process for using Enrollment Tool, including logging in, data entry procedures, and checking participant status/information. Introduction to helpdesk support
10	Service Tool	<p><i>Service Tool Development Team</i> <i>Remote for both initial training and additional staff training</i></p>	<ul style="list-style-type: none"> Overview of purpose and functions of Service Tool Step-by-step process for using Service Tool, including logging in, data entry procedures, and checking participant status/information. Introduction to helpdesk support

4.3.3 Other Training Modules

Exhibit 4-3 summarizes the training modules that will be provided to PHA and mobility services staff led by entities outside of the Study Team. Most of these modules are led by the TA Provider, FirstPic.

Exhibit 4-3. TA Provider—Training Modules for Mobility Service Provider Staff

	Training name	Training leader
1	History of the HCV Program and Mobility Programs	FirstPic
2	Program Orientation and Culture	FirstPic

3	Overview of CMRS Guide Phases 2-7	FirstPic
4	Coach's Activities Overview	FirstPic
5	Leasing Coordinator's Activities Overview	FirstPic
6	Overview of Program Administration	Lead PHA
7	PHA Move-in Processes Subsidy standards Porting process (joint sites) Income changes	Both PHAs
8	How to use PHAs' Line of Business Software	Both PHAs
9	Motivational Interviewing	PHA or outside trainer
10	Shadowing HCV staff	Lead PHA
11	Getting to know Opportunity Areas	Lead PHA
12	Housing Law	Lead PHA
13	Affordability and Rent Reasonableness	FirstPic; Lead PHA
14	Hosting a Housing Search Workshop	FirstPic
15	Hosting a Renter's Workshop	FirstPic
16	Hosting a Money Management Workshop	FirstPic
17	Pre-Move Appointment	FirstPic
18	Post-Move Appointment	FirstPic
19	Making a Sales Pitch to Property Owners	FirstPic
20	Program Oversight Protocols	FirstPic
21	Financial Assistance and Incentives Training	FirstPic
22	Financial Processes and Reporting	Employer

5. Approach to Monitoring Fidelity of the Demonstration

Monitoring that the Demonstration is implemented with fidelity is crucial to the evaluation's internal validity. The study team will be primarily responsible for monitoring fidelity to the outreach, recruitment, and enrollment processes, including random assignment and collecting baseline data. The study team also will be responsible for monitoring whether mobility services are being implemented as planned and flagging issues that could benefit from attention by HUD and the TA provider. Fidelity monitoring will be based on a review of data entered into the Enrollment and Service Tools, periodic monitoring calls, site visits to the PHAs by the site liaisons and qualitative interviewers, and review of notes from the TA provider.

5.1 How the Study Team Will Monitor Fidelity

The study team will use the Fidelity Monitoring Checklist (see Appendix 6) to report on each site's fidelity to Study procedures. It will incorporate data from the Enrollment Tracking Logs (Exhibits 3-7, 3-8, and 3-9), information learned from meetings with PHA staff and site visits, and data from the Enrollment and Service Tools.

The site liaisons will meet regularly with PHA staff to check on progress and discuss challenges, with meetings varying from weekly at the start of the Phase 1 Pilot to bi-weekly and then monthly across the course of the Demonstration. Site liaisons will supplement the information learned through check-ins and Enrollment and Service Tool reports with data gathered through direct observation of PHA staff during two planned site visits. Monthly during the Phase 1 Pilot and the first six months of the full implementation period, and quarterly thereafter, site liaisons will prepare an updated Fidelity Monitoring Checklist. Site liaisons will discuss the results of their check-ins with PHA staff and the fidelity assessments during regularly scheduled study team meetings. The study team will share summary updates with HUD and the TA Provider during ongoing coordination meetings.

The study team will focus on six key implementation topic areas to ensure that PHAs implement the Demonstration with fidelity to their approved REP and the services described in the CMRS Guide. Exhibit 5-1 outlines how fidelity will be monitored by the study team for each key implementation area, including the tasks to be covered, the tools to be used, who will be responsible, and how often the activity will occur.

Exhibit 5-1 outlines how fidelity will be monitored by the study team for each implementation area.

Exhibit 5-1. Study Team's Approach to Monitoring Fidelity

Implementation Area	Tasks Covered	Tools	Who and How Often
Outreach and Recruitment	<ul style="list-style-type: none"> Review recruitment language for compliance with required study language 	<ul style="list-style-type: none"> Outreach material templates provided by Study Team, customized as needed by PHA staff 	<ul style="list-style-type: none"> Site Liaisons and Study Team Leadership prior to Phase 1 Pilot launch and as needed if subsequent changes are made
	<ul style="list-style-type: none"> Monitor data on outreach attempts and the number of enrollments maintained by PHA staff 	<ul style="list-style-type: none"> Recruitment and Enrollment Tracking Sheets provided by the Study Team, customized by PHA staff as needed (Appendix E of PHA Recruitment and Training Manual) 	<ul style="list-style-type: none"> PHA staff will complete and submit to Site Liaisons monthly. Site Liaisons will share with the Study Team Leadership for review
	<ul style="list-style-type: none"> Discuss recruitment challenges and propose adjustments to recruitment plan as necessary to ensure targets are met 	<ul style="list-style-type: none"> Regular monitoring calls with PHA staff and Site Liaisons 	<ul style="list-style-type: none"> PHA staff and Site Liaisons during monitoring calls biweekly for the Phase 1 Pilot and monthly thereafter
	<ul style="list-style-type: none"> Periodically observe PHA staff conducting Demonstration briefings with prospective families during on-site visits 	<ul style="list-style-type: none"> Periodic site visits 	<ul style="list-style-type: none"> Site Liaisons with PHA staff once during Phase 1 Pilot and once during full operations
Enrollment	<ul style="list-style-type: none"> Periodically observe PHA staff conduct all aspects of an enrollment session—from obtaining Informed Consent through notification of random assignment results—during on-site visits 	<ul style="list-style-type: none"> Periodic site visits 	<ul style="list-style-type: none"> Site Liaisons with PHA staff once during Phase 1 Pilot and once during full operations
	<ul style="list-style-type: none"> Monitor data on enrollment to measure enrollment against target and ensure PHAs are on track to meet their goals 	<ul style="list-style-type: none"> Enrollment Tool Monitoring Reports 	<ul style="list-style-type: none"> Site Liaisons with PHA staff during monitoring calls biweekly for the Phase 1 Pilot and monthly thereafter
	<ul style="list-style-type: none"> Discussion of challenges faced during enrollment 	<ul style="list-style-type: none"> Regular monitoring calls 	<ul style="list-style-type: none"> Site Liaisons with PHA staff during monitoring calls biweekly for the Phase 1 Pilot and monthly thereafter

CHAPTER 5: APPROACH TO MONITORING FIDELITY OF THE DEMONSTRATION

Implementation Area	Tasks Covered	Tools	Who and How Often
Obtaining Informed Consent	<ul style="list-style-type: none"> Discussion of the process, what challenges have come up, what has worked well, are there any other supports needed in this area Observe PHA staff obtaining Informed Consent to: <ul style="list-style-type: none"> Ensure that consent and parent/guardian permission are properly documented in the Enrollment Tool Check that each component of Informed Consent is being appropriately explained and questions are addressed All other adult household members are offered the opportunity to provide informed consent, and have their questions addressed 	<ul style="list-style-type: none"> Regular monitoring calls with PHA staff and Site Liaisons Review of Enrollment Tool data Periodic site visits 	<ul style="list-style-type: none"> Site Liaisons with PHA staff during monitoring calls biweekly for the Phase 1 Pilot and monthly thereafter Site Liaisons with PHA staff once during Phase 1 Pilot and once during full operations
Conduct of Baseline Survey	<ul style="list-style-type: none"> Regularly review Baseline Survey data to identify any data quality issues so they can be addressed early 	<ul style="list-style-type: none"> Enrollment Tool Reports focused on data quality; particularly on instances where 50 percent or more of the responses are prefer not to answer or don't know. Analyze by whether it was done on paper or online 	<ul style="list-style-type: none"> Study Team Leadership, monthly during the Phase 1 Pilot, then quarterly
Conducting Random Assignment	<p>Review random assignment data recorded in the Enrollment Tool to ensure the random assignment ratios are working as intended, producing roughly equal number in each group</p> <ul style="list-style-type: none"> Discuss the notification process to see how that is working Periodically observe PHA staff conducting random assignments to see whether they are using the Tool properly Review the PHA staff notifying families of their random assignment result and the next steps 	<ul style="list-style-type: none"> Enrollment Tool Reports Regular monitoring calls with PHA staff and Site Liaisons Periodic site visits Periodic site visits 	<ul style="list-style-type: none"> Study Team Leadership, quarterly Site Liaisons with PHA staff during monitoring calls biweekly for the Phase 1 Pilot and monthly thereafter Site Liaisons with PHA staff once during Phase 1 Pilot and once during full operations Site Liaisons with PHA staff once during Phase 1 Pilot and once during full operations

Implementation Area	Tasks Covered	Tools	Who and How Often
Delivery of Mobility-Related Services	<ul style="list-style-type: none"> Review services data through the Demonstration's Service Tool and from discussions between Site Liaisons and PHA staff 	<ul style="list-style-type: none"> Service Tool Reports Regular monitoring calls 	<ul style="list-style-type: none"> Site Liaisons with PHA staff and services staff during monitoring calls biweekly for the Phase 1 Pilot and monthly thereafter Service Tool Reports reviewed monthly by Study Team Leadership
	<ul style="list-style-type: none"> Coordinate with the TA Provider to understand how service delivery has been going at each site 	<ul style="list-style-type: none"> Coordination calls TA reports 	<ul style="list-style-type: none"> Study Team Leadership, TA Provider, and HUD during coordination meetings
	<ul style="list-style-type: none"> Use interviews for Rapid Cycle Evaluation to identify issues with the level of services provided to mobility-related services group members and verify that control group members are not receiving any CMRS/SMRS 	<ul style="list-style-type: none"> Qualitative interviews 	<ul style="list-style-type: none"> Study Team Qualitative Interviewers, twice during Phase 1

As directed by HUD, the TA Provider will provide technical assistance to troubleshoot problems that emerge regarding CMRS/SMRS implementation. Through the qualitative interviews conducted for the Rapid Cycle Evaluation Report, the study team will also learn about potential issues related to fidelity in the administration of CMRS/SMRS, which will be relayed to HUD and the TA Provider for follow-up.

5.1.1 Checklist to Monitor and Report Fidelity

Site liaisons use the Fidelity Monitoring Checklist (Appendix 6) in evaluating and reporting on site implementation and fidelity to the Demonstration's goals and procedures. The Checklist has two main uses: (1) as a tool for the site liaisons to ensure completeness in site monitoring; and (2) as a tool for the study team leadership to use as the basis to communicate implementation progress to HUD and any need for technical assistance and support from the TA Provider.

Site monitoring and fidelity assessment and the criteria by which sites are evaluated will be transparent for participating PHAs. Site liaisons will provide PHAs with a copy of the Checklist in advance of the first call. They will review the purpose of the Checklist and the schedule for regular monitoring calls, so that PHA staff can plan accordingly. Prior to each check-in call, the site liaisons will provide the PHA staff with an agenda to help ensure they are prepared to discuss each topic.

5.1.2 Schedule for Fidelity Monitoring and Reporting

The schedule for site liaison check-ins with PHA staff is specified in Exhibit 5-2. Some of these calls will consist of brief check-in discussions focusing on ongoing progress, successes, and challenges. Other check-ins will be more formal and form the basis for completing Fidelity Monitoring Checklists. The site liaisons will complete the Fidelity Monitoring Checklist monthly during the Phase 1 Pilot and the first six months of the full implementation period before shifting to a quarterly basis.

Exhibit 5-2. Site Monitoring Schedule—Site Liaisons and PHA Staff

Demonstration Period	Frequency of Update
Phase 1 Pilot	Weekly calls between Site Liaison and PHA for the first three weeks of Phase 1 Pilot; biweekly thereafter
Phase 1 Demonstration (Year 1)	Monthly
Phase 1 Demonstration (Year 2)	Quarterly
Phase 2 Demonstration (Years 3-5)	Biweekly during the Phase 1 Pilot (months 1-3 of Phase 2), monthly for the next 3 months, quarterly thereafter

In addition to meeting regularly with PHA staff, the site liaisons will meet regularly with the study team leadership. As shown in Exhibit 5-3, site liaisons and the study team leadership will meet biweekly during the main Phase 1 Pilot Phase (through February 2023) and monthly for the first six months of full implementation (March 2023 through August 2023) and quarterly thereafter to share lessons learned—successes and challenges—and talk through the status of each site and determine if any changes to the REPs are needed.

Exhibit 5-3. Site Monitoring Schedule—Site Liaisons and Study Team Leadership

Demonstration Period	Frequency of Update
Phase 1 Pilot	Biweekly calls for the Phase 1 Pilot (months 1-6)
Phase 1 Demonstration (Year 1)	Monthly (months 7-12)
Phase 1 Demonstration (Year 2)	Quarterly
Phase 2 Demonstration (Years 3-5)	Monthly during the Phase 2 Phase 1 Pilot (months 1-3 of Phase 2), quarterly thereafter

As shown in Exhibit 5-4, the study team will meet with HUD and the TA provider biweekly during the main Phase 1 Pilot Phase (through February 2023) and monthly for the first six months of full implementation (March through August 2023) and as needed thereafter to share lessons learned and talk through the status of each site.

Exhibit 5-4. Site Monitoring Schedule—Coordination Calls with the Study Team, HUD, and TA Provider

Demonstration Period	Frequency of Update
Phase 1 Pilot	Biweekly calls for the Phase 1 Pilot (months 1-6)
Phase 1 Demonstration (Year 1)	Monthly during early implementation (months 7-12)
Phase 1 Demonstration (Year 2)	As needed
Phase 2 Demonstration (Years 3-5)	Monthly during the Phase 2 Phase 1 Pilot (months 1-3 of Phase 2), as needed thereafter

The study team will use information learned through these meetings, the Fidelity Monitoring Checklists, and the Enrollment and Service Tool reports to prepare a monthly Site Summary Report for HUD. This report will provide a brief status update and summary enrollment statistics for each PHA site. These status updates will cover notable successes, staffing changes at the PHAs, any areas that warrant closer monitoring going forward in the Phase 1 Pilot and the full implementation period, and any areas where a change to the REP procedures may be warranted.

Addressing Fidelity Concerns

If they perceive any issues with fidelity, site liaisons will discuss them further with PHA staff during their monitoring call. Following the call, site liaisons will elevate any concerns to the

study team's implementation coordinator so that the differences can be considered by the rest of the study team, HUD, and the TA Provider.

Though we expect any errors with random assignment to be rare, any errors that occur will be documented in Site Summary Reports along with an explanation of why the error occurred and what safeguards were put into place to avoid the error reoccurring. If needed, Sage Computing and the rest of the study team will determine whether any changes are needed to the Enrollment Tool and random assignment procedures. The study team will raise any concerns about site performance with HUD as needed. These concerns could pertain to consistently poor data quality, a higher-than-expected number of families set to inactive due to missing or incomplete Baseline Survey data, lagging enrollment of families, improper provision of CMRS services, frequent staffing challenges, and the like. Issues related to the execution of the CMRS/SMRS will be referred to HUD and the TA Provider. Issues related to HCV program rules will be referred directly to HUD.

The study team and HUD will work with the TA Provider to determine whether specific technical assistance could help, or the issues warrant more severe intervention. For example, if PHAs are consistently lagging in meeting enrollment targets or have excessive amounts of missing data, we will work with them to make corrections as needed. If improvement is not realized, we can work with HUD to determine what other corrective actions should be implemented. It is important to note that any corrective actions would be restricted to improving the implementation of the Demonstration to ensure it is done with fidelity. Any information collected as part of the enrollment process, through the provision of mobility-related services or through monitoring calls, will be used only for study purposes. The information collected by the study team will never be used to enforce standard HCV program requirements.

5.2 *Phase 1 Pilot*

Prior to the official start of Phase 1 of the Community Choice Demonstration, the study team and TA Provider will support a Pilot to test all recruitment, enrollment, randomization, data collection, and mobility service delivery protocols. Site liaisons and other members of the study team will closely monitor the implementation of study procedures and work with PHA staff to ensure all enrollment procedures are followed with fidelity to study procedures and the REPs. The TA Provider will work with the mobility services staff to help ensure mobility-related services are delivered with fidelity to the CMRS model.

Most site monitoring and support by the study team during the Phase 1 Pilot will occur remotely through regular communication with site staff and ongoing review of recruitment, enrollment, and service data. Site liaisons will also conduct a two-day site visit to observe and support staff in enrollment and random assignment, and to provide additional training to staff as needed. Following the site visit, each site liaison will develop an individual **Pilot Site Report** to help HUD, the study team, and the TA Provider determine whether each site is ready to begin Phase 1, and if not, what changes are needed before the site will be approved to officially start Phase 1 of the Demonstration.

The Phase 1 Pilot will last at least six months at each site, with an opportunity to be extended by up to three months in individual sites that need the additional time to be ready to implement a quality program with fidelity to the program model.

5.2.1 Timeline and Milestones for the Phase 1 Pilot

The Phase 1 Pilot commenced following the conclusion of PHA training and continues for six months or more. Sites were able to begin the Pilot as early as August 2022 if they met certain study milestones and received required approvals.

There are two important site-specific decision points for the Phase 1 Pilot: (1) determination of the site's readiness to begin the Pilot; and (2) determination of the site's readiness to exit the Pilot and continue with the regular Phase 1 implementation. Not all sites will be ready to begin or exit the Pilot on the same date, and the study team is planning for different starting and exiting dates for each site. The site liaison and the TA Provider will track the completion of the site's milestones to begin and complete the Phase 1 Pilot.

We expect to discuss site readiness on an ongoing basis with HUD and the TA Provider. The study team will make formal recommendations in these meetings for each site's readiness to start and exit the Phase 1 Pilot.

Study Milestones That Must Be Met Before a Site's Phase 1 Pilot Can Begin

Before the Phase 1 Pilot can start at any site, the following must occur:

- Approval of study design by HUD and completed preregistration with the AEA RCT Registry.³¹ The study design includes what CMRS/SMRS each site will make available to the treatment group and the opportunity area definitions that will be applied to each site.
- Approval of the Phase 1 Demonstration and Evaluation information collection by the Office of Management and Budget for compliance with the Paperwork Reduction Act.
- Publication of the Demonstration System of Records Notification (SORN).
- Approval of the Phase 1 Demonstration and Evaluation by Abt's IRB.
- Completion and delivery of the final Enrollment and Service Tools.

Site Readiness to Begin the Phase 1 Pilot

Once the above Demonstration-wide criteria are met, a site will be eligible to begin its Phase 1 Pilot after it meets the following requirements:

- HUD has issued a Statement of Responsibilities to each PHA in the site.
- An executed Data Use Agreement between the PHA and Abt Associates so that the PHA will be able to transfer Demonstration data to the study.
- An executed contract between the PHA(s) and any organizations contracted to provide mobility services, if applicable.
- Adoption by the PHA of the administrative policies required by HUD and implementation of adequate payment standards such as SAFMRs to enable families to afford units in opportunity areas.
- An adequate number of trained site staff ready to begin enrolling and working with families. Staff will need to have completed all required training as described in Exhibits 4-2 and 4-3,

³¹ <https://www.socialscienceregistry.org/trials/9805>

and staff capacity and readiness must be certified by the study team's site liaison after completion of PHA training.

- Approval of the site's REP. The REP will include approved recruiting language, the final enrollment schedule and goals, the site's staffing structure for enrollment and service provision, and the final designation of opportunity areas.

Having adequate and trained staffing may not mean that all anticipated staff will be in place by the time the Phase 1 Pilot starts, but rather that the enrollment and mobility services staffing that is in place can handle the expected number of families who will enroll during the Pilot. If any site staff are hired during the Pilot, site liaisons will be able to work individually with them as they come on board to ensure they have the training they need.

Site Readiness to End the Phase 1 Pilot and Start the Implementation of Phase 1

The Phase 1 Pilot at each site will be considered complete when the site has met the following criteria along with administrative requirements specified by HUD:

- Invited at least 245 existing voucher families and 10 waiting list families to participate in the study.
- Enrolled at least 70 existing voucher families into the Demonstration, including 35 families into the treatment group.
- Enrolled at least four waiting list families into the Demonstration, including two families into the treatment group. (Outreach to waiting list families should take place in the last three months of the Phase 1 Pilot period to increase the chances that data on waiting list families can be used in the study.)
- For those enrolled in the treatment group, at least 30 families must have participated in at least the first meeting with their assigned mobility services coach, with the meetings going smoothly and with fidelity to the model.
- At least 15 families must have progressed to the stage of actively searching for housing, with referrals provided by the mobility services staff, with the process going smoothly and with fidelity to the model.
- At least five families have turned in an RTA packet for a unit in an opportunity area to provide an opportunity to test the expedited leasing protocols.
- At least three families have received a payment from the PHA or mobility services provider for family financial assistance.
- At least two property owners have received a payment from the PHA or mobility services provider for property owner incentives.

All aspects of each PHA's enrollment procedures and mobility-related services will need to be fully operational and shown to be implemented with fidelity to the site REP before the full Demonstration is launched at that PHA.

Site readiness to begin Phase 1 implementation will be informed by: (1) in-person site visits conducted by members of the study team to observe procedures and staff activities; (2) the study team's review of data on enrollment and services to enrolled families; and (3) discussions with

HUD and the TA Provider. As described in more detail below, the Phase 1 Pilot Reports will document the study team's assessment of each site's readiness to begin Phase 1 of the Demonstration.

In the event the Phase 1 Pilot shows a site is not yet able to administer the intervention with fidelity to the study's requirements or a site has not been able to meet the targets noted above, the study team will recommend that the Phase 1 Pilot period at that site be extended for up to three months to give the site time to work through the challenges and be ready to administer the intervention effectively. The study team site liaisons will also determine whether additional technical assistance is needed to help a particular site be ready to exit the Phase 1 Pilot and move on to the main study.

In the event that a site has not met the criteria for exiting the Phase 1 Pilot within nine months, Abt will consult with HUD and the TA Provider to determine whether the site should be retained in the study.

5.2.2 Monitoring Fidelity During the Phase 1 Pilot

During the Phase 1 Pilot period, the site liaisons and other members of the study team will conduct in-person visits to each site to observe and support site staff. (The site visits will be virtual if in-person visits are not safe due to the COVID-19 pandemic.) The timing of the site visit will be determined based on the rate of enrollment at the site, the training needs of staff, and in consultation with the PHA(s) and the TA Provider. (The TA Provider will be conducting their own site visits; the two teams will coordinate so as not to overburden the PHAs.) We expect that most site visits will occur between months 4 and 6 of the site's Phase 1 Pilot period. This timeframe will allow enough time for an adequate number of enrollments to take place so the study team can make an informed recommendation on whether the site will be ready to move to Phase 1 after the conclusion of the site's Phase 1 Pilot period.

The site visits provide an opportunity for site liaisons to meet with PHA and mobility services staff to answer questions and troubleshoot problems that may arise during the Phase 1 Pilot and to re-train in targeted areas as needed. During the site visits, site liaisons will formally assess fidelity to the Demonstration by observing how well site staff are implementing the Demonstration according to their REP and complete the **Fidelity Monitoring Checklist** (Appendix 6). To the extent feasible, the visit will also include the delivery of services by the mobility services staff.

Following the Phase 1 Pilot site visit, site liaisons will submit a **Pilot Site Report** for each site that includes a completed Fidelity Monitoring Checklist along with a Pilot Site Summary. In addition to the study team's assessment of site readiness for Phase 1, the summary will report on the progress of enrollment to date, identify any challenges with recruitment and enrollment, and identify any changes that need to be adopted by the site to officially begin implementation of the Phase 1 Demonstration. The Pilot Site Reports will be submitted to HUD two weeks after the conclusion of the site visit.

6. Process Study

This chapter describes the study team’s plans for qualitative data collection and analysis for the Process Study, as well as the collection and analysis of quantitative information on outreach, recruitment, and service delivery that will contribute to the analysis.

The research questions motivating the Process Study are described in Exhibit 6-1. The Process Study will examine whether the Demonstration was implemented with fidelity and the extent to which different site contexts affect program success. The Process Study will provide context and insights for understanding the results of the Impact Study, including which of the CMRS services appear to have been most important in facilitating moves to opportunity areas and thus merit testing as part of the SMRS. Finally, the Process Study will help identify which site and household-level factors may have affected the Demonstration’s success, which may help in identifying future refinements of mobility-related services that may be beneficial.

Exhibit 6-1. Process Study Research Questions

4. Which services within the CMRS appear most effective in facilitating moves to opportunity areas? (a) Which services do voucher families, PHAs, mobility services staff, and landlords each report as most or least effective? (b) Does this vary by site? (c) Which services appear most effective for waiting list vs. existing voucher families?
5. What challenges do: (a) PHAs and mobility services staff experience implementing CMRS and SMRS? (b) Voucher families experience accessing CMRS and SMRS or (c) making moves to opportunity areas? (d) Landlords report with CMRS and SMRS?
6. Which site- and household-level factors affect the success of CMRS and SMRS in facilitating moves to opportunity areas?
7. How do implementation and fidelity to model vary across sites?

Note: The question numbers are taken from Appendix 5, which provides a complete list of research questions.

Question 6 will also be addressed by the Impact Study, with the results integrated and reported in the Phase 1 Process and Impact Evaluation Report.

6.1 Qualitative Data Collection

The study team will conduct in-person and remote, one-on-one in-depth interviews with representatives of four sets of stakeholders:

- HCV families participating in the Demonstration
- PHA leadership and HCV program staff
- Mobility services staff
- Private owners of rental housing (landlords)

Interviews will be conducted during two rounds of site visits to each of the nine sites and remote interviews in the First Round of Data Collection (2023) and the Second Round of Data Collection (2025). The qualitative data will provide nuanced insights into the Demonstration process and success, including local implementation progress, participants’ experiences and perspectives on mobility-related services, and service costs. The data will provide context for the quantitative findings of the Impact Study and the Cost Study.

Analyses of data collected during the first round of site visits and remote interviews will inform the Rapid Cycle Evaluation Report, while data from both rounds of interviews will inform the Phase 1 Process and Impact Evaluation Report. Qualitative data will be pooled across Demonstration sites to inform the study team's understanding of implementation progress and participants' experiences with mobility-related services. The qualitative data will also provide insights into potential causal mechanisms that help explain the findings in the Impact Study and provide site-specific insights to inform the team's understanding of individual site dynamics.

6.1.1 Qualitative Interviews

Respondents from entities involved in the implementation of the program will include PHA leadership, voucher program and Demonstration-assigned staff; mobility services staff—whether third-party providers or PHA staff; and owners of one or more properties in an opportunity area who have had a connection with the mobility program.

Family respondents will be adult heads of households sampled from existing voucher families and waiting list families. They will include households in both the mobility-related services group and standard services groups. The sample will include households in the process of searching for housing as well as those that already have leased a unit.

Exhibit 6-2 shows the total target number of interview respondents by type across the nine sites. The number of interviews with PHA staff and mobility services staff will vary across sites depending on whether a site has one or two PHAs and whether mobility-related services are provided by the PHA or an external provider. In sites with a single agency, we anticipate interviewing up to three PHA staff members in individual interviews. This could include, for example, the Executive Director, the voucher program director, and the individual responsible for managing the staff delivering mobility-related services. For joint agency sites, we assume that interviews will include staff in similar positions at both agencies (e.g., the Executive Director and the voucher program director at both agencies) and will total up to six PHA staff. In addition, where mobility-related services are provided by the PHA, we will conduct individual interviews with up to three PHA mobility staff members in a site with a single PHA and up to six in a site with joint PHAs, if the agencies provide mobility-related services separately.

Exhibit 6-2. Target Number of Interview Respondents by Respondent Group

Respondent Group	Number of Interview Respondents		
	First Round of Data Collection (2023)	Second Round of Data Collection (2025)	Total
PHA Staff ^a	45	45	90
Mobility Services Staff <i>External Provider</i>	45	45	90
<i>External Provider</i>	24	24	48
PHA Provider	21	21	42
Voucher family Families	180	180	360
<i>Mobility-Related Services Group - Existing Voucher families</i>	90	90	180
<i>Mobility-Related Services Group Waiting List Households</i>	45	45	90
<i>Standard Services Group</i>	45	45	90
Landlords ^b	36	36	72

Notes: ^a Numbers of PHA staff respondents are exclusive of staff that provide mobility-related services.

^b All landlord respondents will be involved in the Demonstration.

In sites where mobility-related services are provided by an external partner, we will interview up to four staff members at the external service provider in individual interviews, assuming that there is a single provider in each site. These assumptions may be adjusted to reflect final decisions on the services provisions (e.g., services are provided only by one of two joint PHAs, or a single site has more than one service provider).

Interviews with families will help us understand differences in search and move goals, experiences, and outcomes for waiting list families and existing voucher families and will contrast mobility-related services group families' experiences with those of standard services group families. The interviews will also help identify variations in service needs and implementation of services across sites. We will ask families assigned to the mobility-related services group to describe their experiences with mobility program staff and services, interactions with landlords, and their perceptions of specific services or aspects of participation they believe either positively affected moves or were lacking. This interview will include discussions of experiences with racial/ethnic or HCV discrimination and the extent to which mobility-related services help mitigate these challenges. We will examine obstacles to accessing mobility-related services, any unresolved barriers to moves, and initial satisfaction with move outcomes. We differentiate waiting list families from existing voucher families to surface differences reported in move readiness or motivations for opportunity-area moves at the point of enrollment. We will ask standard services group families to discuss experiences with landlords and moves, search challenges, and satisfaction with moves, to contrast their experiences with the mobility-related services group.

6.1.2 Interviewing Families

Family interviews will be with adult household members involved with search and move decisions, including both waiting list families and existing HCV families within the mobility-related services group and standard services group. In the First Round of Data Collection (2023), we will sample families who have been randomized to the mobility-related services group or standard services group, have been searching for 60 days or more, and have been leased-up for no more than six months. The goal of this sampling frame is to include families who have been searching and receiving services for some time before the interview. The six-month cut-off following lease-up is to ensure families can recall and discuss their experiences during their search. These cut-offs may need to be adjusted based on each site's pace of household enrollment into the Demonstration.

Half of the family interviews at each site will be with mobility-related services group members who are existing voucher families, with the remaining interviews evenly distributed—to the extent possible—between mobility-related services group members who are waiting list families and standard services group members. We expect that the sample will include households that are searching and some that have leased-up.

In selecting families to recruit for interviews, we will draw a sample of heads of household from among Baseline Survey respondents based on the following criteria:

- Random assignment status: mobility-related services group or standard services group.
- Status at enrollment: existing voucher family or waiting list family.

- Timing relative to voucher issuance and lease-up: if a family is still engaged in a housing search, the search must have been for 60 days or more; if a family is leased-up, that family must have been leased-up for no more than six months.
- Race: families that, collectively, reflect the racial composition of the voucher families that have enrolled in the Demonstration.

Baseline Survey respondents will be grouped by mobility-related services group and standard services group, and then within those groups by waiting list families and existing voucher families. Within those groups, we will narrow the frame based on housing search or lease status (families that have been searching for at least 60 days or have been leased-up for no more than six months). After the sample has been restricted to that frame, within each group we will randomly assign numbers to households and reduce the list to twice as many households as respondents needed for a particular group. We will review the sample drawn for racial composition, replacing as many families (starting from the bottom of the selected households and replacing the last household with the next household on the list that would balance the composition) as necessary until the list reflects the racial proportions of the voucher families that have enrolled in the Demonstration. The lists will be randomized again for outreach. We will make three attempts at contacting a sampled family before moving to the next family on the list. We anticipate needing to contact approximately twice as many families (720 total) than we interview (360 total).

In the Second Round of Data Collection (2025), we will aim to conduct roughly half of the interviews with the same families we interviewed in the First Round of Data Collection (2023) to explore post-move experiences, including the factors affecting length of stay in opportunity areas. We will recruit additional households for the balance of the interviews, maintaining the target number of respondents in each subgroup of voucher families. Families newly selected for interviewing will need to have leased up at least six months prior to data collection to support a focus on post-move as well as move experiences. Splitting the sample helps advance the dual goals of the second set of interviews. Following up with a portion of the sample from the first wave will provide insight on persistence. Interviewing families that were not interviewed in the first wave will add to the earlier sample of recent searchers and movers to shed further light on whether the intervention has been implemented with fidelity, which services appear to have been most effective, and which site and household factors may have affected the outcomes. Including new searchers and movers in the second wave of interviews may also shed light on whether search experiences have changed over time.

6.1.3 Interviews with PHA Staff

The PHA staff interviews will collect information on implementation progress, organizational characteristics, housing market contexts (including perspectives on racial or voucher discrimination), and other contextual factors perceived as affecting families' likelihood of success in accessing and remaining in opportunity areas. The PHA interviews will also provide feedback on fidelity challenges associated with recruiting and enrolling participants, randomization, working with mobility service partners, and implementing CMRS. We will also collect information about business-as-usual services available to standard services group families. For sites with two PHAs, staff interviews will explore the strengths and challenges of PHA partnerships, implementing regional plans, and any variations in services or fidelity to the program model within sites.

The study team will work with PHAs and mobility services staff to review the types of information to be discussed in each interview. This will allow the study team to determine the person(s) most appropriate to answer the questions covered in the interviews. Ideally, we will interview senior leaders at the PHAs to better understand their reasons for participating in the Demonstration, staff at the PHAs directly responsible for overseeing the Demonstration, and staff delivering mobility-related services. We expect to interview the same staff in the First Round of Data Collection (2023) and Second Round of Data Collection (2025). In case of changes in personnel, we will attempt to interview PHA staff in the same positions.

6.1.4 Interviewing Mobility Services Staff

Mobility services staff have unique insight into the day-to-day operations of the mobility program, market contexts, landlord behavior and perspectives, and households' experiences and challenges securing housing in opportunity areas. These interviews will help identify challenges with providing CMRS, including identifying and interacting with landlords, and the types of TA that are helpful to address the challenges. Interviews will explore which services are perceived as most effective, how staff interact with landlords and families to individualize services, and which services may be perceived as lacking. We will also gather providers' perspectives on differences in housing search challenges or service needs for waiting list families versus existing HCV holders and the potential role of race or ethnicity in search experiences or access to opportunity neighborhoods in different market contexts.

We will attempt to interview the same mobility services staff in the First Round of Data Collection (2023) and Second Round of Data Collection (2025), although turnover in these mobility services staff may be greater than for PHA staff. In case of changes in personnel, we will attempt to interview mobility services staff in the same positions.

6.1.5 Interviewing Landlords

Goals for the landlord interviews are to (1) better understand the landlord experience with HCV and mobility program services; (2) identify the services or approaches that are most effective in terms of encouraging participation; and (3) identify potential challenges to ongoing landlord participation in the HCV program. Landlords will be asked to provide insights about their motivation to participate in the HCV program and their experience or perspectives on PHA(s) and voucher policies, mobility services staff, and participating households.

The study team will work with PHAs and mobility services staff to identify landlords at each site.

We will use purposeful sampling to select landlord interviewees that have some engagement with the Demonstration. In the First Round of Data Collection (2023), we expect to interview four landlords from each of the nine sites. We will request lists of landlords in opportunity areas from the PHA and mobility services staff that have interacted with the Demonstration in some way (such as learning about the Demonstration from a mobility services staff member or leasing to a Demonstration participant), including information on landlord size, prior HCV experience, and contact information.

To the extent feasible, we will stratify the landlord lists from each site by (1) their relative size and (2) and prior HCV experience, ideally selecting two larger and two smaller landlords, and within each of these groups we will select one landlord with prior HCV experience and one

without. This will result in having one landlord type in each “cell” at every site as illustrated in Exhibit 6-3.

Exhibit 6-3. Target Number of Landlord Interviews by Respondent Type for First Round of Data Collection (2023)

Landlord Characteristics	HCV Experience		No HCV Experience		Total
	Number of Landlords per Site	Total First Round of Data Collection (2023)	Number of Landlords per Site	Total First Round of Data Collection (2023)	
“Small”	1	9	1	9	18
“Large”	1	9	1	9	18
Total Landlords	2	18	2	18	36

The landlord interviews will help us learn about implementation and what is most important from the Demonstration services—for example, whether, and which, incentives may attract landlords from opportunity neighborhoods to participate. These interviews may also provide insights into whether there are differences across landlord types, e.g., larger versus smaller landlords and those with or without prior HCV experience.

In the Second Round of Data Collection (2025), we are planning for half of the interviews to be with the same landlords that we spoke with in First Round of Data Collection (2023). We will recruit two landlords who engaged with the Demonstration after the sample was first drawn to fill out the interview sample. The newly selected landlords will be drawn from the lists provided by PHAs and mobility services staff. Similar to the First Round of Data Collection described above, to the extent that it is feasible, this sampling will be based on landlord size and prior HCV experience. The goal will be to mirror the cell size samples we had in the First Round of Data Collection (2023) (Exhibit 6-3). This approach will help support an analysis of why landlords are or are not still participating in the program while increasing overall the number of unique landlords interviewed.

In both the First and Second Rounds of Data Collection efforts, we will make three attempts at contacting a landlord before moving to the next landlord systematically selected. We anticipate needing to contact approximately twice as many landlords as we end up interviewing, for a total of 144 landlords contacted to generate 72 interviews. If landlord lists received from the PHAs and mobility services staff support our selection plan, the overall total of 72 interviews across both rounds of data collection will include 36 larger and smaller landlords and at least 36 landlords new to the HCV program.

6.1.6 Implementation of the Qualitative Interviews

The qualitative interviews will be conducted on-site at the nine study sites and remotely during First Round of Data Collection (2023) and Second Round of Data Collection (2025). Field staff will prioritize household interviews during a week-long visit to each site, conducting as many PHA staff interviews during the week as possible. Landlords, and any household and PHA staff respondents who are not interviewed during the site visit, will be interviewed remotely by telephone or via a secure online platform following the site visit.

The study team will establish protocols for outreach and scheduling with input from the Demonstration’s TA Provider. The interview guides for the First Round of Data Collection and

plans for respondent and data security have been approved by Abt's IRB. These interview guides have also received Office of Management and Budget clearance.

Field team staff who will carry out the qualitative interviews will attend a training session in preparation for data collection and to ensure consistency across the site visit teams. The training session will be scheduled at least one month in advance of the expected start of site visits and will offer field team members an option to participate remotely. Topics will cover fieldwork expectations, outreach plans, scheduling protocols, data collection protocols, respondent confidentiality requirements, post-visit analysis and reporting requirements, and all data collection-related logistics.

Once the field staff have been oriented, staff assigned to each site will contact respondents to introduce the Process Study and the site team, answer any questions about the Process Study, and schedule interviews. Site teams will review agencies' individual CMRS Guides, websites, and other relevant sources to pull information that addresses interview questions in advance. Where information can be drawn from other reliable sources, interviewers will confirm rather than ask for the information.

A site team of two staff will conduct five-day site visits. Interviews will last approximately 60 minutes. Administrative interviews will be conducted one-on-one except when respondents' roles or schedules suggest a small-group interview format. All interviews will be conducted at PHAs' or program offices. Site teams will not be able to travel to respondents' locations.

If it is not possible to conduct all household and PHA staff interviews during a site visit, the remaining interviews will be scheduled as soon as possible following the site visit, with the goal of completing them the following week. These interviews will be conducted remotely. All landlord interviews will be conducted remotely within the same timeframe. Remote interviews will be conducted by telephone or via a secure online platform based on respondent preference.

Site teams will audio-record the interviews to capture data fully and accurately. We will be prepared to conduct interviews in English or Spanish, engaging interpreter services as necessary. We will offer a \$30 incentive to landlords and \$40 to head of household respondents in the form of a gift card. After interviews are completed, the study team will use a secure, automated transcription software to produce transcriptions for data analysis.

Following IRB approval, the study team pretested the family interview guides. The study team revised the guides based on feedback gathered during the pre-tests and from additional HUD reviews prior to submitting the instruments to the OMB for approval.

6.2 *Analysis of Interview Data*

Analysis of interview data will involve organizing, summarizing, and synthesizing the data to support pooled and site-specific findings related to each research question. Findings will:

- Provide context for understanding the results of the Impact Study. For example, the interview data may suggest factors affecting program success, such as experiences with racial or source of income discrimination and family attributes that might affect neighborhood preferences or composition.

- Help identify which of the CMRS services appear to have been most important in facilitating moves to opportunity areas. For example, the family and landlord interview data should suggest which services were most important to family decisions about moving to opportunity areas and to landlord participation.
- Explore the extent to which site context (e.g., regional partnership or sole agency) and household Demonstration and voucher status (e.g., mobility-related services group or standard services group household, existing voucher family or waiting list family) affect outcomes.
- Provide insights into the extent that the Demonstration was implemented with fidelity. While the primary purpose of the interviews is not to assess fidelity, the research team will note any observations regarding a lack of fidelity to the model in recruitment, enrollment, or services provision.

6.2.1 Summarizing Key Themes

The study team will develop a thematic memo template that each site team will use to prepare a summary of key themes identified during data collection for internal purposes. This memo will be prepared shortly after completing a site visit and will provide a summary by theme and identify differences by respondent type. The memos will help identify additions or revisions to the coding scheme, provide an overview of variations among the sites, and support swift data analysis for the Rapid Cycle Evaluation Report.

6.2.2 Coding and Analysis of Interview Data

Following each site visit, the study team will verify audio quality from interviews before running the interviews through the automated transcription software. Interview transcripts will be imported into NVivo for auto-coding and in-depth thematic analysis.

Analysis will differ between the first and second rounds of data collection because of reporting requirements, timelines, and report objectives. After the First Round of Data Collection, analysts will use the thematic memos to develop pooled findings on key themes and high-level differences by respondent type. This will help ensure that preliminary findings can be developed in time to be reported in the Rapid Cycle Evaluation Report. The Rapid Cycle Evaluation Report will include a discussion of implementation challenges and lessons learned reported through the interviews and observations on the extent to which the services have been administered with fidelity. A separate memo will be prepared providing information on implementation challenges at specific sites to help inform the TA Provider's work.

Data analysis for the Phase 1 Process and Impact Evaluation Report will involve manual coding and support both a pooled analysis and site-specific findings. To ensure internal consistency of coding, the coding team will test code a transcript, compare codes, and adjust the codebook or coder understanding. The lead coder will conduct periodic consistency checks of coding to ensure ongoing consistency in coding the 612 expected transcriptions (interviews with 90 PHA staff, 90 mobility services staff, 360 families, and 72 landlords).

Once all the transcripts have been coded in preparation for the Process and Impact Evaluation Report, analysts will synthesize the themes that emerged and prepare comparative analytic summaries organized by interview topics and key research questions across respondent types and sites, analyzing patterns and disparities. Summaries will be distributed among members of the

study team to inform their work, facilitate cross-team discussions, and integrate findings. Interview data also will be a source for illustrative quotes to include in the report.

6.3 *Administrative Data on Outreach and Service Delivery*

The Process Study will include the analysis of data on outreach and recruitment as well as service delivery³². An initial review of these data will be conducted in advance of the interviews to provide context for the interviewers; the analysis will be completed, and the results integrated into the Rapid Cycle Evaluation Report and Phase 1 Process and Impact Evaluation Report. In this section, we describe plans for the collection and analysis of these data.

6.3.1 *Collection of Outreach/Recruitment Data from PHAs*

PHA staff will collect outreach and recruitment data in the process of performing outreach to potential Demonstration participant households. We expect that site liaisons will collect these data from PHA staff on a monthly basis. Data collected may vary by site but will generally include:

- Number of mailings each month to existing voucher families.
- Number of existing voucher families that attend a group Demonstration briefing to talk about the study each month (if the site uses group meetings).
- Number of existing voucher families that attend an Individual Enrollment Meeting each month.
- Number of existing voucher families that enrolled each month.
- Any updates in how the Demonstration is being marketed that reflect a change from the Recruitment and Enrollment Plan.
- Number of waiting list families invited to learn more about the Demonstration each month.
 - 1) Number of waiting list families who respond to the invitation and seek to learn more each month.
 - 2) Number of waiting list families subsequently determined eligible for the HCV program each month.
- Number of waiting list families who attend a Demonstration briefing each month.
- Number of waiting list families that attend an Individual Enrollment Meeting each month.
- Number of waiting list families that enrolled each month.

6.3.2 *Collection of Service Delivery Data from Mobility Services Staff*

The study team plans to collect a consistent set of data about the delivery of mobility-related services from all sites. The study team will encourage sites to use the study-developed Service Delivery Tool (a management information system), which will collect the information needed for the study. (See Appendix 17 for a list of data fields that the Service Delivery Tool will collect.) For sites that choose to use another case management software, we will provide detailed

³² The Rapid Cycle Evaluation Report will *only* include the interview data from the First Round of Data Collection (2023).

information about the data the study team needs to understand the dosage of services each mobility-related services group family receives and the allocation of time and resources by mobility services staff to estimate the cost of each service component. (The cost information will be analyzed as part of the Cost Study, described in Chapter 8.) We will report on this dosage and examine correlations between dosage and outcomes.³³ In addition to the outcomes specified in Chapter 7, we will also look at the correlation between the dosage of pre-move and (especially) post-move services and the share of families who move to an opportunity area that stay in that area.

We will also characterize differences in average dosage across sites but will not attempt to conduct a formal statistical analysis that examines how these differences affect the mobility impacts observed across sites. We do not expect an analysis of how mean site-level dosage affects impacts to be informative because we will only have nine site-level impact estimates. Dosage is one factor among several factors that may influence the size of impacts, including availability of rental units in opportunity areas, quality of mobility service provision, PHA practices, and historic patterns of residential segregation. With only nine impact estimates, we do not expect to be able to disentangle the separate effects of each of these factors.

For each family assigned to the mobility-related services group, we will collect information on:

7. How many of the six service phases of the CMRS guide the family has engaged in. The six phases are:
 - Pre-move Appointment
 - Family Preparation
 - Searching and Applications
 - Leasing-up
 - Post-Move Check-Ins
 - Completed Search
8. Which particular activities they have engaged in within each phase.
9. How much total service time (measured in hours) they have engaged in with the service provider in each phase.
10. Dates when services were provided.
11. The amount of dollars disbursed, for what purpose, and at what point after random assignment.
12. How many units or landlord referrals were provided to the family, and at what point after random assignment these referrals were provided.

³³ One challenge with studying the relationship between the total dosage of services and mobility outcomes is that families who utilize mobility-related services and lease-up in an opportunity area are almost by definition likely to consume more services than families who utilize mobility-related services but choose not to lease-up in an opportunity area, since some services are provided only at later stages of the search process.

For each landlord, we will collect information on

13. Nature of contact.
14. Number of contacts.
15. Time required to engage in each landlord contact.

These data will capture the intensity and quality of engagement of PHA and mobility services staff with families and landlords, and variation in these measures across sites. Additionally, these measures will capture the extent to which sites struggled to attract or maintain households and landlord participants.

6.3.3 Analysis of Data on Outreach and Service Delivery

The analysis of these data sources will help provide context for the interviews and inform sections of the two Phase 1 reports.

In the **Rapid Cycle Evaluation Report**, the study team will present summary statistics on implementation outcomes (outreach intensity and type, number of contacts for families or landlords, types of contact made) as well as simple cross-tabulations of data, assessing how the implementation outcomes varied by a limited set of characteristics (e.g., site, PHA, existing voucher family or waiting list family).

For analysis of the recruitment process for existing voucher families, researchers will examine each site's family enrollment efficiency ratio (average monthly outreach outputs divided by the average monthly enrollment) to identify potential sources of differences in enrollment outcomes. The researchers will also examine the share of waiting list families offered the opportunity to learn more about the Demonstration and move forward with a determination of eligibility for the HCV program that ends up enrolling in the Demonstration. These data will be supplemented with qualitative interview data on the PHA's family recruitment and enrollment questions to verify and explain the statistical results.

Analysis of the service delivery process will present summary statistics by site (for sites with PHAs that use the Service Delivery Tool) on the frequency with which different services are administered, the disbursement of financial incentives, and landlord recruitment efficiency (frequency of contact per landlord divided by the number of participating landlords), as well as a histogram of household contact frequencies by contact types (and by existing voucher families versus waiting list families).

The Rapid Cycle Evaluation Report will present these summary statistics and integrate these findings with observations from the interviews and fidelity assessments completed by the study team to provide insight on the extent to which services are being implemented with fidelity and the nature and extent of implementation challenges. The report will provide a high-level descriptive analysis of what is happening across sites and highlight any significant differences and challenges in recruitment or implementation methods and outcomes across sites.

For the Rapid Cycle Evaluation analysis, these data are intended primarily to highlight opportunities for improvement and learning in implementation approaches between sites and for the Demonstration as a whole for the study team, HUD, and the TA Provider.

For the Rapid Cycle Evaluation, we will also examine cross-tabulations of and correlations between types of services received by mobility-related services group families and the outcome of whether a family had a new lease-up in an opportunity area. This analysis will supplement our largely qualitative approach to addressing Research Question 4: “Which services within the CMRS appear most effective in facilitating moves to opportunity areas?”³⁴

The Phase I Process and Impact Evaluation Report will include the same descriptive analysis as the Rapid Cycle Evaluation Report but will expand the cross-tabulation of characteristics considered to include broader variables. Specifically, the analysis will examine enrollment outcomes by a number of variables including race, household size and age of children, household income, and landlord characteristics. Additionally, it will examine service delivery (household and landlord contacts, service delivery and financial disbursement data) using those same variables.

Additionally, this step of the analysis may include correlative testing (Pearson correlations, Chi-square tests, and some ordinary least squares [OLS] regressions) to understand whether and how the program’s implementation varied predictably across different situations. These analyses will allow for the presentation of a richer picture of the quality of implementation and how it varies across sites.

For both the Rapid Cycle Evaluation and Phase 1 Process and Impact Evaluation Report, results from the analysis of quantitative data will be used along with those from analysis of interview and survey data to identify elements of the implementation that may have aided or hindered positive outcomes for families. This will not be a statistical analysis that seeks to compare services usage and implementation quality and fidelity to impact estimates, but rather a qualitative assessment of how different types of services and methods of delivery may have contributed to stronger or weaker mobility outcomes for families.

A memo on findings related to implementation successes and challenges in the study sites will be submitted to HUD along with the Rapid Cycle Evaluation Report. This memo is intended as an internal document that will surface any implementation issues detected during the first round of qualitative data collection, providing greater detail than will be included in the Rapid Cycle Evaluation Report. After reviewing the information provided, HUD may choose to share elements of the memo with its TA Providers to help inform the providers’ work.

³⁴ Because mobility-related services are intended to be customized to a family’s needs, we expect the correlations between service use and new lease-ups in opportunity areas to have minimal causal interpretation. Nevertheless, we expect this analysis will have value in describing the experiences of treatment group families in the Demonstration.

7. Impact Study

The research questions motivating the Impact Study are described in Exhibit 7-1. Among other outcomes, the Impact Study will examine the impacts of being offered CMRS and SMRS on new lease-ups in an opportunity area during the 12 months after random assignment (as a measure of initial moves), the average number of months residing in an opportunity area within the first 24 months after random assignment (as a measure of exposure to opportunity areas), and a range of secondary outcomes, including housing quality, the lease-up rates and search time of waiting list families, and the share of existing voucher families that move and the timing of their moves relative to study enrollment. The Impact Study will also compare the impacts of CMRS and SMRS.

Exhibit 7-1. Impact Study Research Questions

- 1. For voucher families with children, what is the effect of offering CMRS on moves to an opportunity area during the 12 months following random assignment?**
 - (a) What is the effect for existing voucher families?
 - (b) What is the effect for waiting list families?
 - (c) Does impact vary by site or (d) for waiting list vs. existing voucher families?
 - (e) Does impact vary based on household characteristics or (f) the characteristics of the households' origin neighborhood?
- 2. For voucher families with children, what is the effect of offering CMRS on the duration of residency in an opportunity area in the 24 months following random assignment?**
 - (a) What is the effect for existing voucher families?
 - (b) What is the effect for waiting list families?
 - (c) Does impact vary by site or (d) for waiting list vs. existing voucher families?
 - (e) Does impact vary based on household characteristics or (f) the characteristics of the households' origin neighborhood?
- 3. How does the offer of CMRS affect the following secondary outcomes:**
 - (a) The characteristics of voucher families' tracts?
 - (b) Search times?
 - (c) Success rates for waiting list families?
 - (d) Share of existing voucher families who move to any area?
 - (e) When existing voucher families move relative to enrollment in the study?
- 6. Which site- and household-level factors affect the success of CMRS and SMRS in facilitating moves to opportunity areas?**
- 9. For voucher families with children, what is the effect of offering a particular SMRS package on moves to an opportunity area in the 12 months following random assignment?**
 - (a) What is the effect for existing voucher families?
 - (b) What is the effect for waiting list families?
 - (c) Does impact vary by site or (d) the different bundles of SMRS?
 - (e) Does impact vary based on household characteristics or (f) the characteristics of the households' origin neighborhood?
- 10. For voucher families with children, what is the effect of offering a particular SMRS package on the duration of residency in an opportunity area in the 24 months following random assignment?**
 - (a) What is the effect for existing voucher families?
 - (b) What is the effect for waiting list families?
 - (c) Does impact vary by site or (d) for waiting list vs. existing voucher families, or (e) the different bundles of SMRS?
 - (f) Does impact vary based on household characteristics or (g) the characteristics of the households' origin neighborhood?

11. Are families offered a particular SMRS package less likely to move to an opportunity area in the 12 months following random assignment than similar families who are offered CMRS?

- (a) Does impact vary for waiting list vs. existing voucher families?
- (b) Does impact vary by site or (c) the different bundles of SMRS?

12. How does the offer of SMRS affect the following secondary outcomes:

- (a) The characteristics of families' tracts?
- (b) Search times?
- (c) Success rates for waiting list families?
- (d) Share of existing voucher families who move? and (e) when existing voucher families move relative to enrollment in the study?

Note: The question numbers are taken from Appendix 5, which provides a complete list of research questions.

Our strongest hypotheses are for the first two research questions as they relate to the full sample of families who enroll in the study: (1) We expect that families with children who are offered comprehensive mobility-related services are more likely to lease-up in an opportunity area than families who are not offered these services within 12 months of random assignment; and (2) We expect that families with children who are offered comprehensive mobility-related services will, on average, spend more months in an opportunity area in the 24 months following random assignment than families who are not offered these services.

We expect to observe these effects among both existing voucher families and waiting list families, but we do not have a clear expectation about which of these subgroups will experience larger effects. Waiting list families may be more receptive to mobility-related services because they have not previously engaged in a housing search using a housing choice voucher and so may be more desirous of assistance. On the other hand, waiting list families may, on average, be under more pressure to use their voucher quickly and be less able to take advantage of services.

Likewise, we do not have clear expectations about whether CMRS will lead to higher total lease-up with the voucher for waiting list families when compared to the control condition, or a higher total number of moves (to any area) for existing voucher families. Mobility-related services could lead to higher lease-up rates and more moves, but attempting to lease in opportunity areas might be more difficult, depressing lease-ups and moves.

7.1 Data Collection for Impact Measures

This section summarizes the data to be collected through (a) the Baseline Survey, (b) the Baseline Information Form, (c) HUD administrative data, and (d) PHA administrative data. These are the data sources the study team will use in conducting the analyses of impacts and outcomes that result from the offer of the CMRS. (Chapter 8 describes how study data that includes personally identifiable information (PII) will be kept secure.)

7.1.1 Baseline Information Form

The Baseline Information Form (BIF) will be administered by PHA staff to the head of household when the head of household enrolls in the study. The BIF will collect the following types of information:

- Personally Identifiable Information (PII) for the head of household, including name, date of birth, and Social Security number.
- Name, age, and description of relation to head of household for all other family members.
- Primary language spoken at home.
- Address, phone, and email contact information for the head of household.
- Contact information for up to three people who will always know how to contact the head of household.
- Employment status and location for adult family members.
- Information related to schooling (satisfaction, willingness to change schools, participation in gifted and talented programs, special education, problems for child family members).
- Health information for child family members.

7.1.2 Baseline Survey

The Baseline Survey will be self-administered by the head of household when the head of household enrolls in the study. The Baseline Survey will collect the following types of information:

- Length of residence in metropolitan area and in the neighborhood.
- Neighborhood satisfaction.
- Perception of neighborhood safety.
- Living arrangement.
- Perception of whether condition of home and neighborhood impacts parenting.
- Type of childcare arrangements.
- Which regular activities and services (childcare, after-school activities, employment, place of worship, primary care, other medical services) are located nearby?
- Subjective well-being.
- Overall health.
- Kessler-6 measure of psychological distress (Kessler et al. 2003).
- Housing search preferences, attitudes, and experiences.
- Information about current housing search.
- Amount of pressure to move soon.
- Reasons to remain in current neighborhood.
- Reasons to move to a new neighborhood.

- Financial hardship.
- Food insecurity.
- Health insurance coverage
- Health-related information for the head of household.
- Education of the head of household.
- Employment status and location for the head of household.
- Access to private transportation.
- Race/ethnicity of the head of household.
- Country of birth.

7.1.3 HUD Administrative Data

Public housing agencies use HUD's Form 50058 to report to HUD information about families receiving housing assistance through the PIH Inventory Management System/PIC Information Center (IMS/PIC) system. Form 50058 collects information on all family members (e.g., age, relationship to head, employment status), assets, income sources and amounts, the rental unit, and the housing assistance payment. The PHA submits this form upon each programmatic action (such as new admission, reexamination, portability move-in or move-out, and end of participation).

The study team will collect Form 50058 data from HUD for the families who have been randomized into treatment and control groups. The study team plans to collect the full set of Form 50058 records, rather than only the records found in the Office of Policy Development & Research's (PD&R's) quarterly snapshot files.³⁵ It is possible that some families may leave the HCV program and later receive housing assistance that is documented in the Tenant Rental Assistance Certification System (TRACS) system (such as through Project-based Section 8). Therefore, the study team also plans to collect any TRACS Form 50059 records that exist for study participants. While the Form 50058 and Form 50059 records contain much valuable information, the most important goal of collecting these records is to document each family's residential address history.

7.1.4 PHA Data

We plan to request directly from PHAs data that are collected by the PHA. The exact data elements we request will be finalized after the study team has engaged the PHA in discussions of available data. Some of these data elements may be entered into 50058 forms but not submitted to HUD or not submitted consistently. Information that we do not expect will be captured consistently in the IMS/PIC data includes:

- Admissions preference category.
- Records needed to measure the voucher lease-up rate (specifically for families who do not lease-up after being issued a voucher).

³⁵ The PD&R quarterly snapshot files only include the last action that PHA's submit each quarter. If PHAs submit more than one 50058 records in a quarter, all records except the last one is excluded from the quarterly files.

- Issuance of voucher (not all PHAs submit this consistently to IMS/PIC, although Demonstration PHAs must promise to do so).
- Expiration of voucher (not all PHAs submit this consistently to IMS/PIC).
- Search time before lease-up or move and any extensions granted.
- Housing Assistance Payment amount (for Moving to Work agencies Minneapolis Public Housing Authority and Housing Authority of the City of Pittsburgh).

While PHAs are supposed to submit End of Participation records for households that are no longer in the HCV program, this action is sometimes missing from HUD data. We will ask PHAs to provide data directly on whether study participants have left the HCV program.

7.1.5 Tracking Data

For each family, we intend to collect a full history of residential addresses beginning at the time of study enrollment. While families are participating in the HCV program, HUD administrative data will provide information on residential addresses. For families enrolled in the study who end their participation in the HCV program (or enrolled waiting list families who fail to lease-up with a voucher), we plan to collect address information from the data vendor LexisNexis® Accurint®.

7.2 *Impact Analysis and Supporting Non-Experimental Analysis*

The Phase 1 impact analysis focuses on the pairwise comparison of outcomes for families offered CMRS with outcomes for control group families. This analysis will be conducted in two stages: impacts for families enrolled through June 2023 will be analyzed for the Rapid Cycle Evaluation Report. Impacts for families enrolled through September 2024 will be analyzed for the Phase 1 Process and Impact Evaluation Report. The impact analysis at each point will include all households with data reflecting at least six months after random assignment.³⁶ For each report, we will perform balance tests of the pooled sample and key subgroups (existing voucher families, waiting list families, and site) to confirm that randomization resulted in assignment groups with similar household and neighborhood characteristics at baseline.

7.2.1 Sample

The sample for analysis will include all families enrolled in the study after the Phase 1 Pilot has ended and may also include families enrolled during the Pilot. A decision on whether to use the Phase 1 Pilot data in the impact, process, and cost analyses will be made by the time that the Rapid Cycle Evaluation Report preparation begins, based on observations by site liaisons and the TA Provider, in consultation with HUD. The decision will depend upon the extent to which the experiences of families enrolled into the Demonstration during the Pilot were generally

³⁶ We expect virtually all families to have completed their initial housing searches by 12 months after random assignment and have therefore focused on this period as the basis for setting the first confirmatory outcome. However, very few households in the analysis sample for the rapid cycle evaluation will have reached 12 months after random assignment. Therefore, we have used a shorter period—at least six months since random assignment—to define the population of households to be analyzed. We expect that at six months after random assignment, some families in the treatment and control groups will have leased up in a new rental unit while other families are either still searching for a rental unit or (if an existing voucher family) decided not to move. While we expect a substantial number of families to have leased up by the six-month point after random assignment, we do not know whether this proportion will be more or less than 50 percent of families.

consistent with the experiences families are expected to have when enrolled in the first year after the Phase 1 Pilot.

The study team plans to assess whether to include the Phase 1 Pilot data on a site-by-site basis, rather than for the Demonstration as a whole, as implementation quality during the Pilot may vary from one site to the next. The following criteria will need to be met for families who enrolled during the Pilot to be included in the analysis sample for the study at any given site:

1. Enrollment, random assignment, and the collection of baseline data during the Phase 1 Pilot must have been carried out as planned, with fidelity to the Recruitment and Enrollment Plan.
2. The families who enrolled during the Phase 1 Pilot were eligible for the study and at the general stage of readiness targeted by the Demonstration (e.g., for existing voucher families, several months before their lease ended or they needed to move).
3. Mobility-related services during the Phase 1 Pilot were delivered with fidelity to the CMRS model.
4. The lease-up process for treatment group families during the Phase 1 Pilot took approximately the same amount of time as for treatment group families after the Phase 1 Pilot ended.
5. No significant issues with staff training were identified during the Phase 1 Pilot.
6. No substantial changes in the CMRS or enrollment procedures were made based on the Phase 1 Pilot experience.

7.2.2 Outcomes

Most outcomes for the impact analysis will be related to moves in the months after random assignment (RA). The outcomes and their data sources are shown in Exhibit 7-2.

Exhibit 7-2. Study Outcomes and Their Data Sources

Outcome	Data Source(s)
Having a new lease-up in an opportunity area during the first 12 months after RA	HUD administrative data
Having a new lease-up in an opportunity area at any time during the study observation period	HUD administrative data
Residing in an opportunity area at the 12-month timepoint after RA	HUD administrative data, Tracking data
Number of months residing in an opportunity area during the first 24 months (Phase 1) / 36 months (Phase 2) after RA ^a	HUD administrative data, Tracking data
Percent of the period from month 13 after RA through the last month observed that a family spends in an opportunity area	HUD administrative data, Tracking data
Residing in an opportunity area at some time during the first 24 months (Phase 1) / 36 months (Phase 2) after RA ^a	HUD administrative data, Tracking data
Leased up or moved with a voucher within 12 months after RA	HUD administrative data
Census tract characteristics 12 months after RA	HUD administrative data, Tracking data, Census American Community Survey data, Brandeis Child Opportunity Index data, Opportunity Atlas data, HUD transit index, Environmental Health Index
Housing assistance payment (HAP) 12 months after RA	HUD administrative data, PHA administrative data

Notes:

^a Due to the timing of the Phase 1 report, the observation window for “exposure” to opportunity areas will need to be only two years. The Phase 2 report will use a 36-month observation window instead.

For waiting list families, a “new lease-up in an opportunity area” is any use of their voucher to lease a rental unit in an opportunity area. For existing voucher families, a new lease-up in an opportunity area is defined as using their voucher to lease a new unit (i.e., not the same unit they were living in at time of enrollment) in an opportunity area.

Our identified opportunity areas are limited to Census tracts within the metropolitan areas in which the sites are situated.³⁷ Any lease-ups in tracts outside these metropolitan areas will therefore be classified as lease-ups in non-opportunity areas, regardless of the characteristics of these tracts. The census tract characteristics and expected future outcomes for children are listed in Appendix 1. The full set of planned impact analyses is shown in Appendix 2. For the Rapid Cycle Evaluation Report, we will analyze the sample of families we have observed at least six months since random assignment. For the families we have observed fewer than 12 months after random assignment, we will measure outcomes at the latest observation point.

7.2.3 Impact Estimation Model

Method of Estimation

We will follow the CMTO impact analysis (Bergman et al. 2020) by using an intent-to-treat impact estimation model for our main analysis. This model will take the form of

$$Y_i = \alpha + \beta CMRS_i + \gamma X_i + \sum_{k=1}^8 \phi_k I_{k,i} + e_i$$

Where Y_i is an outcome for family i , β is the estimated impact of being offered CMRS rather than the control condition, X_i is a vector of family-level characteristics measured at baseline including characteristics of origin neighborhood, I_k are eight site-level dummies (fixed effects; with the ninth site serving as the reference group), e_i is a family-level residual, and α , γ , and ϕ_k are other parameters to be estimated.

Standard Errors

The model described above will be estimated using ordinary least squares (OLS), which assumes that the outcome data have a normal distribution (i.e., form a bell-shaped curve) with a common variance (i.e., are homoscedastic). There is no reason a priori to expect homoscedasticity, however, since some types of families could have higher variability in their outcomes than other families. Furthermore, many of the outcomes to be estimated are binary; applying OLS to such binary outcomes (i.e., using the linear probability model) induces heteroscedasticity (Angrist and Pischke 2008).

To address the potential of heteroscedasticity, the analysis team will compute robust standard errors (i.e., Eicker-White robust standard errors; Angrist and Pischke 2008) and use these

³⁷ Study resources do not permit the identification of opportunity tracts outside of the metropolitan areas in which the study sites are located.

standard errors for hypothesis testing. This is the same approach used in the CMTD Demonstration (Bergman et al. 2020) and the Family Options Study (Gubits et al. 2016).

Statistical Tests for Impacts

The analysis team will use the estimated standard errors to perform tests of statistical significance for the impact estimates. The analysis will test and seek to reject the null hypothesis that assignment to the offer of CMRS produces equivalent outcomes as assignment to the business-as-usual control condition. The level of statistical significance for hypothesis testing will be 0.10. This level of significance has been commonly used in many recent social policy experimental evaluations, including in the CMTD study (Bergman et al. 2020).³⁸

Covariates

- The rich data collected in the Baseline Survey allows for the inclusion of a broad range of domain covariates in the estimation model. We plan to include family-level covariates in the main impact model specification (in addition to site-level dummy variables). Inclusion of family-level covariates will adjust for any chance imbalances between assignment groups on family background characteristics. It can decrease the standard error of the impact estimate (thereby increasing statistical power) by explaining more of the family-to-family variance in outcomes. The goal in choosing covariates is to pick variables that capture substantial variation within the sample that may be related to outcomes. We plan to choose a relatively limited set of covariates in the impact model.
- While the overall study sample is expected to be quite large, samples for the Rapid Cycle Evaluation Report and the Phase 1 Process and Impact Evaluation Report will be smaller. The subgroup samples for these first two reports will be smaller still. For example, we expect site-level samples in the Rapid Cycle Evaluation Report to be about 270 families per site, and the sample of new voucher families (pooled across sites) in the Phase 1 Process and Impact Evaluation Report to be about 360 families. In these smaller samples, the inclusion of covariates in the impact model is important to address any chance imbalances in baseline characteristics between the CMRS and control groups. Exhibit 7-3 presents a list of potential covariates to include in the model.

Exhibit 7-3. Covariates to Be Considered for Inclusion in the Impact Estimation Model

Covariate
Family and head of household Characteristics
Existing or new voucher family (full sample and site samples only)
Age (five age range categories)
Sex (female, male, missing)
Race/ethnicity (Black non-Hispanic, Hispanic, White non-Hispanic, potentially other categories)
Spouse/Partner in household
Primary language is English

³⁸ Recent evaluations that have used a 0.10 level of significance include the Moving to Opportunity Fair Housing Demonstration (Sanbonmatsu et al. 2011; Chetty, Hendren, and Katz 2016), the Family Options Study (Gubits et al. 2016), the Rent Reform Demonstration (Riccio, Verma, and Deitch 2019), the Family Self-Sufficiency Program Evaluation (Verma et al. 2019), and the Promoting Opportunity Demonstration (Mamun et al. 2021).

Covariate
Born outside the U.S.
Highest level of education (less than HS diploma, HS diploma, GED, more than HS/GED)
Family income (linear and quadratic terms)
Race/ethnicity
Homeless at baseline
Currently working at baseline
Working full-time 35 hours per week or more at baseline
Commute > 30 minutes to work
Someone in household has driver's license
Has access to private transportation
Number of children (One child, two children, three children, four children, five or more children)
Child age categories (Has at least one child aged 0-5, 6-12, 13-7)
Eviction in past 7 years
Neighborhood-related characteristics
Living in Opportunity Area at baseline
Satisfied with current neighborhood
Wants to move to a different neighborhood
Self-reported ability to pay for a move without mobility program assistance
Comfortable moving to racially different neighborhood
Unsatisfied with any child's current school
Primary motivation to move is schools
Primary motivation to move is safety
Primary motivation to move is bigger/better home
Site dummies

Note: Baseline = time of random assignment.

Missing Covariate Data

Some amount of baseline covariate data may be missing because some heads of household do not provide responses to certain items on the Baseline Survey. As the Baseline Survey was administered prior to random assignment, missing baseline data cannot be correlated with assignment status. Given that we expect only a small amount of missing covariate data, a number of approaches are available to us to handle the missing data. Following the Family Options Study (Gubits et al. 2016), we plan to use single stochastic imputation to impute the missing data based on the values of non-missing covariates. This procedure adds random perturbations (randomly drawn from estimated distributions of residual variance) to the predicted values of missing covariates.³⁹ Single stochastic imputation has the virtue of superior statistical power (through preservation of degrees of freedom) over the alternative method of imputation of artificial values and addition of dummy variables to indicate the presence of missing data. Single stochastic

³⁹ Single stochastic imputation may be used for binary variables as well as continuous variables. For binary variables, a random draw is made from the binary distribution using the probabilities derived from the prediction model.

imputation also has the virtue of simplicity compared to the alternative method of multiple imputation (which involves the creation of multiple sets of data for analysis).⁴⁰

7.2.4 Examining Family Characteristics that Moderate Impacts (Subgroup Analysis)

Because of the large number of factors that may influence the success of mobility programs in facilitative moves to opportunity areas, the study team has great interest in examining variation in impact magnitudes according to site and to moderating family characteristics. We plan to separately estimate impacts for a large number of subgroups. Foremost among these subgroups are impacts:

- Among existing voucher families;
- Among waiting list families; and
- By site.

In addition, we will examine impacts among a large number of subgroups defined by potentially moderating family-level characteristics. These potential moderators are listed in Appendix 3.

For each subgroup, we will estimate impacts using the same estimation model for the full sample. In order to test for differences in impacts between two complementary subgroups, we will add a treatment-subgroup characteristic interaction term to the model (with the subgroup characteristic also included on its own in the model). The test for statistical significance of the coefficient on the interaction term will serve as the statistical test for differences in impacts.⁴¹ For moderators with more than two subgroups (e.g., race/ethnicity with Black non-Hispanic, Hispanic, White non-Hispanic, and potentially other race/ethnic categories), we will have a treatment interaction term for every category included in the model. A joint F-test on the coefficients of the interaction terms will serve as the statistical test for variation in impact according to the moderator.

7.2.5 Multiple Hypothesis Testing

Because of the large number of outcomes and subgroups, the impact analysis will need to address the multiple comparisons problem—that is, the possibility of finding a statistically significant impact by chance, due to the large number of tests being conducted. To address this problem in the Rapid Cycle Evaluation Report, we will specify a single outcome—whether a family is leased up in an opportunity area six months after random assignment—as the primary outcome. Since we are equally interested in the impact on this outcome for existing voucher families, waiting list families, and the pooled sample of both of these types of families, we will

⁴⁰ Strengths and weaknesses of various methods of handling missing data are described in Allison, P.D. (2002), *Missing data*, Thousand Oaks, CA: Sage University Paper No. 136, and in Puma, M. J., Olsen, R. B., Bell, S. H., and Price, C. (2009.), *What to do when data are missing in group randomized controlled trials* (NCEE 2009-0049), Washington, DC: National Center for Education Evaluation and Regional Assistance, Institute of Education Sciences, U.S. Department of Education.

⁴¹ For three characteristics, in order to maximize precision, we will test for moderation in another manner. These three characteristics—income, census tract poverty rate, and length of residence in the metropolitan area—have continuous measures with thresholds that may vary in meaning across sites. The alternate statistical tests for variation will examine the coefficient on an interaction term of the treatment indicator and the continuous measure of the moderating characteristic.

have three confirmatory statistical tests in the analysis for the Rapid Cycle Evaluation Report—one for each sample. We will use a multiple comparisons procedure to adjust the *p*-values from these three tests. Because of the highly correlated nature of the Phase 1 primary hypothesis (one pooled test and two subgroups' tests within the pooled sample), we will use a Westfall-Young resampling approach to adjust the *p*-values. (Westfall et al. 2011; Gubits et al. 2018). By taking account of correlations between hypothesis tests, we anticipate this approach will provide greater statistical power than other standard procedures such as Benjamini-Hochberg or Bonferroni-type methods.

For the Phase 1 Process and Impact Evaluation Report, we will add a fourth statistical test to the set of confirmatory tests. This test will be the test of statistical significance on the estimated impact on residence in opportunity areas two years after random assignment for all families, another confirmatory outcome.⁴²

In each report, the “headline” findings—the first findings mentioned in the executive summary and all summary descriptions of results—will be those from the confirmatory statistical tests. The reports will acknowledge the large number of non-confirmatory statistical tests and will note that no multiple comparisons adjustment has been made for these tests.

Exhibits 7-4 and 7-5 show the expected sample sizes and minimum detectable effects for the confirmatory outcomes to be presented in the Rapid Cycle (Exhibit 7-4) and Phase 1 Process and Impact Evaluation Report (Exhibit 7-5).

Exhibit 7-4. Expected Sample Sizes and Minimum Detectable Effects (MDEs) for CMRS Versus Control Comparison, Rapid Cycle Evaluation Report

Outcome	Sample	Sample Size CMRS	Sample Size Control	Minimum MDE ^a (percentage pts)	Maximum MDE ^b (percentage pts)
New lease-up in an opportunity area in first 12 months after RA	All families	1,227	1,192	3.6	4.3
New lease-up in an opportunity area in first 12 months after RA	Existing voucher families	1,117	1,117	3.8	4.5
New lease-up in an opportunity area in first 12 months after RA	Waiting list families	110	75	13.4	16.0

Note: Sample sizes include all families enrolled through June 2023, including families enrolled during the Phase 1 Pilot. This timing allows for a minimum of 6 months of follow-up after random assignment (RA). Should Phase 1 Pilot enrollments be excluded due to lack of fidelity at any particular site, the MDEs will be somewhat larger. MDEs assume 80% power for a two-tailed test significant at the 10% level and that 15 percent of the control group will lease-up in opportunity areas, as was the case in CMTO (Bergman et al. 2020). If control proportion is lower than 15 percent, the MDE will be smaller. For existing voucher families, a new lease-up is defined as leasing-up with a voucher in a move to a new unit. For waiting list families, a new lease-up is defined as a lease-up with a voucher. For families with less than one year of observation since RA, the observation window will be the maximum time observed (6 to 11 months).

^a Minimum MDE is the MDE with the Bonferroni-Holm step-down adjustment for multiple hypothesis testing when this statistical test has the highest *p*-value among the set of confirmatory tests. This is equivalent to no adjustment for multiple hypothesis testing.

⁴² After initial moves to opportunity areas, the distinction between existing voucher family and a waitlist family becomes less salient. Therefore, we will only include the impact on residence in an opportunity area at two years after random assignment among the *pooled sample of all families* in the confirmatory set of tests.

^b Maximum MDE is the MDE with the Bonferroni-Holm step-down adjustment for multiple hypothesis testing when this statistical test has the lowest p-value among the set of confirmatory tests. This is equivalent to a full Bonferroni adjustment for multiple hypothesis testing.

Exhibit 7-5. Expected Sample Sizes and Minimum Detectable Effects (MDEs) for CMRS Versus Control Comparison, Phase 1 Process, and Impact Evaluation Report

Outcome	Sample	Sample Size CMRS	Sample Size Control	Minimum MDE ^a (percentage pts)	Maximum MDE ^b (percentage pts)
New lease-up in an opportunity area in first 12 months after RA	All families	3,607	3,542	2.1	2.6
New lease-up in an opportunity area in first 12 months after RA	Existing voucher families	3,393	3,393	2.2	2.7
New lease-up in an opportunity area in first 12 months after RA	Waiting list families	214	149	9.5	11.8
Number of months residing in an opportunity area during first 24 months after RA	All families	762	730	N/A	N/A

Note: Sample sizes include all families enrolled through September 2024 (including families enrolled during the Phase 1 Pilot). The sample sizes for the one-year (or two-year) outcome allow for a minimum of 6 months (or 2 years) of follow-up after random assignment (RA). MDEs assume 80% power for a two-tailed test significant at the 10% level and that 15 percent of the control group will lease-up in opportunity areas, as was the case in CMTO (Bergman et al. 2020). If control proportion is lower than 15 percent, MDE will be smaller. For existing voucher families, a new lease-up is defined as leasing-up with a voucher in a move to a new unit (i.e., a unit different from the one they occupied when they enrolled). For waiting list families, a new lease-up is defined as any lease-up with a voucher. For the one-year outcome, families with less than one year of observation since RA will have an observation window that is the maximum time observed (so 6 to 11 months). We do not currently have data which would allow us to calculate the MDEs for the two-year outcome on exposure to opportunity areas.

^a Minimum MDE is the MDE with the Bonferroni-Holm step-down adjustment for multiple hypothesis testing when this statistical test has the highest p-value among the set of confirmatory tests. This is equivalent to no adjustment for multiple hypothesis testing.

^b Maximum MDE is the MDE with the Bonferroni-Holm step-down adjustment for multiple hypothesis testing when this statistical test has the lowest p-value among the set of confirmatory tests. This is equivalent to a full Bonferroni adjustment for multiple hypothesis testing.

In Section 2.3, we discussed the possibility of increasing the number of waiting list families who enroll in the study beyond the minimum 111 required. In addition to increasing the overall sample of waiting list families, larger samples of waiting list families at each PHA could also allow for site-level estimates of impact on waiting list families. Enrollment of 143 waiting list families into the Demonstration (102 mobility vouchers plus 41 controls) at a particular site would allow for the detection of an impact of 20 percentage points, while a site sample of 226 waiting list families would allow for the detection of an impact of 15 percentage points.

If enrollment of all families is less than expected, the minimum detectable effects will be larger than those shown in Exhibits 7-4 and 7-5. The minimum detectable effects increase by a factor equal to the square root of the reciprocal of the sample size factor. For example, if actual enrollment is only one-half of the expected total, the resulting minimum detectable effects would be the minimum detectable effects under the expected enrollment multiplied by the square root of two, or about 1.41, yielding minimum detectable effects that are 41 percent larger. Exhibit 7-6 shows the minimum detectable effects if the actual number of families enrolled is only one-half the expected number. Based on these MDEs, it appears that if the Demonstration reaches 50 percent of the enrollment targets, the study will be adequately powered to detect policy-relevant impacts for the full sample and existing voucher families on their own but might be somewhat underpowered for waiting list families on their own, especially for the Rapid-Cycle Evaluation

report. Fortunately, the study's enrollment targets for waiting list families should not be difficult to achieve.

Exhibit 7-6. Sample Sizes and Minimum Detectable Effects (MDEs) for CMRS Versus Control Comparison If Enrollment is 50 Percent of the Expected Level

Outcome	Sample	Sample Size CMRS @50% Enrollment	Sample Size Control @50% Enrollment	Minimum MDE ^a (percentage pts) @50% Enrollment	Maximum MDE ^b (percentage pts) @50% Enrollment
Rapid Cycle Evaluation Report					
New lease-up in an opportunity area in first 12 months after RA	All families	614	596	5.1	6.1
New lease-up in an opportunity area in first 12 months after RA	Existing voucher families	559	559	5.3	6.3
New lease-up in an opportunity area in first 12 months after RA	Waiting list families	55	38	18.9	22.6
Phase 1 Process and Impact Evaluation Report					
New lease-up in an opportunity area in first 12 months after RA	All families	1,804	1,771	3.0	3.7
New lease-up in an opportunity area in first 12 months after RA	Existing voucher families	1,697	1,697	3.0	3.8
New lease-up in an opportunity area in first 12 months after RA	Waiting list families	107	75	13.4	16.7
Number of months residing in an opportunity area during first 24 months after RA	All families	381	365	N/A	N/A

Note: See notes for Exhibits 7-4 and 7-5.

7.2.6 Descriptive Analyses and Other Non-Impact Analyses

In addition to the impact analyses, we plan to conduct several descriptive and non-experimental analyses in order to address questions for which we will not have a purely experimental framework. The first two of these analyses are related to examining the effect of the offer of CMRS on the duration of housing searches for families with housing vouchers. The third analysis addresses research question #6: Which site- and household-level factors affect the success of CMRS in facilitating moves to opportunity areas? A fourth analysis looks at differences in moves to opportunity areas conditional on leasing-up or moving with a voucher.

- The first analysis addresses the descriptive question of how long it takes for families offered CMRS to lease-up after they are referred to mobility-related services. For families who lease-up, we will measure the period of time from RA to lease-up. For treatment group families, this period will measure the time for pre-move services to be delivered. We will compare this

time to the time that it takes for control group members to lease-up. Because not all waiting list families will successfully lease-up and not all existing voucher families will move, this length of time is not defined for the full experimental sample. And because CMRS services may affect whether families lease-up or move at all, the comparison of time to lease-up between treatment and control groups cannot be interpreted as the causal impact of the CMRS offer. Nevertheless, we expect it to be an informative descriptive analysis. We plan to show separate histograms of the duration from RA to lease-up for treatment and control groups within the whole sample, the existing voucher and waitlist family subgroups, and by site. We also plan to separately examine this length of time for families who lease-up in opportunity areas and for those who lease-up in other areas.

- The second analysis is very similar to the first, with the main difference that the length of time will be measured from voucher issuance through lease-up, and only for waiting list families. This will allow for a descriptive examination of time differences that are not due to the length of any mobility-related services provided before voucher issuance. We plan to conduct this analysis only for waitlist families since the CMRS services will affect the timing of voucher issuance for existing voucher families in the treatment group. We expect this analysis will be informative to PHAs and policymakers since RA is not an element of regular PHA operations. Knowing whether search times after issuance appear to be lengthened by the provision of mobility-related services will be valuable to future program designers.
- The third analysis partially addresses research question #6: Which site- and household-level factors affect the success of CMRS in facilitating moves to opportunity areas? Because we are not able to randomly assign site-level characteristics to sites, nor families to sites, nor family characteristics to families, we cannot definitively conclude whether any site-level or family-level characteristic is responsible for greater success in achieving moves to opportunity areas. Instead, we can only say whether any of the family-level characteristics, such as race/ethnicity and other characteristics, appear to correlate with a greater likelihood of leasing-up in an opportunity area. To examine these correlations, we plan to estimate three prediction models. The first, for the CMRS treatment sample only, will regress lease-up in an opportunity area six months after RA on family-level characteristics, including characteristics of their baseline neighborhood. The second model will have the same regressors but will be estimated for the Control sample only. These models will include site fixed effects. From the regression results, we will learn which characteristics are associated with moves to opportunity areas when holding other characteristics constant. In order to formally test whether coefficients are different between the treatment and control samples, we will estimate a third prediction model for the pooled sample, with each characteristic entered on its own and interacted with an indicator for assignment to treatment. The test for statistical significance of the coefficient on the interaction terms will be the formal test for difference in correlation between the treatment and control groups.

Unfortunately, the limited number of sites will not allow for a multivariate analysis of *site-level* characteristics. We will have only nine site-level impacts, which is insufficient to simultaneously investigate the several site-level characteristics that might affect the size of impacts. We plan to perform some descriptive analyses of the nine site-level impacts. These analyses will plot the nine impact estimates against a few explanatory factors, such as the degree of racial residential segregation and tightness of housing market. If a pattern emerges for any factor, we will look for consistent evidence in the qualitative data.

- The fourth analysis examines how successful CMRS was in facilitating moves to opportunity areas conditional on (for waiting list families) leasing-up and (for existing voucher families) moving with a newly issued voucher. The rates of moves to an opportunity area may be considerably higher conditional on moving with a voucher than the unconditional rates. However, comparing the conditional rates between treatment and control groups is a non-experimental comparison because the treatment may affect the proportion who make any move with a voucher. We plan to present the unadjusted conditional rates separately for waitlist and existing voucher families for the treatment and control families. We will present these conditional rates for the full sample and by site.

7.2.7 Addressing No-Shows and Crossovers

In the CMTO study (Bergman et al. 2020), 98 percent of families assigned to treatment received search assistance. Given this result, we expect that only a very small proportion of the families offered CMRS will receive no services (i.e., will be “no-shows” in evaluation parlance). We also expect that few (if any) families assigned to the control condition will be able to access services that are delivered as part of CMRS (i.e., “crossover” into the treatment condition).⁴³ Thus, the estimated intent-to-treat (ITT) impacts will be only slightly smaller in magnitude than the effect of CMRS on the families who receive CMRS. Therefore, we do not plan on separately estimating treatment-on-the-treated (TOT) effects.⁴⁴

7.2.8 Phase 2 Analysis

Phase 2 analyses will estimate the impacts of CMRS versus Control with the full five-year enrollment sample and estimate the impacts of various SMRS packages versus the control group and various SMRS packages versus CMRS. We expect that the Demonstration will implement three different SMRS packages, with each site implementing only one of the three SMRS packages and each package being implemented in three sites.

Exhibit 7-7 presents the minimum detectable effects expected at the time of the Phase 2 analysis on having a new lease-up in an opportunity area during the first 12 months after random assignment.

Exhibit 7-7. Expected Sample Sizes and Minimum Detectable Effects (MDEs) for Phase 2 Analysis of Having a New Lease-Up During the First 12 Months After Random Assignment

Comparison	Sample Size CMRS	Sample Size SMRS	Sample Size Control	MDE (percentage pts)
CMRS vs. Control	6,903		6,801	1.5
3-site SMRS package vs. Control		1,078	1,086	3.8
3-site SMRS package vs. CMRS	1,099	1,078		5.3

Note: All sample sizes are for combined sample of existing voucher families and waiting list families. MDEs assume 80 percent power for a two-tailed test significant at the 10 percent level and variances based on Control proportion of 15 percent and CMRS proportion of 50 percent.

⁴³ We will be unable to check this expectation, however, without a follow-up survey to collect data on service receipt by control families. The greatest risk of families assigned to the control condition receiving mobility services will be in the event that a PHA introduces a mobility services program for all HCV families. PHAs are not prohibited from this during the Demonstration period but must obtain HUD approval before doing so.

⁴⁴ For the CMTO Demonstration, the TOT impact for the full sample would be the ITT impact divided by 0.98, which means that the TOT impact is only two percent larger than the ITT impact.

If enrollment of families is less than expected, the minimum detectable effects will be larger than those shown in Exhibit 7-7. As described in Section 7.2.5, the minimum detectable effects increase by a factor equal to the square root of the reciprocal of the sample size factor.

The Phase 2 analysis will also examine whether the effect of a particular three-site SMRS package versus the control group is different from that of another three-site SMRS package. At the target sample sizes, the minimum detectable difference in effects will be 5.6 percentage points.

7.2.9 Future Impact Analysis

After the phases of the study that focus on the impacts of CMRS and SMRS on moves to opportunity areas, HUD would like to examine the impact of being offered CMRS or SMRS on a range of long-term outcomes, including health and economic outcomes of children and adults. These long-term outcomes will be measured up to 30 years after random assignment in order to capture the long-term effects of neighborhoods on children.

8. Cost Study

This chapter describes how we will conduct the Cost Study. The research questions motivating the Cost Study are listed in Exhibit 8-1.

Exhibit 8-1. Cost Study Research Questions

8. What are the costs associated with CMRS and SMRS?

- (a) What are the costs of individual service components?
- (b) How do the costs of each component compare to its perceived effectiveness?

Note: The question numbers are taken from Appendix 5, which provides a complete list of research questions.

8.1 Purpose of the Cost Analysis

The cost analysis will determine the cost of CMRS in Phase 1 of the Demonstration and of one or more SMRS bundles being tested in Phase 2 of the Demonstration. In Phase 1, we will estimate the per-treatment group member cost of CMRS and will also develop cost estimates for individual services. The total per-treatment group member CMRS cost will be compared to impact findings from the impact analysis—a cost-effectiveness comparison—in the Phase 1 Process and Impact Evaluation Report. In the Rapid Cycle Evaluation Report, the services-level cost estimates will serve as an input to designing the SMRS service bundle(s). Together with conclusions from the process analysis, the service-level cost estimates will be weighed in a qualitative determination of whether some services appear more cost-effective than others.

8.2 Cost Data

Information from multiple data sources will be blended to develop cost estimates. Some input amounts, valuations, or counts of individuals served are available from only one data source. Others will be observed or measured in multiple data sources. Our prior experience has shown that having multiple confirmations of an input's value can improve our understanding of a data element, leading to more accurate overall estimates.⁴⁵ Exhibit 8-2 lists the data sources for the cost analysis that we have identified to date.

We will collect the PHA invoices provided to HUD and itemized expenditure reports from PHAs and service providers. The goal is to use these data, along with interviews with staff, to allocate costs to service components. We plan to collect cost information in separate cost interviews with PHA and service provider staff in 2023 and 2025. The data collection during the first round will cover the first full year of enrollment, including each site's six-month Phase 1 Pilot. This will allow a full year of implementation of CMRS services, including a six-month period in which the program was operating at capacity. (Our goal is to understand costs when operating at capacity.

⁴⁵ For example, organizations' expenditure reports and monthly invoices to HUD will include actual itemized, program-level expenditures on household financial assistance. These amounts will provide accurate totals and allow the calculation of the share of total program expenditures that such financial assistance represents and per-participant assistance when combined with the number of families participating in the program. Data on household financial assistance will also be available in transaction-level administrative data. This data will provide detail on both the average and variability in assistance received for families that receive assistance. Finally, reviewing the expenditure reports and discussing the administrative records during interviews with organization leadership will confirm data accuracy, check our understanding of the data, and provide insight into contextual detail like how assistance amounts and eligibility are determined.

We include the Phase 1 Pilot period because sites may have learned about resources required to provide interventions during this period, which may provide a clearer understanding of the costs at capacity.) Since most site's Pilots will be starting in August, September, or October of 2022, the cost data collection for most sites will cover the years ending August, September, and October 2023.

Exhibit 8-2. Data Elements Used for the Cost Analysis

Data Element(s)	Source	Anticipated Uses	Collection
<ul style="list-style-type: none"> Total expenditures Expenditures by category, (i.e., staffing, financial assistance, landlord incentives, administration, other) 	Itemized expenditure reports and monthly invoices to HUD	<ul style="list-style-type: none"> Starting point to estimate total costs Provides expenditure information for estimating service-specific costs 	<ul style="list-style-type: none"> Grantees submit quarterly or monthly to HUD; HUD shares with research team as needed
<ul style="list-style-type: none"> Study enrollment counts over time Frequency and approximate duration of specific services Amount and purpose of each financial assistance amount 	Study enrollment and service delivery tracking tool records	<ul style="list-style-type: none"> Estimate specific financial assistance costs Estimate share of staff time and other inputs used to provide each service Determine counts of families using each service 	<ul style="list-style-type: none"> Study enrollment database export Data export for sites using tool provided by the study Request data export from sites electing to use their own tool
<ul style="list-style-type: none"> Confirmation and contextual review of data elements from financial records, study Enrollment Tool, and service delivery tool Allocation of staff time and other inputs across CMRS components Any inputs not included in administrative data source Any similar services accessed by study members 	Interviews and documentation from interviews (e.g., staff lists)	<ul style="list-style-type: none"> Confirm and contextualize information from financial records and administrative data <ul style="list-style-type: none"> How best to split costs across services Determine control group service receipt and inputs (or relative intensity) of business-as-usual condition Understand relationships among partners providing mobility-related services Fill in any gaps in identifying and valuing inputs used to provide mobility-related services 	<ul style="list-style-type: none"> Videoconference or phone surveys that coincide with site visits
Housing assistance payments	HUD administrative data (PIC 50058 data)	<ul style="list-style-type: none"> Calculate impacts on housing assistance payments 	<ul style="list-style-type: none"> HUD 50058 data; if needed, may collect from sites to supplement.

The second round of data collection for costs will occur in the first quarter of 2025. This will allow data collection for the latest year of program implementation with enough lead time to complete analysis and reporting within the timeline for the Phase 1 Process and Impact Evaluation Report.

After reviewing the PHA invoices and expenditure reports, we will conduct interviews by videoconference or phone with PHA finance and program staff. The purpose of the interviews will be to clarify any questions we have about the information included in the invoices and reports, as well as estimate the costs of CMRS services funded by other sources that should be included in the analysis. The invoices should include detailed information on the tenant's

financial assistance and financial incentive payments made to landlords. Our intention is to bring expenditure reports, monthly invoices, and Service Delivery Tool summary reports to the cost interview to review as part of the discussion.

8.3 Conceptualizing Costs

The cost analysis will use an “ingredients method” approach⁴⁶ that builds up cost estimates by identifying all inputs used to provide a program or intervention and assigning a monetary value to each input.⁴⁷ These input-level costs are then summed to relevant sub-totals, in this case to individual service estimates and to an overall total cost. Inputs are typically grouped by category to aid data collection and to provide context when presenting costs. High-level input categories planned for data collection in the cost analysis are as follows.

- Staffing
- Financial assistance and incentives
- Other direct program costs
- Materials and incidental costs
- Organizational indirect and overhead costs

Costs will be expressed as per-unit costs in two distinct ways: per-treatment-group member and per-household receiving services. Per-treatment-group member costs are allocated across all families that are eligible to receive services, whether or not they receive any. Per-treatment-group member costs are comparable to impact estimates that include the whole sample of Demonstration participants. Per-household receiving services costs are allocated across only families that actually receive services. These costs are useful for estimating costs of expanding access to services and characterizing the intensity of the intervention. (As described later in this section, we are also measuring cost per opportunity move.)

We will develop a cost estimate of the combined CMRS bundle of services and also for each component service within the CMRS that is comprehensive in including all inputs used to provide the service.⁴⁸ Additionally, net costs will be estimated as an incremental amount—the additional cost of services received by the treatment group relative to any similar services accessed by the control group. This added approach makes cost estimates comparable to impact estimates, which measure the effect of the additional services provided to the treatment group

⁴⁶ Levin et al. (2017) provide a textbook treatment of the ingredients approach to cost analysis.

⁴⁷ In this analysis, we value inputs based on actual expenditures or PHA or service provider’s typical costs, where possible. If that information is not available, we will determine an alternate estimate for the valuation, for example from average valuation of the same input at other sites or from external estimates of the value of the input.

⁴⁸ For the combined CMRS bundle we will express both the per-treatment-group member cost and the per-household receiving services cost. For individual component cost estimates, the cost per household receiving the individual component service is most useful, since it can be multiplied by the fraction of households receiving the service to estimate the overall cost of offering the component.

member. Estimating incremental costs allows the analysis to calculate the costs to achieve the observed impact.

Finally, as described below, we will estimate the cost per opportunity move.

8.4 Analysis of Cost Data

This section outlines our plans for estimating costs and cost-effectiveness.

8.4.1 Estimating Per-Person Costs

We will estimate per-person costs as shown below. Exhibit 8-3 gives an example cost calculation table to illustrate how these costs will be estimated.

What is the Cost Per Treatment Group Member of CMRS (All Services Combined)?

To estimate the cost per treatment group member, we add all input costs of providing CMRS (during a given period) and divide by the number of treatment group members that are eligible to receive CMRS services. Each household assigned to receive CMRS will be counted as a single treatment group member for this analysis.

$$\text{Cost per treatment group member of CMRS} = \frac{\text{Comprehensive Cost of CMRS}}{\text{Number of Treatment Group Members}}$$

Inputs for which we will add up the costs include staffing, direct assistance, administrative costs, facilities costs, transportation, materials, and other. The number of treatment group members will be determined from the Enrollment Tool.

Sometimes, in adding up varying costs, we will have information on the cost per service provided—for example, the average financial assistance provided to families receiving services. This information is useful as a description of how CMRS was implemented and could be replicated, so we will also report these as cost per treatment group member receiving services. To convert to the cost per treatment group member (which is comparable to the impact estimates of effectiveness as described below), the cost per service provided is multiplied by the share of treatment group members receiving services.⁴⁹ (This includes a zero cost for those who did not take up the services.) Exhibit 8-3 shows columns for this type of calculation.

What is the Cost Per Treatment Group Member of Each Individual Service?

We will also estimate the cost per treatment group member of each individual service and the related cost of services to families receiving services. These component-level cost estimates are important inputs to comparing the various services and designing an SMRS bundle. These costs are estimated using the same equation as in the prior section, except now, only costs associated with the specific service component are included in the numerator. The following equation shows how component cost per individual receiving services is calculated.

$$\text{Component Cost} = \frac{\text{Annual Cost of Service Component}}{\text{Number of Individuals Receiving Service}}$$

⁴⁹ This is equivalent to using the number of families receiving services as the denominator in the equation above rather than the number of treatment group members.

To calculate the cost per treatment group member of each individual service, the number of treatment group members is used in the denominator instead of the number of individuals receiving services.

Exhibit 8-3. Example Cost Calculation Table

Cost Component	CMRS Costs			Business as Usual (Voucher families) Costs			Net Cost (g)=(c)-(f)
	Average Cost per Person Receiving CMRS Service (a)	Percent of Treatment Group Receiving Service (b)	Cost per Treatment Group Member (c) = (a) * (b)	Average Cost per Person Receiving non-CMRS Service (d)	Percent of Control Group Receiving Service (e)	Cost per Control Group Member (f) = (d) * (e)	
Staff Assistance							
Pre-move							
Housing search							
Family assistance (costs for staff time providing assistance)							
Landlord recruitment	Total cost of landlord recruitment	Total number of treatment group members	(a)/(c)	BAU opportunity area landlord recruitment	Total households receiving a voucher (new or move)	(d)/(e)	
Post-move services							
Tenant Financial Assistance							
Security deposits							
Application fees							
Transportation costs							
Other costs							
Landlord Incentives							
Holding fee							
Lease-up bonus							
Damage mitigation fund							
Total Direct Costs							
Indirect Cost Effects (analyzed separately from direct costs)							
Housing Assistance Payments							
Total Costs (Direct + Indirect)							

^a Unlike the other services listed, landlord recruitment will not typically be directed to a specific household. Costs per voucher family receiving landlord recruitment services are best defined as the total cost of landlord services divided by the total number of treatment group members.

Determining which costs are associated with each specific service component is straightforward for some cost inputs (e.g., financial assistance amounts are clearly allocated to their respective service components), while other cost inputs will need to be allocated across multiple services. For example, staff time and associated salaries must be allocated across service components. To do so, we will analyze the length of service episodes that is input into service delivery tools, and we will develop allocation estimates in consultation with site leadership that manages the staff providing the services.

For services that extend over a period of time (several months), we can estimate a monthly cost of receiving the services, with the numerator being the annual cost and the denominator being the sum of the number of individuals receiving services each month in the year. We estimate the component cost by multiplying the monthly cost by the average number of months of services that individuals receive.

Estimating Costs of Control Group Services and Estimating Net Costs

The PHAs or other community organizations may provide similar assistance to all issued voucher families, including those provided to control group members. For example, some PHAs may provide security deposit assistance to all voucher families. Some may provide staff assistance to non-CMRS participants, though presumably at a lower level.

During the cost interviews with PHA finance and program staff discussed earlier in this chapter, we will specifically ask about these services. Based on what we learn, we will develop an approach, utilizing data that sites can provide, for estimating the costs of these services that can be applied to control group members who have been issued vouchers that parallels, as closely as possible, the approach used for treatment group costs.

The net cost per program group member is equal to the cost per treatment group member, less the cost per control group member. Net costs are important to calculate in a cost analysis because they are required when comparing costs to impact estimates. This is because the impact estimate reveals the effect of the intervention relative to the status quo. The net cost estimates the cost of the intervention relative to the status quo.

Additional Analyses

We will analyze the costs separately for each site and anticipate some variation in the cost estimates. While all sites will offer the core components (staff assistance, tenant financial assistance, landlord incentives, and housing assistance payments), there will be variations in how they implement the services, the cost of the services in the community, and the take-up rate.

In addition to examining costs by site, we can also conduct separate cost estimates for key subgroups that emerge from the implementation and impact studies.⁵⁰ The difference in cost estimates will be driven by different take-up of the various service components and different levels of financial assistance provided to treatment group members. Such estimates will be available only for services for which subgroup take-up can be observed (e.g., housing assistance costs and financial assistance provided to households) but not for landlord outreach interventions and any other component that is not provided to a specific family.

8.4.2 Cost Effectiveness

We will examine two elements of cost effectiveness.

What is the Cost Per Family Receiving CMRS Services?

First, the cost per family receiving services provides insight into the intensity of services provided and what it costs to achieve the outcome of the family receiving services. This is estimated the same as the costs in the prior section, but with families receiving services in the denominator instead of treatment group members.

What is the Cost Per Treatment Group Member Move to an Opportunity Area?

Second, we will analyze the cost per opportunity move. Bergman et al. (2020) estimated the average cost per opportunity move by dividing the average per person cost by the percent of treatment group members that moved to an opportunity area. We will use this metric to characterize cost effectiveness to facilitate comparison to this and results from other literature. We will also calculate the cost per net opportunity move, where the denominator is based on the impact estimate from Impact Study Research Question 1 (Exhibit 7-1). That is, we will use the impact estimate from the effect on moves outcome to calculate the number of additional moves to an opportunity area that were caused by CMRS. The total cost of CMRS will be divided by this estimate of additional opportunity moves due to CMRS. We will also calculate this value for each site and for any subgroups for which both cost and impact estimates are available to provide a range of observed cost effectiveness across sites and subgroups.

Using the Cost Analysis to Develop SMRS

The cost per family receiving services will be available as a measure to assess good candidates for inclusion in SMRS, as will the estimated costs of different CMRS components. Since the impact estimates in the Rapid Cycle Evaluation Report will be based on only six months of enrollment in the Demonstration, the cost per additional treatment group member move to an opportunity area should be treated as preliminary and not relied upon too heavily in selecting SMRS.

⁵⁰ The cost analysis will also note relevant results from the Impact and Process Studies about how costs to participants of participating in the voucher program are affected by CMRS and SMRS. Specifically, results around differences in search times (Impact Study Research Question 3. (b) and 12. (b)) and documented challenges making moves to opportunity areas (Process Study Research Question 5. (c)) will provide some insight into how participants' time and resources are affected. Additionally, analysis of Housing Assistance Payments and rents will indicate whether tenant payments are affected by the interventions. However, costs to participants in search times and challenges making moves will not be monetized, and costs to participants will not be included in the cost or cost-effectiveness analyses, which are focused on the direct costs of the intervention.

The next chapter provides more details on how the study team will develop its recommendations for SMRS in Phase 2.

9. Selecting SMRS, Phase 2 Research and Beyond

This chapter describes how the study team will select SMRS interventions to test in Phase 2, and briefly summarizes what will happen in Phase 2 of the Demonstration and in an extended follow-up period.

9.1 Identifying SMRS Options to Test in Phase 2

As part of the Rapid Cycle Report, the study team will identify one or more SMRS bundles to test in Phase 2. The study team's recommendations will be based primarily on an integration of findings from the Process Study and Cost Study. Findings from the Impact Study may also be relevant for the reasons noted below.

- **Process Study:** Through the Process Study, we will learn what the mobility services staff, PHAs, households, and landlords believe are the most important mobility-related services provided by the CMRS. We will also examine whether any specific services are strongly correlated with moving to an opportunity area, though these results may be difficult to interpret.
- **Cost Study:** Through the Cost Study, we will develop estimates of the costs per family served and the share of these costs attributable to each of the identified components of the CMRS.

Ideally, the SMRS would comprise those services that reflect the best value when cost and perceived impact are considered together. That is to say, the SMRS bundle(s) should represent a selected bundle of services that is less costly than the CMRS while including as many as possible of the services perceived to be effective.

If we assume that the CMRS will increase by 30 percentage points the share of households that move to an opportunity area, and that the SMRS will have half this level of impact, we will have enough statistical power to test up to three SMRS interventions, each with three sites. However, if CMRS has much more or much less of an impact than this preliminary assumption, we may be able to test more, or we may need to test fewer bundles. It will be important to consider the findings from the Impact Study as well in making recommendations for the SMRS.

The study team does not enter the study with any preconceived notions of which services should be tested in the SMRS phase. We plan to follow where the evidence leads in developing recommendations to present to HUD and the Expert Panel. If HUD and the Expert Panel have priorities for interventions to test in Phase 2, we will consider those in conjunction with the evidence in making recommendations about options to test. We will also consider evidence developed in other contexts, such as CMTD, which is studying two SMRS bundles and could provide useful information about the potential impact of certain SMRS approaches.

The ultimate decision about which SMRS to test will be made by HUD in partnership with the study team. The study team recognizes that the final decision may be guided by considerations of cost-effectiveness and by policy considerations regarding which interventions are most important to test in the SMRS.

9.2 Phase 2

In Phase 2 of the Evaluation, the study team will support an expansion of the Demonstration to three-way random assignment (CMRS, SMRS, and control) and collect data allowing for an assessment of the effectiveness of SMRS, measured against both the control condition and the CMRS, and longer-term follow-up on the effects of CMRS. Phase 2 will focus on research questions 1 through 12 (See Appendix 5), which include all of the research questions addressed earlier in the Process Study, Impact Study, and Cost Study chapters above, plus similar research questions focused on SMRS only and on a comparison of CMRS and SMRS.

This RDDCAP will be updated to reflect more information about Phase 2 once the SMRS interventions have been selected and an Evaluation Contractor has been engaged for Phase 2.

9.3 Long-Term Follow-Up

Beyond Phase 2, HUD anticipates an extended period of follow-up analysis for up to 30 years after families enroll in the Demonstration. As Chetty, Hendren, and Katz (2016) demonstrated, the effects of prior mobility Demonstrations like MTO could be observed in data many years later when children reached adulthood. The period of performance for Phase 1 and Phase 2 of the Demonstration are not long enough to measure these kinds of long-term outcomes. As placeholders for future long-term follow-up, we have included the research questions shown in Exhibit 9-1 related to the impacts of being offered CMRS and SMRS on a range of child and adult outcomes.

Exhibit 9-1. Long-Term Research Questions

14. What is the effect of the offer of CMRS and SMRS on housing outcomes (to be collected at a later point in time)?
(a) What are the effects of an offer of CMRS / SMRS on the quality and safety of the housing occupied by voucher families?
(b) What are the effects of an offer of CMRS/ SMRS on housing stability?
15. What is the effect of the offer of CMRS and SMRS on adult outcomes (to be collected at a later point in time)?
(a) What are the effects of an offer of CMRS/SMRS on adults' health outcomes?
(b) What are the effects of an offer of CMRS/SMRS on adults' employment and earnings outcomes?
16. What is the effect of the offer of CMRS and SMRS on child outcomes (to be collected at a later point in time)?
(a) What are the effects of an offer of CMRS/SMRS on the development of young children?
(b) What are the effects of an offer of CMRS/SMRS on children's health outcomes?
(c) What are the effects of an offer of CMRS/SMRS on the educational outcomes of children?
(d) What are the effects of an offer of CMRS/SMRS on the employment and educational outcomes of young adults who were young children when their family enrolled in the Demonstration?

Note: The question numbers are taken from Appendix 5, which provides a complete list of research questions.

To ensure that future research could fully explore these long-term outcomes of interest, the consent form signed by heads of household at the time of enrollment defines the follow-up period as up to 30 years from the date of enrollment. The consent form explains that giving informed consent allows HUD and other evaluators to use the personal information (name, date of birth, and social security number (SSN)) collected under this study to do two things:

1. Match study data to other administrative databases maintained by government agencies and proprietary vendors, and
2. Maintain contact with study participants to support the long-term follow-up survey or interview work.

We describe some of the administrative and primary data that might be collected by longer-term studies in Sections 9.3.1 and 9.3.2. In Section 9.4, we describe a concept for a mobility research collaborative that would provide support for outside researchers who wish to conduct research involving Demonstration families in the future.

9.3.1 Longer-Term Administrative Data Collection

Prior to collecting any of the long-term administrative data, HUD or future evaluators will need to negotiate with the appropriate agencies to gain access to the data. In most instances, this will involve entering into data use agreements with the agencies that maintain the data of interest. Those agreements will detail the process for matching identifiers from study participants to the administrative data records, for transferring data between organizations, efforts to minimize access to only those who need it, and procedures to ensure that the data are handled and stored securely. The agreements will also detail how long the data can be used and the data destruction plans. Finally, costs incurred with obtaining the data will be specified in the agreement.

The following are examples of the types of data that may be collected in the future to track outcomes and impacts of the Demonstration:

- **PHA information.** Household composition: name, address, phone number, date of birth, and SSN for all household members. Information about the household's total income, assets, rent, and participation in any other programs that are run by the housing authority.
- **Government Agency records.** Information on
 - Neighborhood characteristics and quality data from U.S. Census Bureau.
 - Employment status, individual and household earnings, and household composition from the Internal Revenue Service (IRS).
 - Employment status and earnings data from the U.S. Department of Health and Human Services' Office of Child Support Enforcement's National Directory of New Hires (NDNH) database.
 - Health care/insurance data such as Medicaid or Medicare from the U.S. Department of Health and Human Services' Center for Medicaid and Medicare Services (CMS).
 - Government benefits such as the Supplemental Nutrition Assistance Program (SNAP) administered through the U.S. Department of Agriculture's Food and Nutrition Service (FNS), or Temporary Assistance for Needy Families (TANF) administered through the U.S. Department of Health and Human Services (HHS).
 - Disability benefits and death records through the Social Security Administration Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), and National Death Index databases.

- **Other Data.** Includes information on
 - College enrollment, graduation, and credential receipt for adult household members from the National Student Clearinghouse; school records data from local school districts for child household members.
 - Contact information for residential mobility analysis and maintaining contact with heads of household and credit ratings from credit bureaus and other organizations as part of financial well-being.

9.3.2 Longer-Term Primary Data Collection

Despite the array of outcomes that can be measured using the administrative data sources described above, many outcomes can only be measured with direct interaction with heads of household, other adult household members, and children. The consent forms note that participating households may be invited to participate in future surveys or interview data collection efforts and that participation in such efforts would be voluntary. Such primary data collection could consist of the following:

- **Contact update requests.** In order to maximize the likelihood that researchers will be able to reach participating households for future data collection efforts, it is important to periodically request updated contact information. Administrative data searches may be useful for obtaining updated contact information for some households, mainly for those who are still receiving housing assistance. To maximize the ability of future evaluators to equally locate participating households in the treatment and control groups, long-term data collection plans should include periodic requests asking participants to confirm or update their contact information. Contact update requests should also include a request for the name, address, phone, email, and relationship to the head of household for up to three people. These three people should not live with the study participant but should always know how to reach them.
- **Follow-up surveys or interviews.** Follow-up surveys or additional in-depth interviews may ask about household member experiences with the Demonstration, participation in education and training, work status, financial well-being, living situation, health, and child and adult well-being. The consent form indicates that future data collection requests may be possible, that participation in future surveys or interviews will be voluntary, and that participating households will not face any repercussions if they choose not to participate.

Any future data collection requirements will require review and approval by an Institutional Review Board to ensure the protection of study participants and (if funded by the federal government) approval by the Office of Management and Budget to ensure that the data collection does not pose undue burden on participants.

9.4 Housing Voucher Mobility Research Collaborative

The study team has developed a proposal for a Housing Voucher Mobility Research Collaborative that would provide a structure for interfacing with outside researchers who wish to conduct research that builds on and extends learning from the Demonstration. The Collaborative, to be funded by philanthropy, would not fund new research—outside researchers would need to bring their own funding—but would support the following:

- Work by the study team to coordinate with researchers interested in conducting additional data collection related to the sharing of Demonstration data (and any new data collected)
- Work by the study team with HUD to develop a process to obtain approval of new research proposals and research teams to ensure the research does not interfere with the Demonstration or overly burden Demonstration participants.
- The intellectual work of Collaborative members to develop and guide a policy relevant research agenda, sharpen ideas, align study questions, share findings and instruments, and strengthen communication across researchers.
- The convening of a resident advisory board to provide input on proposed and planned research; and
- Work to disseminate findings from the Demonstration.

We envision that Collaborative members would include researchers who plan to conduct research that builds on the Demonstration as well as selected members of the study team, including the researchers serving as individual consultants to the study team.

Funding is currently being sought for the Collaborative from outside sources.

10. Data Security

The data collection that supports the Impact Study includes administrative and survey data with personally identifiable information (PII) collected about and from the families participating in the Demonstration. PII that will be collected includes participant names, dates of birth, and SSNs for the head of household and all members living in the household who agree to participate in the Demonstration. The study team will also collect the addresses, phone numbers, and email addresses for the head of household, other adult household members who agree to participate in the study, and secondary contacts-- friends or family of the head of household who will always know how to reach them. Much of the PII is collected in order to match individuals in HUD administrative data to PHA administrative data and family survey data to measure the outcomes of families enrolled in the Community Choice Demonstration. The PII is also collected to identify participants for HUD and other researchers to use in future evaluations and to facilitate the tracking of study participants who become hard to locate through other means. Participant names will be collected by the study team to help select respondents for the Process and Cost Study interviews. The study team will perform data analysis using files that contain pseudo-identifiers, rather than PII.

10.1 Data Security Protocols and Procedures for the Abt Study Team

The Abt study team has been authorized to collect study data under the federally mandated Privacy Impact Assessment process, which governs the collection of personally identifiable information (PII) data, and the [Systems of Record Notice](#) (Housing Choice Voucher (HCV) Mobility Demonstration Evaluation Data Files, PD&R/RRE 09), which authorizes data collection and dictates rules for data handling. The study team prepared a Data Security Plan (DSP), as required by Abt's IT Security Team, to guide how the study team will ensure safe data handling and storage, in accordance with the SORN. The DSP describes each data source to be collected, as well as the team's plans for secure data transfer, storage, and destruction. It also documents how the data will be shared for analysis, including privacy and data security provisions. The study team will enter into data use agreements with HUD and the PHAs, as needed. The study team will also sign non-disclosure agreements with all other study team members with whom it will share data. All data sharing between Abt and other study team members will occur via Abt's MOVEit system, and the data will be subsequently stored on their secure data platforms. Data that includes PII will be stored on Abt Associates' secure Analytic Computing Environment (ACE3) and cloud-based systems. Abt Associates uses Federal Information Processing Standards to protect all instances of sensitive information during storage and transmission. Any data stored electronically will be secured in accordance with the most current National Institute of Standards and Technology (NIST) requirements. Exhibit 10-1 shows a brief overview of the data sources and the secure data access, transfer, and storage procedures for each.

Exhibit 10-1. Overview of Data Transfer and Storage, by Source

Data Source	Transfer and Storage Overview
Enrollment Tool and Service Tool data	Data will be entered directly into the Amazon Web Services (AWS)-hosted tool maintained by the Tool development contractor and will be stored securely in the cloud-based system. Access to the Enrollment Tool is password protected and requires two-factor authentication, and only approved staff will receive a secure login to access the tool. These data will be backed up on a regular basis to safeguard against system failures or disasters. Data extracted from the tools and all other data collected for this study will reside within the secure ACE3 Data Collection Platform maintained by Abt.
HUD 50058 data within IMS/PIC	The study team will submit a match file with personal identifiers (this includes full name, date of birth, gender, SSN, address, and, if applicable, PHA ID number) to HUD via HUD's secure FTP site. We will submit one record for each member of the household to ensure that we capture data for all who have consented to participate in the study. After matching the match file to its HUD 50058 data, HUD will submit the matched data set to its secure site for the study team to extract, analyze, and store within Abt's secure ACE3 Data Collection Platform.
Data from PHAs	Abt will collect data directly from PHAs via its MOVEit system or the PHA's preferred secure FTP transfer. This will include data described in the preceding chapters, as well as data on service delivery for PHAs that choose not to use Abt's Service Delivery Tool. Abt will download, analyze, and store the data within its secure ACE3 Data Collection Platform.
Data Sharing among the Evaluation Contractors	All data sharing between Abt and other study team members (Urban Institute, MEF Associates, Social Policy Research Associates, and individual consultants) will occur via Abt's MOVEit system, and the data will be subsequently stored within the secure ACE3 Data Collection Platform.
Accurint®	The study team will collect study participant contact information for the sample through in-depth Accurint® searches. Accurint is a commercial address verification service. We will use the following participant level variables: (1) name, (2) date of birth, (3) SSN, (4) mailing address, and (5) phone number(s). Transfer will be done through Accurint's secure Web portal managed by LexisNexis.

The study team will restrict access to PII only to those who need it. The project manager will request Abt's IT Department to authorize specific members of the team to access a study folder with PII, stored securely on Abt's ACE3 platform on an as needed basis. Authorized users of PII will be those who are responsible for preparing extracts for administrative data matching and analysis, for preparing match files for address updating through Accurint®, and all Enrollment Tool users (including site liaisons). Site liaisons will be able to see names in the Enrollment Tool and Service Tool but will not be able to see SSNs or dates of birth. Authorized users will be required to use a secure dual-factor authentication process to access the data. All study team staff participate in data security training at least annually and participate in project- and role-based security training as their position warrants.

10.2 PHA Staff: Protocols for the Protection of Personally Identifiable Information (PII)

The following restrictions will apply to the access of data by PHA and mobility services staff. Data collected through the Enrollment Tool and Service Tool will only be accessible by PHA and mobility services staff who work directly with families. The study team will provide all PHA and mobility services staff who work with families with training on how to use the Enrollment and Service Tools, how to ensure the families' data are secure, and what to do in the event of a suspected data incident.

Communication Guidelines. PHA and mobility services staff should follow their organization's communication procedures for sharing information about families. PHA staff and mobility services staff may communicate about families using the same procedures that they would normally follow when delivering PHA services.

PHA staff must never share any personal information about families (not even a family's name) in an email, text, or voicemail with Abt study team members. Instead, these communications should reference the PHA household ID number or the unique number created for the study. Both numbers are available in the Service and Enrollment Tools. If PHA staff need to communicate sensitive information to the study team, such as PII or information about the family's circumstances, they should email the Abt study team and request a call-back.

Secure Use of the Enrollment and Service Tools. PHA and mobility services staff will be instructed to follow these best practices when using the Enrollment and Service Tools:

- Create complex, hard-to-guess passwords, and never share your username or password with anyone else.
- Store passwords out of sight, preferably in a locked drawer, and do not post them on or near your computer where they might be found.
- Log out of the Enrollment Tool or Service Tool and lock your computer when leaving the room, even for a few minutes.

If PHA staff have any questions or concerns about sharing information and maintaining data security, they should call the study helpdesk for assistance at 1-888-239-5156. If a PHA staff member departs the agency or ceases to do work that requires access to the Enrollment and/or Service Tool, PHA staff should notify the Abt study team within 24 hours of the change in status. The Abt study team will disable access to the tool(s) for that staff member.

10.2.1 Secure Handling of Paper Documents

In rare instances, PHA staff will need to collect enrollment data, such as Informed Consent Forms, Household Rosters, Baseline Information Forms, Baseline Surveys,⁵¹ or meeting attendance rosters, on paper. Paper documents must be stored in a locked cabinet in a locked office. The office where the documents are stored should only be accessible to authorized staff.

PHA staff will send paper copies of the Baseline Information Form, Household Roster, and Baseline Survey to Abt on a monthly basis using the prepaid shipping labels provided by the study team (or if that is not possible, using another trackable shipping service). PHA staff should retain copies of all of these documents in a securely locked cabinet until the study team confirms receipt and verification of the *original* documents; at this point, PHA staff should shred all of the copies of the documents.

10.2.2 Incident Reporting

If a PHA staff or mobility services staff member accidentally discloses or misplaces PII, PHA staff must notify the study team. Abt will immediately notify the COR and the Contracting

⁵¹ The study team anticipates that the Household Roster, Baseline Information Form and/or Baseline Survey may be completed on paper rather than online on a rare basis.

Officer of any known or suspected incident, or any unauthorized disclosure of the information contained in the system(s) to which the contractor has access.

10.2.3 Data Destruction

The study team will submit all data collected via the Enrollment Tool (baseline information form, baseline survey, consent status, random assignment status, and contact information), the Service Tool (CMRS and SMRS service provision records), and administrative data to HUD at the end of the contract, March 31, 2026. All analytic data and code, as well as restricted access and public use datasets, will also be submitted to HUD at the end of the contract.

The study data in Abt's possession will be destroyed in accordance with the records management practices outlined in the contract and System of Records Notice (SORN). Paper data files will be sent to Abt Associates after they are processed. The paper forms will be stored securely in locked file cabinets until they are destroyed 13 months after the end of the contract. Electronic data files will be deleted from long-term storage 13 months after the end of the contract and deleted from backup storage three years after the final contract bill. Secure delete will be used to delete all PII or sensitive data. HUD will retain the data for 30 years after the informed consent date. We will not submit raw qualitative interview data to HUD. Our partners will destroy the raw qualitative interview data prior to the end of their contract.

Appendix 1: Neighborhood and Housing Unit Outcomes

Exhibit A1-1. Outcomes related to Neighborhood and Housing Unit Characteristics at 6 months after random assignment

OUTCOME
A. Neighborhood (Census Tract) Characteristics
Distance
Mean Commute Time in 2000(?) (minutes) % Commute < 15 minutes Distance to City Hall of Largest City in Commuting Zone (Miles)
Resident demographics
% Black (recent ACS) % Hispanic (recent ACS) % White (recent ACS) % Foreign-Born (recent ACS) % Married (2020) % of Children with Single parents (ACS) % >= college Education (ACS) Population Density (2020, # people per square mile)
Tract Income and Other Characteristics
Median HH Income (ACS) % Labor Force Participation (2020) % Poverty (ACS) Median Home Value (2020) Census Mail Response rate Theil Index of Racial Segregation # Jobs for No HS Degree, 1 mile Radius
Tract Opportunity Indicators from Opportunity Atlas data)
Predicted Mean Individual Income Rank (p=25) Predicted Mean Household Income Rank (p=25) Predicted Mean Household Income Rank for White Children (p=25) Teenage Birth Rate for Women (p=25) Incarceration Rate (p=25)
Other Indices of Opportunity
Brandeis COI Overall Child Opportunity Score Brandeis COI Educational Subscore Brandeis COI Health/Environment Subscore Brandeis COI Social/Economic Opportunity Subscore HUD transit Index Environmental Health Index

Appendix 2: List of Impact Analyses

Exhibit A2-1. CMRS Versus Control Impact Estimation Analyses for the Rapid Cycle Evaluation Report (RCE), the Phase 1 Process and Impact Evaluation Report (P1), and the Phase 2 Final Report (P2)

Sample	Pooled Sites/ By Site	Type of Statistical Test	Reporting Timepoint (Expected Sample Size)		
OUTCOME: New Lease-Up in an Opportunity Area in First 12 Months after RA					
Full sample	Pooled sites	Impact within sample	RCE(2,419)*	P1(7,149)*	P2(13,704)
Existing voucher families	Pooled sites	Impact within subgroup	RCE(2,234)*	P1(6,786)*	P2(12,803)
New voucher families	Pooled sites	Impact within subgroup	RCE(185)*	P1(363)*	P2(901)
Existing vs. New	Pooled sites	Variation across subgroups		P1(7,149)	P2(13,704)
Full sample	By site	Impact within site	RCE(269)	P1(794)	P2(1,523)
Full sample	By site	Variation across sites	RCE(2,419)	P1(7,149)	P2(13,704)
Existing voucher families	By site	Impact within site	RCE(248)	P1(754)	P2(1,423)
Existing voucher families	By site	Variation across sites	RCE(2,234)	P1(6,786)	P2(12,803)
New voucher families	By site	Impact within site		P1(40)	P2(100)
New voucher families	By site	Variation across sites		P1(363)	P2(901)
[Other Subgroups] within Existing voucher families	Pooled sites, Existing voucher families only	Impact within subgroup		P1(varies)	P2(varies)
[Other Subgroups] within Existing voucher families	Pooled sites, Existing voucher families only	Variation across subgroups		P1(6,786)	P2(12,803)
[Other Subgroups] within New voucher families	Pooled sites, New voucher families only	Impact within subgroup		P1(varies)	P2(varies)
[Other Subgroups] within New voucher families	Pooled sites, New voucher families only	Variation across subgroups		P1(363)	P2(901)
[Other Subgroups] within Full sample	Pooled sites	Impact within subgroup	RCE(varies)	P1(varies)	P2(varies)
[Other Subgroups] within Full sample	Pooled sites	Variation across subgroups	RCE(2,419)	P1(7,149)	P2(13,704)
OUTCOME: Number of months residing in an opportunity area during first 24 Months (Phase 1)/36 Months (Phase 2) after RA					
Full sample	Pooled sites	Impact within sample		P1(1,492)*	P2(8,634)
Existing voucher families	Pooled sites	Impact within subgroup		P1(1,320)	P2(8,096)
New voucher families	Pooled sites	Impact within subgroup		P1(172)	P2(538)
Existing vs. New	Pooled sites	Variation across subgroups		P1(1,492)	P2(8,634)
Full sample	By site	Impact within site		P1(166)	P2(959)
Full sample	By site	Variation across sites		P1(1,492)	P2(8,634)
Existing voucher families	By site	Impact within site		P1(147)	P2(900)
Existing voucher families	By site	Variation across sites		P1(1,320)	P2(8,096)
New voucher families	By site	Impact within site			P2(60)
New voucher families	By site	Variation across sites			P2(538)

APPENDIX 2: LIST OF IMPACT ANALYSES

Sample	Pooled Sites/ By Site	Type of Statistical Test	Reporting Timepoint (Expected Sample Size)		
[Other Subgroups] within Full sample	Pooled sites	Impact within subgroup		P1(varies)	P2(varies)
[Other Subgroups] within Full sample	Pooled sites	Variation across subgroups		P1(1,492)	P2(8,634)
OUTCOMES: Neighborhood Characteristics at 12 months after RA and Residing in an opportunity area at 12 months after RA					
Full sample	Pooled sites	Impact within sample		P1(5,251)	P2(13,704)
Existing voucher families	Pooled sites	Impact within subgroup		P1(4,900)	P2(12,803)
New voucher families	Pooled sites	Impact within subgroup		P1(351)	P2(901)
Existing vs. New	Pooled sites	Variation across subgroups		P1(5,251)	P2(13,704)
Full sample	By site	Impact within site		P1(583)	P2(1,523)
Full sample	By site	Variation across sites		P1(5,251)	P2(13,704)
OUTCOME: Share who moved by 12 months after RA					
Existing voucher families	Pooled sites	Impact within subgroup	RCE(2,234)	P1(6,786)	P2(12,803)
Existing voucher families	By site	Impact within site	RCE(248)	P1(754)	P2(1,423)
Existing voucher families	By site	Variation across sites	RCE(2,234)	P1(6,786)	P2(12,803)
[Other Subgroups] within Existing voucher families	Pooled sites, Existing voucher families only	Impact within subgroup		P1(varies)	P2(varies)
[Other Subgroups] within Existing voucher families	Pooled sites, Existing voucher families only	Variation across subgroups		P1(6,786)	P2(12,803)
OUTCOME: Leased up by 12 months after RA					
New voucher families	Pooled sites	Impact within subgroup	RCE(185)	P1(363)	P2(901)
New voucher families	By site	Impact within site		P1(40)	P2(100)
New voucher families	By site	Variation across sites		P1(363)	P2(901)
[Other Subgroups] within New voucher families	Pooled sites, New voucher families only	Impact within subgroup		P1(varies)	P2(varies)
[Other Subgroups] within New voucher families	Pooled sites, New voucher families only	Variation across subgroups		P1(363)	P2(901)
OUTCOME: Receives housing assistance at 12 months after RA					
Full sample	Pooled sites	Impact within sample		P1(5,251)	P2(13,704)
Existing voucher families	Pooled sites	Impact within subgroup		P1(4,900)	P2(12,803)
New voucher families	Pooled sites	Impact within subgroup		P1(351)	P2(901)
Existing vs. New	Pooled sites	Variation across subgroups		P1(5,251)	P2(13,704)
Full sample	By site	Impact within site		P1(583)	P2(1,523)
Full sample	By site	Variation across sites		P1(5,251)	P2(13,704)

APPENDIX 2: LIST OF IMPACT ANALYSES

Sample	Pooled Sites/ By Site	Type of Statistical Test	Reporting Timepoint (Expected Sample Size)	
OUTCOME: HAP amount (no HAP=\$0) at 12 months after RA				
Full sample	Pooled sites	Impact within sample		P1(5,251) P2(13,704)
Existing voucher families	Pooled sites	Impact within subgroup		P1(4,900) P2(12,803)
New voucher families	Pooled sites	Impact within subgroup		P1(351) P2(901)
Existing vs. New	Pooled sites	Variation across subgroups		P1(5,251) P2(13,704)
Full sample	By site	Impact within site		P1(583) P2(1,523)
Full sample	By site	Variation across sites		P1(5,251) P2(13,704)

Note: The impact estimation sample sizes for outcomes measured in or by 12 months after random assignment assume that the Rapid Cycle Evaluation Report will include all families enrolled through June 2023 (including families enrolled during the Pilot), the Phase 1 Process and Impact Evaluation Report will include families enrolled through September 2024 (including families enrolled during the Pilot), and the Phase 2 Final Report will include families enrolled over the entire study enrollment period ending on April 30, 2027. For families for whom we observe less than 12 months after random assignment (RA) at the data collection point, the outcomes will be defined using the maximum number of months (6 to 11) observed. For outcomes measured precisely at 12 months after random assignment, the Phase 1 Process and Impact Evaluation Report will include families enrolled through March 2024 (including families enrolled during the Pilot), and the Phase 2 Final Report will include families enrolled over all five years of enrollment. For outcomes measured two years after random assignment, the Phase 1 Process and Impact Evaluation Report will include families enrolled through March 2023 (including families enrolled during the Pilot), and the Phase 2 Final Report will include families enrolled through April 2026 (including families enrolled during the Pilot).

*: Confirmatory hypothesis test that will have p-value adjusted by multiple comparison procedure.

Appendix 3: List of Subgroups

Exhibit A3-1. Subgroups Defined by Potentially Moderating Characteristics

Type of Characteristic	Potentially Moderating Characteristic
	<ul style="list-style-type: none"> • Subgroup 1 • Subgroup 2
HEAD OF HOUSEHOLD CHARACTERISTICS	
	<p>Race/ethnicity</p> <ul style="list-style-type: none"> • Black, non-Hispanic • White, non-Hispanic • Hispanic (any race) • (Potentially other racial/ethnic groups if sample sizes are sufficient)
	<p>Country of birth</p> <ul style="list-style-type: none"> • Born outside U.S. • Born inside U.S.
	<p>Primary Language</p> <ul style="list-style-type: none"> • English is not Primary Language • English is Primary Language
	<p>Length of residence in metro area*</p> <ul style="list-style-type: none"> • Less than 5 years in metro area • 5-14 years in metro area • 15 or more years in metro area
	<p>Baseline residence in Opportunity Area</p> <ul style="list-style-type: none"> • Started in opportunity area • Did not start in opportunity area
	<p>Income*</p> <ul style="list-style-type: none"> • Lower tercile of site • Middle tercile of site • Upper tercile of site
	<p>Education (may add categories after assessing baseline data)</p> <ul style="list-style-type: none"> • No college • Some college or more
	<p>Employment</p> <ul style="list-style-type: none"> • Working full-time (30 hours or more per week) at baseline • Working part-time (1-29 hours or more per week) at baseline • Not working at baseline
	<p>Childcare</p> <ul style="list-style-type: none"> • Uses childcare • Does not use childcare
	<p>Transportation</p> <ul style="list-style-type: none"> • Have access to a car that runs • Does not have access to a car that runs

Type of Characteristic	Potentially Moderating Characteristic
	<ul style="list-style-type: none"> • Subgroup 1 • Subgroup 2
PERCEPTIONS ABOUT NEIGHBORHOOD AND MOVING	
	<p>Satisfaction with current neighborhood</p> <ul style="list-style-type: none"> • Satisfied with Current Neighborhood • Unsatisfied/indifferent with Current Neighborhood
	<p>Neighborhood safety</p> <ul style="list-style-type: none"> • Feels neighborhood is safe • Feels neighborhood is unsafe
	<p>Outlook on staying in neighborhood</p> <ul style="list-style-type: none"> • Sure wants to leave current neighborhood • Sure wants to stay in current neighborhood or Indifferent
	<p>Outlook on being racial minority in neighborhood</p> <ul style="list-style-type: none"> • Comfortable about moving to a racially different neighborhood • Uncomfortable/indifferent moving to a racially different neighborhood
	<p>Outlook on ability to pay moving expenses</p> <ul style="list-style-type: none"> • Sure could pay moving expenses without program • Not sure could pay moving expenses without program
	<p>Amount of pressure to move soon</p> <ul style="list-style-type: none"> • A lot of pressure to move soon • Not a lot of pressure to move soon
CHILDREN CHARACTERISTICS	
	<p>Age of child</p> <ul style="list-style-type: none"> • Any child aged 13 or older • All children under age 13 • Age of youngest child • Age of oldest child
	<ul style="list-style-type: none"> • Number of children • More than 2 children • 1 or 2 children
NEIGHBORHOOD CHARACTERISTICS	
	<p>Neighborhood poverty*</p> <ul style="list-style-type: none"> • Baseline neighborhood below 80 percent of site-level median poverty rate • Baseline neighborhood 80-120 percent of site-level median poverty rate • Baseline neighborhood above 120 percent of site-level median poverty rate

Note: For most potentially moderating characteristics, the statistical test for variation in impacts will test for difference in impact between subgroups. For starred characteristics, in order to maximize precision, the statistical test for variation will examine the coefficient on an interaction term of the treatment indicator and a continuous measure of the moderating characteristic.

Appendix 4: Expert Panel Members

An Expert Panel will provide guidance to the study team in four separate meetings over the course of the Demonstration:

- A virtual two-hour meeting in the Planning Period of the study for the study team to provide information to the Panel about the Demonstration and for the Panel to provide input into the Opportunity Area definitions and feedback on the services to be included within the CMRS intervention.
- A second two-and-a-half-hour virtual meeting in the Planning Period of the study to provide input on the Draft Research Design, Data Collection, and Analysis Plan to allow us to incorporate Panel feedback into the final Plan. Among other questions, we will seek input into the study's research questions, overall research design, and general analysis plan.
- An in-person meeting in Year 4 after the Pilot to provide feedback on the draft Rapid Cycle Evaluation and the SMRS Treatment Plan design.
- A virtual meeting in Year 5 to review a draft of the final Process Study and Impact Study report.

The individuals listed below were invited to join the Expert Panel and have agreed to participate.

Exhibit A4-1. Members of the Expert Panel

Name	Background
1. Lisa Bates	Lisa Bates is an Associate Professor at Portland State University in the Toulan School of Urban Studies and Planning and is a Portland Professor in Innovative Housing Policy. She is also affiliated with PSU's Black Studies Department. Her scholarship focuses on housing and community development policy and planning, and her research and practice aim to build new models for emancipatory planning practices and to dismantle institutional racism.
2. Raj Chetty	Raj Chetty is the William A. Ackman Professor of Economics at Harvard University and Director of Opportunity Insights, a Harvard-based policy group working to develop scalable solutions to minimize barriers to economic opportunity. He is one of the principal investigators of the CMTO study.
3. Brendan Goodwin	Brendan Goodwin is Director of Rental Assistance for the Massachusetts Department of Housing and Community Development. In this capacity, he oversees the state's HCV and mobility programs. (NOTE: After initially serving on the Expert Panel in 2021, Mr. Goodwin moved to HUD, and therefore became ineligible to continue on the Expert Panel. A replacement will be identified before the next Expert Panel Meeting scheduled for 2023.)
4. Brenda Hicks	Brenda Hicks is the Director of the Center for Housing Counseling & Education at Housing Opportunities Made Equal of Virginia, Inc. (HOME). She oversees a housing mobility program.
5. Odis Johnson, Jr.	Odis Johnson, Jr. is the Bloomberg Distinguished Professor of Social Policy & STEM Equity; Director, Institute in Critical Quantitative, Computational, & Mixed Methodologies; Executive Director, Hopkins Center for Safe and Healthy Schools; Senior Fellow, 21st Century Cities Initiative; Johns Hopkins University School of Education; Dept. of Health Policy and Management, Bloomberg School of Public Health; Dept. of Sociology, Krieger School of Arts and Sciences.
6. Jeffrey Kling	Jeffrey King is the Research Director of the Congressional Budget Office (CBO). An economist, he previously served as Associate Director for Economic Analysis at CBO from 2009 through 2019, as a senior fellow at the Brookings Institution and a faculty member at Princeton University. He co-authored the principal studies of the Moving to Opportunity program.

APPENDIX 4: EXPERT PANEL MEMBERS

Name	Background
7. M Kathleen Moore	M Kathleen Moore is a Management Analyst at the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation. Among other areas, she has expertise in voucher portability, HCV and rental market discrimination, and working with housing authority data.
8. Craig Pollack	Craig Pollack is the Katey Ayers Endowed Associate Professor in the Department of Health Policy and Management at the Johns Hopkins Bloomberg School of Public Health and the School of Nursing. Dr. Pollack investigates social determinants of health, with an emphasis on housing policies. His current work examines the health effects of housing mobility programs that enable families to move from areas of concentrated poverty.
9. Taneeka Richardson	Taneeka Richardson relocated her family to Howard County, Maryland, in 2005 with the assistance of the Baltimore Housing Mobility Program (BHMP), and subsequently worked as a mobility counselor at BHMP for 2 ½ years.
10. Barbara Sard	Barbara Sard was the Vice President for Housing Policy at the Center on Budget and Policy Priorities before her retirement. Prior to her role at the Center, she served as Senior Advisor on Rental Assistance to HUD Secretary Shaun Donovan.

Appendix 5: Community Choice Demonstration Research Questions

This evaluation will address 16 research questions. The first eight questions will be addressed in Phase 1, focused on the impacts of CMRS. Phase 2 will add an investigation of the next five research questions (through RQ13) and examine the impacts of SMRS, as compared both to controls and to CMRS. The final three questions lay the groundwork for long-term research that is anticipated in the future but not yet fully defined.

In the research questions, the term “waiting list families” refers to households selected off of the waiting list and enrolled in the Demonstration, and the term “existing voucher families” refers to households that were already living in a unit supported by a Housing Choice Voucher when they enrolled in the Demonstration.

Exhibit A5-1. Community Choice Demonstration Research Questions

Research Question	Type
1. For voucher families with children, what is the effect of offering CMRS on moves to an opportunity area during the 12 months following random assignment? (a) What is the effect for existing voucher families? (b) What is the effect for waiting list families? (c) Does impact vary by site or (d) for waiting list vs. existing voucher families? (e) Does impact vary based on household characteristics or (f) the characteristics of the families' origin neighborhood?	Confirmatory Secondary
2. For voucher families with children, what is the effect of offering CMRS on the duration of residency in an opportunity area in the 24 months following random assignment? (a) What is the effect for existing voucher families? (b) What is the effect for waiting list families? (c) Does impact vary by site or (d) for waiting list vs. existing voucher families? (e) Does impact vary based on household characteristics or (f) the characteristics of the households' origin neighborhood?	Confirmatory Secondary
3. How does the offer of CMRS affect the following secondary outcomes: (a) The characteristics of families' rental units and tracts? (b) Search times? (c) Lease-up rates for waiting list families? (d) Share of existing voucher families who move to any area? and (e) When existing voucher families move relative to enrollment in the study?	Secondary
4. Which services within the CMRS appear most effective in facilitating moves to opportunity areas? (a) Which services do voucher families, PHAs, mobility services providers, and landlords each report as most or least effective? (b) Does this vary by site? (c) Which services appear most effective for waiting list vs. existing voucher families?	Exploratory
5. What challenges do: (a) PHAs and mobility services providers' experience implementing CMRS and SMRS? (b) Existing and waiting list voucher families experience accessing CMRS and SMRS or (c) making moves to opportunity areas? (d) Landlords report with CMRS and SMRS?	Exploratory

APPENDIX 5: COMMUNITY CHOICE DEMONSTRATION RESEARCH QUESTIONS

Research Question	Type
6. Which site- and household-level factors affect the success of CMRS and SMRS in facilitating moves to opportunity areas?	Exploratory
7. How do implementation and fidelity to model vary across sites?	Exploratory
8. What are the costs associated with CMRS and SMRS? <ul style="list-style-type: none"> (a) What are the costs of individual service components? (b) How do the costs of each component compare to its perceived effectiveness? 	Secondary
9. For voucher families with children, what is the effect of offering a particular SMRS package on moves to an opportunity area during the 12 months following random assignment? <ul style="list-style-type: none"> (a) What is the effect for existing voucher families? (b) What is the effect for waiting list families? (c) Does impact vary by site, (d) for waiting list vs. existing voucher families, or (e) the different bundles of SMRS? (f) Does impact vary based on household characteristics or (g) the characteristics of the households' origin neighborhood? 	Confirmatory Secondary
10. For voucher families with children, what is the effect of offering a particular SMRS package on the duration of residency in an opportunity area in the 24 months following random assignment? <ul style="list-style-type: none"> (a) What is the effect for existing voucher families? (b) What is the effect for waiting list families? (c) Does impact vary by site, (d) for waiting list vs. existing voucher families, or (e) the different bundles of SMRS? (f) Does impact vary based on household characteristics or (g) the characteristics of the households' origin neighborhood? 	Confirmatory Secondary
11. Are families offered SMRS less likely to move to opportunity areas than similar families who are offered CMRS in the 12 months following random assignment? <ul style="list-style-type: none"> (a) Does impact vary for waiting list vs. existing voucher families? (b) Does impact vary by site or (c) the different bundles of SMRS? 	Confirmatory Secondary
12. How does the offer of SMRS affect the following secondary outcomes: <ul style="list-style-type: none"> (a) The characteristics of families' rental units and tracts? (b) Search times? (c) Lease-up rates for waiting list families? (d) Share of existing voucher families who move to any area? and (e) When existing voucher families move relative to enrollment in the study? 	Secondary
13. How do the costs compare with the expected long-term benefits implied by impact estimates and long-term effects estimated by prior studies?	Exploratory
14. What is the effect of the offer of CMRS and SMRS on housing outcomes to be collected at a later point in time? <ul style="list-style-type: none"> (a) What are the effects of an offer of CMRS / SMRS on the quality and safety of the housing occupied by voucher families? (b) What are the effects of an offer of CMRS/ SMRS on housing stability? 	Exploratory
15. What is the effect of the offer of CMRS and SMRS on adult outcomes to be collected at a later point in time? <ul style="list-style-type: none"> (a) What are the effects of an offer of CMRS/SMRS on adults' health outcomes? (b) What are the effects of an offer of CMRS/SMRS on adults' employment and earnings outcomes? 	Exploratory

APPENDIX 5: COMMUNITY CHOICE DEMONSTRATION RESEARCH QUESTIONS

Research Question	Type
<p>16. What is the effect of the offer of CMRS and SMRS on child outcomes to be collected at a later point in time?</p> <ul style="list-style-type: none">(a) What are the effects of an offer of CMRS / SMRS on the development of young children?(b) What are the effects of an offer of CMRS / SMRS on children's health outcomes?(c) What are the effects of an offer of CMRS / SMRS on the educational outcomes of children?(d) What are the effects of an offer of CMRS / SMRS on the employment and educational outcomes of young adults who were young children when their family enrolled in the Demonstration?	Exploratory

Notes: CMRS = comprehensive mobility-related services; SMRS = selected mobility-related services. Waiting list families are families selected from the voucher waiting list. Existing voucher families are families that already have a voucher at the time they enroll in the Demonstration.

Appendix 6: Fidelity Monitoring Checklist

Site liaisons, please complete this Checklist after calls with PHA staff as laid out in Chapter 5, Section 5.1. Checklists should be cumulative in nature during the Pilot to capture a complete history of implementation for each PHA. With each new entry, please add a new line in each key topic area with the date of the call. At the end of the Pilot period, the Checklist will reflect the prior month's activities. Once the Pilot is complete, please create a new Checklist each month.

Share the updated Checklist with the study leadership team. Summaries of the information in this Checklist will be provided to HUD along with a summary of total enrollments by site and group on a monthly basis.

Exhibit A6-1. Fidelity Monitoring Checklist

I: Introduction	
Date of Monitoring Call (use this format for all dates: XX/XX/XXXX)	Date:
Site Name:	
Pilot Launch Date: Full Implementation Launch Date:	Pilot Launch Date: Full Implementation Launch Date:
Individuals Participating in Meeting	Name _____ Organization _____ Name _____ Organization _____ Name _____ Organization _____
II: General Demonstration Updates	
This column provides an overview of the data site liaisons will be able to review monthly prior to their call with PHA staff.	This column provides a guide to the topics site liaisons should discuss with PHA staff to ensure that they have a clear understanding of how things are going for PHAs and where additional support may be needed for each key topic area.
Outreach and Recruitment	
<p>Monthly: Site liaisons will receive a report from the PHAs that provides high level metrics on outreach activities:</p> <ul style="list-style-type: none"> • number of invitation letters sent, • number who attend a Demonstration briefing, • number who proceed to enrollment meeting, • number enrolled, each month. <p>These cumulative reports will provide planned and actual outreach metrics by family type—existing voucher families and waiting list families.</p> <p>Quarterly: The study team leadership will review those outreach reports to look at outreach and enrollment progress over a three-month span to see the planned versus actual recruitment and enrollment rates. As needed, the study team leadership will provide specific questions for site liaisons to follow-up on or join the next call if needed.</p>	<p>Site liaisons: Provide a high-level descriptive overview of how the site's outreach and recruitment are going. What is working well? What challenges are they experiencing?</p> <ul style="list-style-type: none"> • <i>How is recruitment going at the site? Are you experiencing any challenges? What supports might be helpful for you? What if anything is working particularly well?</i> • <i>How are the Demonstration briefings going? Are families that sign up showing up? Are most of them moving forward to enrollment meetings? Is the group format working?</i> • <i>Describe any changes or planned changes to the recruitment or marketing strategies detailed in the Recruitment and Enrollment Plan since last report. Request copies of any planned changes for review by the study team leadership prior to implementing them.</i> <p>Site liaisons: Find out how the PHA staff feel communication materials are working.</p> <ul style="list-style-type: none"> • <i>Has the process of translating outreach and recruitment materials into other languages worked well to meet the needs of those with limited English proficiency?</i> • <i>Does the PHA anticipate needing to revise their current outreach and recruitment materials? If so, what is the estimated timing for that?</i>

Enrollment	
<p>Site liaisons: Please fill in five-year enrollment targets from REP:</p> <ul style="list-style-type: none"> • Pilot Enrollment Target <p>Total: _____</p> <p>Existing voucher families: _____</p> <p>Waiting list families: _____</p> <ul style="list-style-type: none"> • Full Implementation Enrollment Target <p>Total: _____</p> <p>Existing voucher families: _____</p> <p>Waiting list families: _____</p> <p>Site liaisons: Please fill in monthly enrollment targets from REP:</p> <ul style="list-style-type: none"> • Pilot Enrollment Target <p>Total: _____</p> <p>Existing voucher families: _____</p> <p>Waiting list families: _____</p> <ul style="list-style-type: none"> • Full Implementation Enrollment Target <p>Total: _____</p> <p>Existing voucher families: _____</p> <p>Waiting list families: _____</p> <p>Prior to each monitoring call: Site liaisons will review the Enrollment Tool report summarizing the total number of families in the Enrollment Tool—the total number enrolled (randomly assigned), the total number in various stages of enrollment, and for those who have stopped before completing enrollment, which stage they stopped in.</p> <p>Quarterly: The study team leadership will review those enrollment reports to look at progress over a three-month span to see how the planned versus actual enrollment rates compare. As needed, study team leadership will provide specific questions for site liaisons to follow-up on or join the next call if needed.</p>	<p>Site liaisons: Is PHA on track to meet enrollment targets?</p> <ul style="list-style-type: none"> • If no, try to learn why enrollment may be lagging and what the study team leadership can do to help. • If families are not moving forward from Demonstration briefings to complete the Individual Enrollment Meetings, try to find out why. • If families are choosing not to enroll after Informed Consent, try to find out why.
Individual Enrollment Meeting Data Collection	
<ul style="list-style-type: none"> • Monthly: The study team leadership will review the Baseline Information Data: If more than 20% of responses are preferred not to answer/don't know, they will instruct the site liaisons to remind the PHA of the importance of collecting this data and ask if the PHA staff has any sense of why families are choosing not to answer. • Monthly: The study team leadership will review the Baseline Survey Data: If more than 20% of responses are preferred not to answer/don't know, they will ask if the PHA staff have any sense 	<p>Site liaisons: Provide a high-level descriptive overview of how the site's enrollment meeting process is going. What is working well? What challenges are they experiencing? Follow-up on specific components of the individual enrollment meeting using the questions below.</p> <p>Enrollment Tool: What does the PHA report about their overall experience using the Enrollment Tool?</p> <ul style="list-style-type: none"> • What issues, if any, do they report with access to or the data entry process in the Enrollment Tool? • What challenges, if any, do they report with remote enrollment? Any challenges with in-person enrollment? Paper enrollment? • What feedback, if any, does the PHA have regarding the Enrollment Tool? Remind them they should be sure to provide feedback through Office

<p>of why families are choosing not to answer. They will also look at the mode the survey was done to see if there are any trends there.</p> <ul style="list-style-type: none"> • Monthly: The study team leadership will review reports on the number of families with at least one other adult household member in the household to look at the percent where none consent, at least one consents, and all consent to participate in the study. 	<p><i>Hours or the Help Desk.</i></p> <p>Household Roster, Baseline Information Form, and Baseline Survey: Describe the PHA's experience with baseline data collection.</p> <ul style="list-style-type: none"> • <i>What challenges, if any, does the PHA report with getting the Baseline Survey completed during remote enrollment sessions?</i> • <i>How are the translated materials working for non-English materials?</i> • <i>How are the paper procedures working?</i> <p>Informed Consent: Provide a detailed assessment of how the process of obtaining Informed Consent is going.</p> <ul style="list-style-type: none"> • <i>What challenges if any, does the PHA describe with administering Informed Consent?</i> <ul style="list-style-type: none"> ○ <i>Does this vary by family type?</i> • <i>Are there challenges with obtaining parental permission?</i> <ul style="list-style-type: none"> ○ <i>How is the process for obtaining other adult consent going? If the PHA seems to be struggling to obtain other adult consent, do they have any feedback from the families on why they may be declining?</i> ○ <i>Any other family feedback you would like to share? Any supports that would be helpful? Any lessons learned you would like to share?</i> <p>Random Assignment and Notification: How is the process of describing random assignment to families working? How about the process of notifying families about which group they were assigned to?</p> <ul style="list-style-type: none"> • <i>What if any feedback does the PHA report hearing from families?</i> • <i>Are there additional supports the PHA would like to help improve this process?</i> <p>Accommodations: Has any family made a request for accessibility accommodations? Has the PHA experienced any challenges meeting those requests? Are there additional supports that could aid the PHA?</p>
Staffing	
	<p>Site liaisons: Describe any current or planned staffing changes in the PHA's enrollment staff.</p> <ul style="list-style-type: none"> • <i>Any changes in staffing among the program leadership?</i> • <i>Any changes in staffing among enrollment staff?</i> • <i>How many new staff are expected, and when would training be needed?</i>

APPENDIX 6: FIDELITY MONITORING CHECKLIST

Section III-A: Mobility-Related Services – Discussion Guide for Site Liaisons	
Provision of Mobility-Related Services	Discussion Points With Site liaisons, PHA, and Mobility-Related Services Staff
Feedback from mobility-related services staff during each check-in call	<p>Site liaisons: Discuss the following topics with mobility-services staff.</p> <ul style="list-style-type: none"> • <i>How are things going with the provision of CMRS?</i> <ul style="list-style-type: none"> ○ Does the PHA have any successes they would like to share? ○ What kind of challenges, if any, is the PHA facing? Are there any supports that can be offered to help assist the PHA with the provision of CMRS services? ○ Does the PHA feel that families get all the activities they should have received in accordance with their family preparation plan? Does the PHA feel that providers meet all the activities they committed to do in family preparation plans? • <i>What kind of feedback is the PHA hearing from families receiving CMRS services about their experience with the services?</i> <ul style="list-style-type: none"> ○ Are families who attend the pre-move appointment persisting in accessing CMRS services? If families are dropping out, does the PHA or service provider know why? • <i>What kind of feedback is the PHA hearing from families about the process of searching for housing and leasing-up in an opportunity area?</i> • <i>What challenges have mobility services providers reported with helping families find units in opportunity areas?</i> <ul style="list-style-type: none"> ○ How is the progress of identifying new landlords going? What kind of feedback, if any, has the PHA received from landlords about their experiences? ○ How about the process for identifying units in opportunity areas and successfully accessing those units? • <i>How is the workflow going between mobility services staff and the PHA's HCV staff, particularly around the timely scheduling of Requests for Tenancy Approval and unit inspections?</i> • <i>[ASK THIS ON A QUARTERLY BASIS ONLY] What adjustments to the CMRS, if any, would the PHA like HUD and the study team leadership to consider for the future?</i>
Staffing	<p>Site liaisons: Describe any current or planned staffing changes in the mobility-related services staff.</p> <ul style="list-style-type: none"> • Any changes in staffing among mobility-related services staff? How many new staff are expected and when would training be needed?
Section III-B: Mobility-Related Services – Monthly Study Team Leadership Review of Service Tool Data	
CMRS Documentation	On a monthly basis the study team leadership will review Service Tool data to assess key metrics for delivery of each area of mobility-related services. If there are areas of concern, the study team leadership will join the next monitoring call or share with site liaisons to discuss.
Initial Contact	<ul style="list-style-type: none"> • What share of CMRS families were contacted initially within one week of RA to schedule a pre-move appointment?
Pre-move Appointment	<ul style="list-style-type: none"> • What share of CMRS families did not attend a pre-move appointment by 4 weeks post RA? • What is the average length of time between RA and pre-move appointment? • What is the number of families where pre-move appointment occurred more than 4 weeks post RA?

APPENDIX 6: FIDELITY MONITORING CHECKLIST

Status	<ul style="list-style-type: none"> • How many families are in each status? <ul style="list-style-type: none"> ○ Inactive ○ Active ○ Completed Search
Phase of CMRS	<ul style="list-style-type: none"> • Among families in the Active Status: What share of families are at each Phase of CMRS? <ul style="list-style-type: none"> ○ What is the average length of time families are spending at each stage? (This will include everyone who finished that phase) • Among families in the Inactive status: What phase did they stop in?
Workshops	<ul style="list-style-type: none"> • Among families who completed Phase 3 and entered Phase 4: What share of families attended each type of workshop in Phase 3? <ul style="list-style-type: none"> ○ Housing Search Workshop ○ Renter's Workshop ○ Money Management Workshop • Among families who completed Phase 3 and entered Phase 4: What share had each of the following family preparation activities completed? <ul style="list-style-type: none"> ○ Referrals to Address Barriers ○ Application Cover Letters ○ Final Family Preparation Check-in • What percentage of families attended no workshops? • What percentage of families attended at least one workshop?
Referrals for Outside Services	<ul style="list-style-type: none"> • Of every family who has reached Phase 4 (Searching): How many and what percentage of families receive formal referrals for outside services? (Overall and by site)
Disbursements	<ul style="list-style-type: none"> • Of the families who have reached Phase 7: How many families have received each type of disbursement? (During the Pilot, we will look at disbursements to all families in phases 1-7.) • Among the families receiving any disbursement, what is the average disbursement amount against the \$750 budget? • What percentage of families received more than \$750? • What is the average amount of disbursements in each phase? Look at this by phase—if sites are not disbursing in early phases may not be offering full array of financial assistance.
Unit Referrals	<ul style="list-style-type: none"> • Of the families who entered Phase 4 10+ days ago: What share of families have received a unit referral in an opportunity area? • What share have not received a unit referral? • What share have received 2 referrals? 3 referrals? 4+ referrals?
Request for Tenancy Approval	<ul style="list-style-type: none"> • Of those families who are in Phase 6: How many had the owner RFTA activity completed in the Tool? • What is the average amount of time between HQS inspection and lease-up?
Security Deposits/Holding Fee/Lease-Up Bonus/Damage Mitigation Fund	<ul style="list-style-type: none"> • What is the number of families who have had this type of owner disbursement made on their behalf? • What is the average amount of this type of owner disbursement paid per family (for the families with this type of disbursement)? • What is the number of families who have had any type of owner disbursement made on their behalf? • What is the average total amount of all types of owner disbursements per family (for the families with at least one owner disbursement made on their behalf)?
Lease-up in Opportunity Area	<ul style="list-style-type: none"> • Of those families who provided information about their search outcome to CMRS staff (as captured in Phase 5 search outcome activity): How many have leased up in an opportunity area? • How many renewed their lease (stayed in place)?

APPENDIX 6: FIDELITY MONITORING CHECKLIST

	<ul style="list-style-type: none"> • How many moved to a non-opportunity area? <p>Note: Separate reports will be generated for waiting list and existing voucher families.</p>
Landlords	<ul style="list-style-type: none"> • What is the number of landlords added per month (and total)? • What is the number of contacts with landlords? • [Quarterly or semi-annually only] What is the number of landlords who leased to a CCD family by opportunity area?
Units	<ul style="list-style-type: none"> • What is the number of units added to the Tool in the last month (and total)? (Identified by leasing coordinators and families.) • What is the number of units leased by a CCD family by opportunity area?
Phase 7	<ul style="list-style-type: none"> • Phase 7—What share of households who should have had a check-in 9 months after moving to an opportunity area have had that check-in by 10 months after moving to an opportunity area? <ul style="list-style-type: none"> ○ How many had a second annual check-in by 13 months after the first annual check-in? What share is that of those who should have had this check-in? ○ How many had a third annual check-in by 13 months after the second annual check-in? What share is that of those who should have had this check-in? ○ How many had a fourth annual check-in by 13 months after the third annual check-in? What share is that of those who should have had this check-in? • What share of households that do not move to an opportunity area have nine-month check-ins completed within 10 months? What share is that of those who should have had this check-in?
Post-Move Check in	<ul style="list-style-type: none"> • What share of households that move to an opportunity area: <ul style="list-style-type: none"> ○ Have post-move appointments completed within 30 days? ○ Have post-move appointments completed within 60 days? ○ Have post-move appointments completed after 60 days?
Data Completeness and Documenting Contacts	<ul style="list-style-type: none"> • Of all active families, what share have no contact at all? • Of all active families, what share have had no contact within 60 days?
IV: Next Steps	
Date of Next Call	Date: _____
Follow-up Actions:	Action Required: _____ By Who: _____ By When: _____

Appendix 7: Recruitment and Enrollment Plan



Community Choice Demonstration Site Recruitment and Enrollment Plan

PHA Name:

Lead PHA (for sites with multiple PHAs):

[Site Liaisons: Name, Organization, Contact Information]

Date:

[When does the PHA anticipate starting the pilot [Change to actual pilot start date once known: _____ / _____]]

Purpose of the Site Recruitment and Enrollment Plan (R&E Plan): This Site Recruitment and Enrollment Plan is a living document that describes how the [PHA NAME(s)] will select families for outreach and recruitment into the Community Choice Demonstration (CCD), its/their planned approach to conduct outreach and recruitment, and any PHA-specific adaptations to the general process of conducting enrollment and random assignment. The plan describes these procedures first for existing voucher families and then for families on the HCV waiting list (waiting list families). The plan then describes any anticipated accommodations that may be needed for persons with disabilities and limited English proficiency to ensure all interested and eligible families can participate.

Instructions for Completing the R&E Plan: Site liaisons will complete the plan in collaboration with the PHA. The plan should describe procedures that are capable of being administered as of the start of the pilot. PHAs may wish to select tools they plan to develop during the pilot for eventual implementation, but the plan must describe the procedures that will be followed while those new tools are being developed.

The plan will be sent to the Evaluation leadership team and HUD for review. The site liaison and PHA will review the feedback provided and update the plan as needed until it is approved. Throughout the pilot and enrollment period, site liaisons will monitor PHA progress against this plan. The plan will be updated throughout the Demonstration as needed to reflect any changes. Revisions to the plan can be initiated by the PHA staff or the site liaisons, should changes in procedures be necessary. Site liaisons and PHA staff will coordinate to update the plan and get the changes approved. Changes must not be implemented until the Evaluation leadership team and HUD approve them. Once the plan has been approved, the most recent version will be posted to the MobilityDemoTA.org website (maintained by the Technical Assistance provider).

Implementing the R&E Plan: The site-specific R&E Plan will be paired with a general PHA Recruitment and Enrollment Training Manual that provides additional details, instructions, and sample scripts, letter templates, and brochure materials for implementing the recruitment and enrollment phases of the Demonstration. The most recent version of the Recruitment and Enrollment Training Manual will also be posted to the MobilityDemoTA.org website (maintained by the Technical Assistance provider).

OVERVIEW OF THE COMMUNITY CHOICE DEMONSTRATION

The Community Choice Demonstration, formerly the Housing Choice Voucher Mobility Demonstration, provides a unique opportunity to build rigorous evidence on how to expand residential choice and facilitate moves to opportunity areas by households participating in the HCV program (voucher families). Through a rigorous evaluation that includes a Process Study, an Impact Study based on a randomized controlled trial (RCT), and a Cost Study, the Department of Housing and Urban Development (HUD) seeks to learn whether and to what extent mobility-related services facilitate moves to and retention in opportunity areas by families with children. The Demonstration is being implemented by nine sites across the U.S., including Brandywine (Chester, PA), Cuyahoga County (Cleveland, OH), Los Angeles, Minneapolis Metro, Nashville MDHA, NOLA (New Orleans), New York City HPD, Pittsburgh Metro, and Rochester Metro.

The Demonstration has two phases. Phase 1 will test a set of comprehensive mobility-related services (CMRS), and Phase 2 will test selected mobility-related services (SMRS) and compare them with CMRS. The [PHA NAME] will [provide mobility-related services directly and/or partner with] [MOBILITY SERVICES PROVIDER NAME(s)]. Over the five-year enrollment period, the [PHA NAME(s)] will seek to enroll [Add # of families here] families into the Community Choice Demonstration.

Two types of families are eligible to participate in the Demonstration: families who already have a housing choice voucher (existing voucher families) and families who are on the waiting list (waiting list families). Both family types must have at least one child aged 17 or under living in the household. In order to enroll in the CCD, the head of household of an eligible family must agree to allow at least one of their children aged 17 or under to participate in the study. Eligible families that decide to participate in the Demonstration will be randomly assigned into the control group or one of the treatment arms (CMRS or SMRS). After random assignment, waiting list families will be issued a voucher.

OVERVIEW OF THE PHA(s) AND PARTNERS

PHA/Program Information
<ul style="list-style-type: none"> • Contact name, address, phone, email <ul style="list-style-type: none"> ○ Include PHA website URL if available and relevant information—and, if applicable, any links directly for the Community Choice Demonstration. ○ If the PHA is providing both mobility services and doing outreach and recruitment, please record who is responsible for each piece. • If two PHA sites: Name and contact information for second PHA <ul style="list-style-type: none"> ○ Will one PHA serve as the lead, or will they share responsibility equally?
Local Program Name: <ul style="list-style-type: none"> • How will PHA staff refer to this program locally? How will families recognize the program—will it be known as the Community Choice Demonstration or something else?
Partnerships: <ul style="list-style-type: none"> • Will the PHA partner with an outside agency to assist with or conduct outreach and recruitment activities? If so, has the partner been identified? Who is it? • Will the PHA partner with an outside agency to assist with or conduct intake and enrollment activities? If so, has the partner been identified? Who is it? • Will the PHA partner with an outside agency for CMRS and SMRS service provision? If so, has the partner been identified? Who is it? • Collaboration plans—how will the PHA coordinate with each of these partners to ensure that they are performing as expected and meeting their targets? For example, how will the PHA and service providers alert one another if their targets are falling short on a regular basis? Similarly, if PHAs experience more interest than expected, how will they communicate with service providers to see if they can handle additional families?

PHA ENROLLMENT GOALS—OVERALL BY YEAR AND FAMILY TYPE

HUD awarded 74 Mobility Demonstration Vouchers to each of the sites selected to participate in the Demonstration. Together with the 37 regular turnover vouchers that each site agreed to commit to the Demonstration, each site will be expected to enroll, at a minimum, 111 new admissions (waiting list families) into the Demonstration from the PHA's waiting list. The target for all PHAs except Chester is to enroll a total of 1,911 families into the Demonstration, so if a PHA enrolls the minimum 111 waiting list families, they will be expected to enroll at least 1,800 existing voucher families into the Demonstration.

The table below shows the PHA's enrollment targets over the five-year Demonstration period. Since there are separate enrollment targets for existing voucher and waiting list families, the table shows the annual enrollment targets by random assignment group for existing voucher holder families and then for waiting list families.

	Enrollment and Random Assignment Targets for [SITE]						
	Targets: Year 1		Targets: Year 2	Targets: Year 3	Targets: Year 4	Targets: Year 5	Comment
	Pilot	Balance of Year					
EXISTING VOUCHER FAMILIES—Projected Enrollment by Random Assignment Group							
CMRS Group							
SMRS Group							
Control Group							
Subtotal							
Total							
WAITING LIST FAMILIES—Projected Enrollment by Random Assignment Group							
CMRS Group							
SMRS Group							

	Enrollment and Random Assignment Targets for [SITE]						
	Targets: Year 1		Targets: Year 2	Targets: Year 3	Targets: Year 4	Targets: Year 5	Comment
	Pilot	Balance of Year					
Control Group							
Subtotal							
Total							
Total Projected Enrollment (e.g., sum of prior two total rows)							

Option to Enroll More Waiting List Families in Exchange for Existing Voucher Families

HUD will allow some limited flexibility between the number of existing voucher families and waiting list families that are enrolled in the Demonstration. In particular, HUD encourages PHAs to consider dedicating additional turnover vouchers to the Demonstration in order to increase the share of Demonstration participants who are waiting list families, helping to create more of a balance between waiting list families and existing voucher families in the Demonstration. HUD anticipates that most selected PHAs will end up enrolling approximately 250 or fewer waiting list families into the Demonstration. HUD anticipates that the maximum use of flexibility between existing voucher families and waiting list families would result in 1,411 existing voucher holders and 500 waiting list families (a maximum increase of 389 waiting list families).

The PHA must submit a written request to HUD to change the number of existing voucher families and waiting list families to be enrolled in the study. PHAs that seek to enroll more than the initial 111 waiting list families must use their own turnover vouchers to cover the increase. Turnover vouchers are vouchers that become available when a voucher holder leaves the HCV program, making an HCV available for another person. The PHA must receive prior HUD approval before using any new incremental vouchers for this purpose.

[Site Liaisons: Encourage PHAs to consider using turnover vouchers to increase the number of waiting list families enrolled in the Demonstration. Summarize any customization plans, such as adding more waiting list families and decreasing the number of existing voucher families in exchange. Please make sure those changes get reflected in the enrollment target table above.]

Staggered Pilot Period Enrollment by Family Type

PHAs will start the Pilot period conducting enrollment with existing voucher families only. About halfway through the Pilot (at about three months into the six-month Pilot period), PHAs will also start conducting enrollment with waiting list families. This staggered approach to enrolling different family types will allow PHAs to gain familiarity and confidence enrolling existing voucher families first—for whom PHAs have much higher enrollment targets—before adding on enrollment of waiting list families—for whom PHAs have lower enrollment targets and who follow a different process.

Approach To Enrolling Families with Special Purpose Vouchers

HUD and the Evaluation Team have concluded that some services that PHAs provide to HCV families with certain special purpose vouchers may be substantially similar to those provided through the Demonstration, creating a potential conflict. Therefore, HUD is requesting that

affected PHAs not actively conduct outreach to and recruit families who are participating in the specific programs that could conflict. However, should a family in one of these programs request to participate in the Demonstration, they should not be denied and may enroll.

[Site Liaisons: Please document any PHA special purpose voucher programs that HUD has identified as providing similar services to the CMRS.]

Should the services offered to the families participating in the above special purpose voucher program(s) change substantially or cease, please reach out to HUD, as the PHA may be able to actively recruit and enroll these families into the Demonstration. Similarly, please reach out to HUD if the PHA is planning to offer any new services to HCV families that may be similar to CMRS services.

PHA OUTREACH AND RECRUITMENT—GOALS AND APPROACH

The goals of the Demonstration outreach and recruitment procedures are to: (a) inform eligible families about the opportunity to receive mobility-related services to help support moves to opportunity areas; and (b) recruit enough families to participate to meet the enrollment targets established for each PHA participating in the Demonstration.

Considerations. In this plan, greater attention is placed on the process of outreach and recruitment of existing voucher families than waiting list families. Recruitment of existing voucher families will be more challenging and will require a careful balancing act. On the one hand, PHAs will need to reach and motivate enough likely eligible existing voucher families to enroll in the study to allow the study to detect policy-relevant impacts on mobility outcomes. On the other hand, it will be important to avoid enrolling large numbers of households that are unlikely to move at all, not interested in moving to an opportunity area, or not interested in receiving services. There is also concern about the possibility of enrolling families at the wrong time, such as when they have already identified a unit they wish to move into or at a stage when many may not end up moving at all. Given this balancing act, participating PHAs will be encouraged to engage in proactive outreach to enroll as many existing voucher families as possible who might be interested in receiving mobility services, interested in moving to an opportunity area, and have enough time left before their current lease expires or they otherwise need to move.

Approach for Existing Voucher Families. There are many ways to reach likely eligible existing voucher families to inform them about the Demonstration. The recommended approach is to proactively reach out to families well in advance of their likely lease-end date so that there will be ample time to provide mobility-related services before their lease expires. The basic approach consists of an initial invitation, ideally a letter, sent to families by mail and email approximately six months before their annual recertification date and three follow-up attempts (via communication modes the PHA finds most effective with its families—such as postcards, follow-up letters, emails, text messages) over an eight-week period. The Evaluation Team’s experience has shown that additional outreach by telephone and email, particularly bulk email messaging for reminders, will improve the response to outreach efforts and recommends incorporating these tools if PHA staff can sustain the extra effort. PHAs should also take advantage of other opportunities to communicate with families about the Demonstration, such as annual recertification meetings, voucher briefing sessions for new voucher holders, email newsletters, website postings, etc.

Approach for Waiting List Families. The Demonstration enrollment processes for waiting list families need to be incorporated into the PHA’s existing procedures for pulling waiting list families off the waiting list, HCV program eligibility determination, and voucher issuance. However, before proceeding with eligibility determination, waiting list families must be informed about the Demonstration and study participation requirements. Before waiting list families move forward with voucher briefing and issuance, they must proceed with the Demonstration briefing and individual enrollment meeting. Thus, it may be necessary for PHAs to adjust their existing procedures to accommodate these steps. For example, if a PHA does not have any contact with families before they are determined eligible for the HCV program, the PHA will need to add some sort of preliminary meeting to describe the CCD to families. This plan includes a section that outlines how this will take place.

Guide to Remainder of Template. The next two sections document the specific procedures for enrollment into the Demonstration—from outreach through random assignment—for existing voucher families first and then for waiting list families. Attachments A1 and A2 provide a visual of the complete enrollment cycle for existing voucher families and waiting list families, respectively; the process varies by family type.

Attachments B1 and B2 include templates for PHA staff to conduct high-level tracking of outreach and recruitment efforts. The templates will be used throughout the pilot and the Demonstration enrollment period in order to help monitor outreach success and to adjust outreach procedures as needed.

Attachment C provides initial projections of the number of families likely to respond at each stage of the outreach process and end up attending a group Demonstration briefing and enrolling in the study.

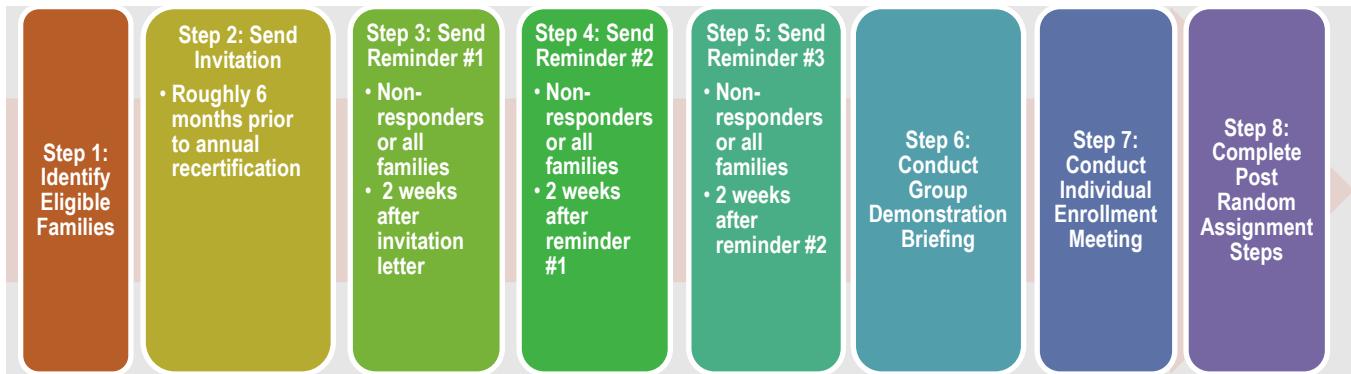
This plan includes detailed descriptions of the steps involved in the outreach, recruitment, and enrollment processes. For additional information, see the Recruitment and Enrollment Training Manual.

PHA OUTREACH AND RECRUITMENT—PROCEDURES FOR EXISTING FAMILIES

Exhibit A depicts the steps [PHA NAME] will take to conduct outreach to existing voucher families to recruit them into the Demonstration.

[Site Liaisons: Update the general approach in the graphic as needed to reflect PHA’s specific plan and describe the steps in the boxes below.]

Exhibit A7: Planned Outreach Steps—Existing Voucher Families

**Step 1: Describe the Process for Identifying Eligible Existing Voucher Families for Outreach**

- Describe how frequently new outreach samples will be identified.
 - An important initial step in conducting proactive outreach is to identify the specific families that the PHA will reach out to (known as “drawing” the “outreach sample”). This can be done on a regular basis during the year (such as monthly), less often (such as quarterly or annually), or perhaps once at the start of the Demonstration.
 - The timing of the draw of the outreach sample does not necessarily reflect when outreach efforts are undertaken.*
 - For example, a PHA can draw an outreach sample now during the planning stage to get a better sense of how many families may be eligible for recruitment each month throughout the year. The PHA can then draw new outreach samples once a year that will identify which specific households are to be outreach to in each month. This will be less work than drawing the sample monthly but runs the risk of including some households that may no longer be active voucher holders at the PHA by the time the month in which to do the outreach arrives.
 - Monthly draws will be more up-to-date but also more work for the PHA(s). Waiting to draw an outreach sample until just before each month in which the outreach will take place also makes it more difficult to predict possible peaks and valleys in outreach efforts caused by having more or fewer families than expected to contact in any given month.
- Describe how many existing voucher families to target in each monthly outreach round.
 - PHAs will need to determine how many families to contact in each monthly outreach round in order to generate enough families to meet their recruitment goals, but not so many families that the mobility-related services providers become overwhelmed. Appendix C can help PHAs select how many families to target, given assumptions about attrition during the process. If the outreach numbers at each step deviate from the initial projections outlined in Appendix C, create an additional table in Appendix C and explain why the site is suggesting different projections—do they anticipate a greater or lesser take-up rate, follow-through rate, etc.
- Describe the specific steps that the PHA(s) will take to identify which existing voucher families to invite to participate in the Demonstration, including when they will invite families, whether they will send letters out to everyone that meets specified criteria or a subset that is randomly selected (if they have more families that meet the criteria than needed), etc.
 - If the number of households identified for outreach in a given month exceeds the number the PHA(s) expect(s) will be needed to generate enrollment at the target level, the PHA(s) should develop a process for reducing the outreach sample to a more manageable level and describe that process here. **It is important to narrow the outreach sample down BEFORE outreach occurs, rather than trying to create a waiting list for the program (although a waiting list may become necessary at some point if demand exceeds expectations).**
 - One option would be to randomly select a targeted number of households with a recertification in a given month for outreach six months prior.

- A second option might be to focus outreach in year 1 on a certain recertification date range within the month (say, the first two weeks) and focus outreach in the next year on a different date range within the month (say, the last two weeks) and rotate each year over the rest of the enrollment period.
- A third option could be for PHAs to randomly sort the families in each monthly outreach cohort and work down the list in order. In year 2, for example, they could begin the outreach with the next family on the list after the last one contacted in year 1.

Notes:

1. Outreach to families whose youngest child is close to their 18th birthday. An existing voucher holder with a child aged 17 or under living with them as of the time of the enrollment meeting is eligible to participate in the Demonstration regardless of how close the child is to their 18th birthday. However, some amount of time will likely elapse between the time of outreach and the time the family comes in for an enrollment meeting. While not strictly required, PHAs are encouraged to take this “lag” into account and focus enrollment on families whose children are likely to still be under 18 as of the expected date of the enrollment meeting. This will minimize frustration on the part of families and minimize ethical issues related to inviting someone to participate in the Demonstration who has no realistic chance of qualifying.”

2. It will be important to ensure that PHAs do not over-recruit families. This is important so as to avoid developing a reputation for being unable to serve recruited families in a timely manner. The goal of this plan is to manage the outreach effort so that all families that come to a group Demonstration briefing can move forward to enrollment and be enrolled and served with mobility services in a timely manner.

Our initial projections suggest needing to identify 275 families for outreach in order to reach 30 families enrolled per month. This is based on initial projections of take-up of the Demonstration. However, it is quite possible that there may be more interest in the study than expected. Accordingly, especially at the outset, it will be important to be conservative and be especially careful not to recruit more families than can be served effectively. Outreach in smaller batches may help avoid issues around more families being interested than can be served. To do this, please consider things like sending out small batches of letters initially to ensure that the number of interested families does not exceed the number of families that can be served.

It is also possible that there may be less interest in the study than projected, suggesting outreach to more families will be needed to meet the target number of families enrolled per month. This is an easier issue to address as it does not have any of the negative implications for families that arise with too much interest in the program. Site Liaisons will work with PHAs to select ways to do additional outreach to help ensure that PHAs reach their target numbers.

Timing:	Will outreach samples be drawn on a regular basis (monthly) or less often (quarterly or annually)? When will PHA select families for initial outreach invitations? [For example: on the 15 th of each month, pull an outreach sample consisting of all households that are due for their annual recertification in the month six months later. To illustrate, an outreach sample pulled on April 15 would select everyone with a recertification date in October.] Will PHA send letters out to everyone that meets specified criteria or a subset (and how will that subset be determined)?
Logistics:	N/A
Staff responsible:	[]
Number of families selected for outreach per month (Pilot Phase and Full Implementation Years):	[Using projections in Appendix C or different projections] Pilot: Full implementation:

Considerations for Take-Up Rates and Excess Demand: Site Liaisons will work with the PHA to develop initial estimates of the number of families likely to respond at each stage of the outreach process and end up attending a group Demonstration briefing and enrolling in the study. PHAs will track how many families attend group briefings, how many come to enrollment meetings, and how many enroll. Throughout the Demonstration, PHA staff and site liaisons will

review the information and make adjustments as needed. See Attachment B1 for a template for tracking outreach efforts and Attachment C for initial projected outreach and enrollment targets.

It will be challenging to balance the twin goals of enrolling enough families to meet enrollment targets and not enrolling so many families that the program becomes overwhelmed and cannot serve families in a timely and effective manner. For PHAs with larger HCV programs in particular, it will be important to minimize the risk of inviting more families than the service providers can serve in a given month. During the initial part of the pilot, the study team recommends that PHAs enroll families in small batches to get a sense of how much interest there may be in the study.

- If, for example, the PHA has drawn an outreach sample consisting of 300 people in an early month of the pilot, the study team recommends NOT sending a letter to all 300 at the same time. Rather, send in batches of 50 families to gauge the extent to which families respond expressing interest. If there is not enough interest, then additional letters can be sent.
- If all 50 respond, and wish to enroll, then the PHA can work with the service provider staff to determine if they can accommodate more families in a given month.
- Some suggestions for handling the possibility that more families express interest in the program than the program can serve at the moment are:
 - PHAs can enroll the additional families in the following month and reduce outreach efforts in that month, allowing them to maximize enrollment without overburdening the service providers.
 - Alternatively, PHAs could proceed with enrollment through the baseline survey, and postpone random assignment to the following month so as not to overburden the service providers.

Step 2: Send Initial Invitations

- Describe how many letters the PHA(s) plan(s) to send in each monthly outreach round.
- Describe the mode of outreach and process for tracking responses.
- Describe how the PHA will minimize the chance of inviting more families to enroll than they can accommodate in one month.

Timing:	[Monthly-all at once or in smaller, staggered batches]
Logistics:	[mail, email, both]
Staff responsible:	[]
Number of families to receive letters per month (Pilot Phase and Full Implementation Years):	[Pilot: Full implementation:]

Step 3: Send Reminder #1

- Describe the process for determining who should receive a reminder.
 - Sending reminders to all families would be easier for PHA staff.
 - Sending reminders to only non-responders requires more detailed monitoring by PHA staff but reduces the number of reminders PHAs need to send and families need to receive.
- Describe the PHA's preferences for sending all reminders at once or to stagger them in small batches.
- Describe the number of reminders per batch and the mode of communication (phone, email, text, mail) to send per invitation group.

Timing:	[2 weeks after Step 2, but customize as needed]
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Logistics:	[mail, email, text, phone, customize as needed]
Staff responsible:	[]

Step 4: Send Reminder #2

- Describe the process for determining who should receive a second reminder.
 - Sending reminders to all families would be easier for PHA staff,
 - Sending reminders to only non-responders requires more detailed monitoring by PHA staff but reduces the number of reminders PHAs need to send and families need to receive.
- Describe the PHA's preferences for sending all reminders at once or to stagger them in small batches over the first two weeks.
- Describe the number of reminders per batch and the mode of communication (phone, email, text, mail) to send per invitation group.

Timing:	[2 weeks after Step 3, but customize as needed]
Logistics:	[mail, email, text, phone, customize as needed]
Staff responsible:	[]

Step 5: Send Reminder #3

- Describe the process for determining who should receive a third reminder.
 - Sending reminders to all families would be easier for PHA staff,
 - Sending reminders to only non-responders requires more detailed monitoring by PHA staff but reduces the number of reminders PHAs need to send and families need to receive.
- Describe the PHA's preferences for sending all reminders at once or to stagger them in small batches over the first two weeks.
- Describe the number of reminders per batch and the mode of communication (phone, email, text, mail) to send per invitation group.

Notes:

Existing voucher families who do not respond to any of the outreach efforts or do not proceed beyond the group

Demonstration briefing remain in the outreach sample.

- They may be part of future rounds of outreach.
- They can also reach out to the PHA at any time if they change their mind (see Enrolling Families Outside of the Active Recruitment Period section below).

Timing:	[2 weeks after Step 4, but customize as needed]
Logistics:	[mail, email, phone, text customize as needed]
Staff responsible:	[]

Optional Additional Outreach Tools

PHAs may opt to take advantage of their existing communication channels with families to help improve outreach, recruitment, and enrollment. PHAs are not required to use any of these alternative methods for outreach. If PHAs are struggling to meet enrollment targets, site liaisons will work closely with PHAs to determine if and when additional tools are needed.

- Discuss with PHA whether or not they plan to utilize any other planned PHA channels for outreach. If so, describe how they may do this. For example, would they provide information about the Demonstration in annual recertification meetings, at voucher briefings for new voucher families, on a PHA website, or newsletters? Additionally, HQS inspectors could provide flyers to families during annual inspections. Would they do this proactively or wait to see how outreach progresses during the pilot?
- Social media plans: If the PHA intends to use social media, the plan should clearly reflect the details of how and why they will use it. For example, will the PHA use its websites for informational purposes only, or does the PHA plan to use them for actual outreach and recruitment? If the latter, it should be done only as a last resort. The primary outreach should be by invitation only. We want to make every effort to ensure that any use of social media will not result in excess demand, as that would be problematic for the study.

Timing:	[]
Logistics/Methods:	[]
Staff responsible:	[]

Enrolling Families Outside of the Active Recruitment Period

Once the Demonstration begins and families start to learn of the study, PHAs may receive inquiries from families looking to enroll in the study. Some families that call to inquire about the study will be ineligible to participate. Some families will have heard about the study through word-of-mouth but have not received a formal invitation letter. Others will be families who previously received an initial invitation to enroll but did not act during the 8-week outreach period or are calling before the target outreach window (six months prior to recertification).

PHAs have the discretion to enroll families outside of their active recruitment period. PHAs will need to confirm if the family is eligible (they have at least one child aged 17 or under living with them).

PHAs will need to coordinate with the Mobility Services provider on a regular basis to determine their capacity to serve additional families beyond the expected monthly enrollment schedule.

It would also be useful for PHAs to have a conversation with these families about the timing of their enrollment. Discussion points should include:

- Family's willingness to consider moving to a new opportunity area and, conversely, having not already identified a specific place to move;
- Family's willingness to participate in mobility services;
- Family has enough time before they need to move to receive the full suite of mobility services (ideally four months before moving).
- NOTE: The discussion points above are provided as prompts to help families understand whether they are well positioned to benefit from the Demonstration. They are NOT to be used as additional eligibility screening criteria. If a family meets the Demonstration eligibility criteria (has at least one child age 17 and under living with them) and wants to move forward with the enrollment process, they must be allowed to proceed with the next steps in the enrollment process, even if staff have reservations about the families' willingness to move and/or the amount of time they have before they need to move in which to receive services.

- [Site Liaisons: Please describe the process for enrolling families outside of their active recruitment period.]
- Who will these families be routed to when they first inquire about enrolling to review CCD eligibility by confirming that the family has at least one child aged 17 and under? Who will discuss with the family whether the family is well positioned to benefit from the Demonstration? (See notes above about relevant discussion points.)
- Will families be invited to attend the next group Demonstration briefing(s) or an individual briefing?
- How will the PHA communicate with the Mobility Services Provider about the potential for additional enrollments each month?

GROUP DEMONSTRATION BRIEFINGS

- The outreach materials will invite existing voucher families to participate in a group Demonstration briefing. Occasionally, families may request to proceed directly to an individual enrollment meeting (bypassing the informational briefing). Typically, this would happen when the scheduled briefing does not match the family's schedule, or they need special accommodations. This is allowable.
- HUD expects that most PHAs will conduct Demonstration briefings on a group basis. However, PHAs may elect to conduct Demonstration sessions on an individualized basis if they prefer.

- Site liaisons will provide PHAs with a Demonstration overview video to show during the Demonstration briefings as well as slides to help describe the Demonstration and study requirements to families. Site liaisons will work with PHAs and the TA Provider to tailor the slides to include a description of the intervention (mobility-related services) being offered and the opportunity areas in their community. The briefing will also cover the purpose of the study, the participation requirements, the voluntary nature of participation, random assignment, and the incentive for completing the baseline data collection. Families will have an opportunity to ask questions.
- At the end of the group Demonstration Briefing, interested families will proceed to the individual enrollment meeting. In most instances, this will be immediately after the group briefing, unless the family needs to reschedule for a later date.

(Group) Demonstration Briefings:

The study team will provide PHAs with a video describing the study to show interested families during the Demonstration briefing as well as a PowerPoint slideshow. These materials will be available in English and Spanish.

Describe PHA plans for Demonstration briefings.

- Describe whether Demonstration briefings will be done in groups, individually, or both.
- Describe how frequently briefings will be held and the target number of participants per session.
- Describe plans for accommodating LEP and accessibility needs during each briefing.
- Describe whether briefings will be remote or in-person or both, and if in-person, where at the PHA or other locations they will be held.
 - If a site is planning to do both in-person and virtual briefings, details of each process need to be laid out separately.
- Describe how families will sign up for briefings and whether the PHA will offer any on non-traditional days/hours.
- Describe how the PHA will make the transition from the Demonstration Briefing to the enrollment meeting in a manner that minimizes the loss of otherwise interested applicants.
 - How many and which staff will be available to help make this transition seamless and avoid unnecessary idle time for families?

Timing:	[]
Logistics:	[group, individual both; in-person, remote, both; if in-person, at PHA and/or another location]
Staff responsible:	[]
Number of Families (Pilot Phase and Full Implementation Years)	[]

PHA INVITATION PROCEDURES—WAITING LIST FAMILIES

This part of the R&E plan focuses on waiting list families. Invitations to waiting list families will not be sent until the PHA has (1) adopted the waiting list preference in its Administrative Plan, (2) if applicable, received approval for updates to its Agency Plan, and (3) applied the waiting list preference to select qualifying families.

Apply the Demonstration Preference to the PHA Waiting List:

Sites will apply their newly adopted waiting list preference for Mobility Demonstration Vouchers (that is, for families with at least one child aged 13 or under living in census tracts with a family poverty rate of 30 percent or higher) to their current waiting list to produce an updated waiting list. This updated list will be used to select families off the waiting list to be invited to learn more about the Demonstration.

- Document WHEN sites plan to apply the Demonstration preference to their waiting list: before the Pilot starts or closer to the time they will start to enroll waiting list families (about halfway through the Pilot)?

- There are benefits and drawbacks: updating their waiting list sooner will allow for advance planning; updating their waiting list closer to the time they begin to enroll may ensure the preference is applied to a list with more accurate, up-to-date information.

Note:

When the PHA goes to select from its waiting list for new admissions into the Demonstration, it will first look to see if it has any families identified as having the required preference. To receive the preference, a family must meet the age (at least one child aged 13 or younger) and geography preference **at the time of selection from the waitlist**. If that child turns 14 before the head of household consents to participate in the Demonstration, the family is still eligible for the Demonstration and for the MDV or companion turnover voucher, provided the family still has a child that is 17 or younger.

The process of inviting waiting list families to participate in the Demonstration will be incorporated into the PHA's normal operations for enrolling families into the HCV program, with several additional steps inserted in the process to meet study requirements.

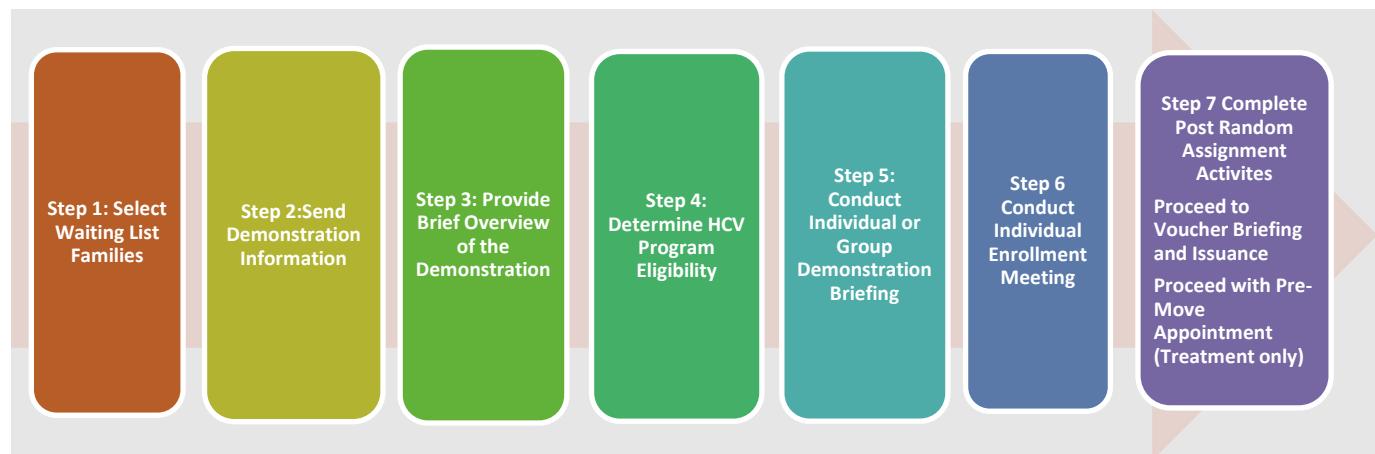
Document Normal Process for Enrolling Waiting List Families into the HCV Program and Adaptations to Meet CCD**Study Requirements:**

- Document the PHAs current process/steps for pulling people off the waiting list, verifying their eligibility, and issuing them a voucher.
- Describe how this process will be adapted to select families from the waiting list to be invited to learn more about the Demonstration.

Reminder: as noted above, it may be necessary for PHAs to adjust their existing procedures to accommodate these steps.

Exhibit B (below) depicts [PHA NAME's] steps for inviting families on its HCV waiting list to participate in the Demonstration. Site Liaisons will work with the PHA to develop estimates of the number of waiting list families likely to respond at each stage of the invitation process in Exhibit B and end up enrolling in the study. PHAs will track the results of contact attempts at each step and review the results with the site liaisons as part of the monitoring calls, leading to updated estimates based on actual experience. (See Attachment B2 for Waiting list Families Invitation Tracking Log and Attachment C for initial projected outreach and enrollment targets.)

[Site Liaisons: Update the general approach in the graphic to reflect the PHA's specific plan and describe the steps in the boxes below.]

Exhibit B: Planned Invitation Steps—Waiting List Families

Step 1: Select Waiting List Families

- To the extent not fully described above, describe the steps that PHAs will take to select which waiting list families to invite to learn more about the Demonstration.
 - Generally, once the preference is assigned, families should be invited in order, proceeding first with families with the Demonstration preference, and then, if there are no families with that preference remaining, with any family that has a child 17 or younger.
 - Describe the frequency of invitations to families on the waiting list.
- Given the relatively small number of waiting list families to be enrolled, the evaluation team recommends a semi-annual process. PHAs could opt for more frequent waiting list enrollment, but the evaluation would discourage doing so more frequently than quarterly.

Timing:	[Quarterly, semi-annually, other]
Logistics:	N/A
Staff responsible:	[]
Number of families (Pilot Phase and Full Implementation Years):	[Pilot: Full implementation:]

Step 2: Send Demonstration Information

PHA should describe their process for sending out letters to invite selected waiting list families to learn more about the Demonstration.

- PHAs can use the recruitment letter and brochure templates developed for this study. PHAs should describe any plans to develop customized materials and share them with the study team to ensure that the required language is included.
- PHAs should describe how families should reach out if they would like to learn more about the study. Do families have a time limit to respond before the PHA moves on to the next waiting list family?

Timing:	[Quarterly, semi-annually]
Logistics:	[mail, phone, email, combination]
Staff responsible:	[]
Number of families per outreach round (Pilot Phase and Full Implementation Years):	[Pilot: Full implementation:]

Step 3: Provide Brief Overview of the Demonstration

PHAs should build in a process for notifying those waiting list families who are being invited to learn more about the Demonstration that:

- 1) a limited number of vouchers were made available because of the Demonstration,
- 2) that they are being invited to learn more about the study to see if they would like to participate,
- 3) that receiving a mobility voucher is contingent upon agreeing to be in the study,
- 4) that their participation in the study is voluntary, and
- 5) that if they do not want to be part of the study, they will retain their place on the current HCV waiting list.

Families should also be informed that they must still be found eligible to receive an HCV before they will actually be invited to enroll in the Demonstration. Information about the requirement to participate in the study should be provided to families very early in the process, so families and PHA staff do not put a lot of work into verifying eligibility before a family learns of this condition.

- Describe PHA plans to share this information
- PHAs should describe if they plan to conduct the full Demonstration briefing as part of this meeting (see Demonstration Briefing discussion below) or if they will conduct an individual or group Demonstration briefing after HCV program eligibility determination.
- For waiting list families selected via the Demonstration preference, describe the process the PHA will use to confirm preference status information: household composition, including the presence of at least one child 13 or under, as well as residence in a neighborhood that meets the poverty-rate criterion.
- Describe any plans the PHA has to customize this step.

Timing:	[within 2 weeks of Step 2]
Logistics:	[in-person, remote, both; held at PHA, another location, or both]
Staff responsible:	[]
Number of families (Pilot Phase and Full Implementation Years):	[]

Step 4: Determine HCV Program Eligibility

- The PHA will gather HCV program eligibility information.
- PHAs will follow their normal HCV eligibility determination process to confirm eligibility for a voucher.
- Once families are determined eligible for the HCV program, they will be invited to attend a Demonstration briefing and individual enrollment meeting for the Demonstration (see Step 5).
- Describe any customization plans, if applicable.

Timing:	[according to regular procedures, please describe]
Logistics:	[mail, email, phone, all three]
Staff responsible:	[]

Steps 5: Conduct Demonstration Briefing and Step 6 Conduct Individual Enrollment Meeting

PHAs are responsible for sharing with the identified waiting list families all of the information that is covered in the group Demonstration briefing for existing voucher families. PHAs may choose to provide this information on a one-on-one basis—for example, at the start of the same meeting that will serve as the individual enrollment meeting (recommended)—or in a group briefing. PHAs have the flexibility to decide when in the process to provide this information to identified waiting list families, **but it must be provided before the individual enrollment meeting takes place.**

The individual enrollment meeting in which the family is provided with an opportunity to enroll in the study should happen after eligibility for an HCV has been verified to avoid the scenario of someone enrolling into the Demonstration and then finding out they are not actually eligible for a voucher. Ideally, the individual enrollment meeting would happen after HCV eligibility is confirmed, but prior to the voucher briefing and issuance.

See details in the next section titled “Individual Enrollment Meeting” for the steps involved in that meeting.

- Describe how families determined to be eligible for a mobility Demonstration voucher or a matching regular turnover voucher will be invited to the Demonstration briefing and individual enrollment meeting. Please note where and when each of those sessions will take place and if they will be done together (recommended) or separately.

- If the PHA does plan to offer group Demonstration briefings for the waiting list families, please describe plans for transitioning to individual enrollment meetings. For example, how many waiting list families will be invited to a group Demonstration briefing? How will additional staff be brought in to help with the individual enrollments?
- If the PHA does not plan to hold a formal Demonstration briefing for waiting list families, describe where and when the information covered in the Demonstration briefing will be provided to the families. For example, the information could be provided to families on an individual basis at the start of the individual enrollment meeting or earlier in the process, under step 3 for example.
- Describe the PHA's plan for when they will conduct individual enrollment meetings.

Timing:	[1 week after HCV program and MDV preference status confirmed in Step 4]
Logistics:	[mail, email, phone, all three]
Staff responsible:	[]

Step 6: Complete Post Random Assignment Activities

- Once a family is enrolled in the Demonstration and has been randomly assigned to the treatment or control group, they can proceed to voucher briefing and issuance.
- Voucher briefing and issuance should follow the PHA's normal procedures.
 - Please describe the process for voucher briefing and issuance and note if any variation from normal procedures is required.
 - Treatment group members will also proceed to a pre-move appointment with service provider.
 - Control group members will proceed with normal voucher holder operations (housing search and lease-up).

Timing:	In accordance with PHA procedures for Voucher briefing and issuance.
Logistics:	[mail, email, phone, all three]
Staff responsible:	[]

INDIVIDUAL ENROLLMENT MEETING

This section applies to both waiting list and existing voucher families. It describes the individual enrollment meeting.

Overview of the Planned Individual Enrollment Meeting

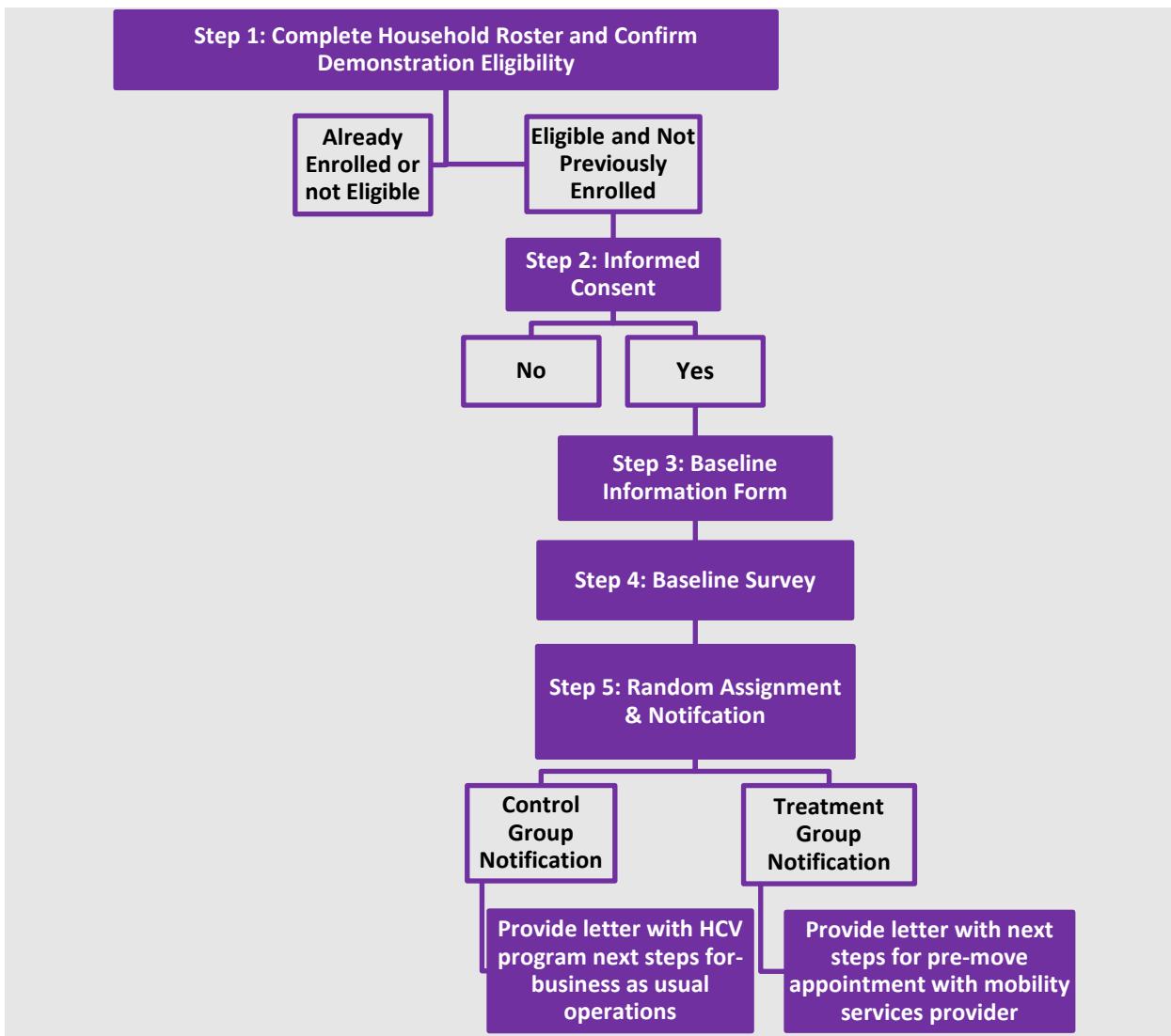
- The individual enrollment meeting is between enrollment staff and the head of household. For existing voucher families, it will generally follow the group Demonstration briefing. However, some families may choose to go directly to the individual enrollment meeting (bypassing the Demonstration briefing). In these cases, information from the Demonstration briefing should be incorporated into the beginning of the enrollment meeting. For waiting list families, the individual enrollment meeting will generally follow the determination of HCV eligibility and the Demonstration briefing.
- There are five components to the individual enrollment meeting, as shown in Exhibit C. Enrollment staff will be guided through this session by the enrollment tool (a secure, web-based tool). The forthcoming training manuals will provide step-by-step instructions for conducting the individual enrollment meeting and using the enrollment tool. This plan includes more information about the PHA specific plans for conducting the individual enrollment session components.
- To minimize data security risks, the study team envisions a “paperless” enrollment process. This means that, to the extent possible, the required baseline survey, information form, and consent forms should be completed electronically, and accessed through the secure online Enrollment Tool, rather than a printed paper copy of each form being provided to the family.

This requires that each family have access to the internet to complete the forms online. If the family does **not** have access to the internet, ideally, they would be able to come to the PHA (or a partner) for access.

- There will be times when families cannot proceed through the enrollment process exclusively using the enrollment tool. For example, there may be internet connectivity issues during an enrollment session. Families with limited English proficiency or other accessibility issues may also require some paper data collection. PHA staff will have access to a paper version of the following forms in English, Spanish, Arabic, Armenian, Bengali, Chinese (Simplified), Chinese (Traditional), Haitian Creole, Hmong, Kurdish (Sorani), Polish, Russian, Somali, and Vietnamese:
 - Baseline Information Form;
 - All versions of the consent form; and
 - Baseline Survey.

[Site Liaisons: Review this process for conducting individual enrollment meetings with the PHA. Does the PHA expect any problems with this process, particularly the paperless enrollment process, and, if so, what challenges do they foresee? What processes can we put in place to alleviate those concerns?]

Exhibit C: Enrollment Meeting Flowchart



Description of Individual Enrollment Meeting Logistics.

- Please describe plans for administering the individual enrollment meetings: how often will individual enrollment meetings be held?
- For existing voucher families, will they always follow the group Demonstration briefing?

Notes:

It is important for PHAs to thoroughly think through the staffing of the enrollment meetings to ensure that the PHA has enough staff available to implement its chosen strategy.

- For example, if the PHA plans to enroll existing voucher families immediately following a group Demonstration briefing, has the PHA identified enough staff to meet with all interested families right away? Families **may** tolerate some amount of wait time if they are enrolling in person. However, in the case of virtual meetings, it is important to avoid any setting that could leave families waiting in an empty breakout room.
- Staff cannot handle multiple enrollments simultaneously, as they will need to focus on each person on a one-on-one basis, and it is too risky to try to juggle two families at once, running the risk that a family needs help and the PHA staff member is not available, leading to the loss of an interested family.

<p>If PHAs do not have enough staff to enroll families immediately following group Demonstration briefings, PHAs may wish to:</p> <ul style="list-style-type: none"> ▪ Have more frequent Demonstration briefings with fewer families in each one, making it easier to cover the individual enrollment meetings that follow. ▪ Hold enrollment meetings with some families immediately following a briefing and make follow-up appts with the other families (if more staff are not available to accommodate families all at once). If PHAs opt for this type of setup, please describe how they will decide which families get to enroll immediately and which ones need to schedule a follow-up meeting. 	
Location/Logistics:	PHA? Remote? Alternate locations? Technology needs? Ability to provide a semi-private space.
Setting:	Individual
Staff responsible:	[]
Number of families expected to attend an individual enrollment meeting each month: (Pilot Phase and Full Implementation Years)	Pilot: Full Implementation:

Step 1: Household Roster and Demonstration Eligibility

In this step, enrollment staff will use the enrollment tool to complete a household roster for the family and confirm the family has at least one child aged 17 or under.

- This process is not really customizable but describes any concerns the PHA has about the process.

Setting:	Individual
Staff responsible:	[]

Step 2: Informed Consent

In this step, the enrollment staff will provide information to the family about the Demonstration and use the enrollment tool to document their informed consent.

- This process is not really customizable but describes any concerns the PHA has about the process.
- Describe any plans to secure consent from other adult household members if they are not present at enrollment. The enrollment tool will send reminder emails once per week for four weeks. Does the PHA plan to do additional follow up during that period?
- NOTE: Family enrollment can continue without the consent of the other adult household members.

Location/Logistics:	PHA? Remote? Alternate locations? Technology concerns etc.
Setting:	Individual
Staff responsible:	[]

Step 3: Baseline Information Form

In this step, the enrollment staff will use the enrollment tool to complete a baseline information form for the family.

- This process is not really customizable.
- Please describe any concerns the PHA has about the process.

Location:	PHA? Remote? Alternate locations?
Setting:	Individual
Staff responsible:	[]

Step 4: Baseline Survey

In this step, the head of household will use the enrollment tool to complete a baseline survey, either online or through a tablet or other computer provided by the PHA.

- Describe logistics for in-person sessions—will all families be in a common area, or will they have a private space to complete the survey? If in a common area, will they have a quiet corner or area where they can position themselves, so no one sees their screen? It is important that families are able to complete their surveys in a manner that preserves their privacy.
- Describe plans for remote enrollment and ensuring families complete the survey. Describe alternative plans if not following the process outlined below.
 - The study team envisions online sessions or breakout rooms remaining open while families complete the baseline survey.
 - Families will open another browser window to access the baseline survey (staff will not be privy to the survey).
 - Staff will remain in the session/breakout room doing other work during this time or return to the session/breakout room once they receive notification that the family has completed the survey in order to continue on to Step 5, conducting random assignment.
 - Staff and families should exchange information before administration of the baseline survey in case the family gets disconnected from the online session or breakout room.
- Using the enrollment tool, the PHA will send the link to the family to complete the baseline survey. PHA will monitor the enrollment tool and be able to see when the baseline survey is complete (but not what the family answered on the survey). If the baseline survey is not completed for any reason, the enrollment tool will send reminders to families every two days for the period in which the survey remains incomplete.
 - Discuss with PHA staff any plans to conduct additional reminders during this period, such as phone calls and at what points in time.
 - If, after repeated contacts, the Baseline Survey remains incomplete, you may contact the study team to request the household be marked as inactive. Once a household has been marked as inactive, the Baseline Survey links will stop being sent automatically.

Location:	PHA? Remote? Alternate locations? Telephone/Virtual?
Setting:	Individual
Staff responsible:	[]

Step 5: Random Assignment and Notification

Once the baseline survey has been completed and submitted, the family will be randomly assigned to the control or a treatment group, and the enrollment staff will notify the family of their assignment.

Assignment to Treatment Group:

- Each time a family is randomly assigned to the treatment group, the enrollment tool will automatically add a new record in the service delivery tool.
- If an existing voucher family is assigned to the treatment group, proceed with instructions to attend pre-move appointment.
- If a waiting list family is assigned to the treatment group, proceed with instructions to attend pre-move appointment and voucher briefing and issuance.
 - Note: Voucher briefing and issuance should be done following normal PHA operations.

Assignment to Control Group:

- If an existing voucher family is assigned to the control group, proceed with normal PHA operations.
- If a waiting list family is assigned to the control group, proceed to voucher issuance.
 - Note: Voucher issuance should be done following normal PHA operations.
- Describe plans to develop site-specific notification letters, customized with the next steps in accordance with PHA existing operations for control group members or proceeding to a meeting with mobility service providers for treatment group members (study team will provide random assignment notification letter templates for sites to customize as needed).
- Describe procedures to notify families if random assignment is done when families are present (a semi-private location would be best in case staff need to address any adverse reactions, particularly from families assigned to the control group). Describe how the procedures to notify families differ if random assignment is done remotely

<p>(families should already be in a semi-private location, either in an online breakout room or an individual online session).</p> <ul style="list-style-type: none"> • Describe procedures for collaboration between PHA and service provider staff to ensure that providers are alerted when they have new families in their queue. 	
Location:	PHA? Remote? Alternate locations?
Setting:	Individual
Staff responsible:	[]

Provision of Incentives

Families receive \$25 incentive for completing the baseline survey.

- Does the PHA provide incentives for any other purposes? If so, please describe that process and discuss if that would work for this.
- Describe plans to provide incentive payments to head of household after enrollment.
- If individual enrollment is in person, will a gift card be provided at the end of the enrollment session? If not, how will it be provided?
- If individual enrollment is remote, how will incentive be provided?
 - Will incentive be a physical gift card or provided as an electronic gift card, or will the PHA provide cash or checks? How will PHAs document that the incentive was provided?
 - What are the reporting requirements?
- If gift card, what kind of gift card does the PHA plan to offer?
- Please provide details of logistics/process. Possible probes: Describe the steps the PHAs will take to obtain the incentives. How will they disperse them? What format will they be in? How will they track them? Are there any other administrative procedures they must follow to obtain or issue the incentives?

Location:	PHA? Remote? Alternate locations?
Setting:	Electronic or physical gift card?
Staff responsible:	[]

Enrollment Close Out Steps

After enrollment is complete, families should be provided with hard copies of their consent form and random assignment notification letter for their records. PHAs should plan to do the following:

In-Person Enrollment

- Provide family with a printed copy of the signed consent form(s) and random assignment notification letter.
- Provide physical gift card or email electronic gift card.
- Describe any additional steps the PHA will require.

Remote Enrollment

- Print and mail family a copy of the signed consent form(s) and random assignment notification letter.
- Include physical gift card with mailing or email electronic gift card.
- Describe any additional steps the PHA will require.

Alternate Location Enrollment

- Describe any differences in procedures if individual enrollment meeting is in an alternate location.

Location:	PHA? Remote? Alternate locations?
Setting:	Individual if in-person; mail if remote
Staff responsible:	[]

ACCOMMODATIONS

This section should describe the basic accommodations that will be made to ensure that people who speak different languages, or have different levels of ability, will have an equal opportunity to learn about and enroll in the Demonstration.

HUD and the Study Team will provide documents related to study enrollment—household roster, baseline information form, consent and parent permission forms, and the baseline survey in English, Spanish, Arabic, Armenian, Bengali, Chinese (Simplified), Chinese (Traditional), Haitian Creole, Hmong, Kurdish (Sorani), Polish, Russian, Somali, and Vietnamese. These languages were picked after polling PHAs about what they thought their most likely language needs would be. PHAs will be responsible for translating outreach and recruitment materials into languages other than English or Spanish. PHAs should always have paper forms handy in case of internet trouble.

- How does the PHA normally accommodate non-English speaking families or families with low literacy?
- How does the PHA normally accommodate persons with disabilities?
- If the PHA plans to deviate from its typical procedures, please document its plans for accommodating non-native speakers and persons with disabilities.
- Please describe the PHA’s plans to conduct recruitment and enrollment if the family’s preferred language is not English or Spanish. PHA staff should make sure to have materials available in the appropriate language and that translators or interpreters are accessible as needed.
- Technology considerations: Do they conduct remote meetings with families now? Are they only by phone or by videoconference? If videoconference, what software do they use? Are they aware of any trouble families have had?
- Other accommodations—for example, offering to meet in a different venue—other than the PHA.

ENGAGING OUTSIDE STAKEHOLDERS TO ASSIST WITH RECRUITMENT

We recognize that, in an effort to assist with recruitment, some PHAs may choose to engage the public and/or community groups to inform them of the Demonstration. Any PHA-created materials that describe the Demonstration should be submitted to the study team for review to ensure the accuracy of any research-related information that is being communicated.

[Site Liaisons: Please determine if PHAs have any plans to engage outside stakeholders for purposes of recruiting families. If so, please indicate what type of stakeholders they plan to engage and request that any communication materials be submitted to the study team for review prior to distribution.]

PILOT GOALS

Prior to the official start of Phase 1 of the Community Choice Demonstration, the Evaluation Team and TA Provider will support a Pilot to test all recruitment, enrollment, randomization, data collection, and mobility service delivery protocols. Site Liaisons and other members of the Evaluation Team will closely monitor the implementation of study procedures and work with PHA enrollment staff to ensure all enrollment procedures are followed with fidelity to study procedures and the Recruitment and Enrollment Plans. The TA Provider will work with the mobility services provider to help ensure mobility-related services are delivered as intended.

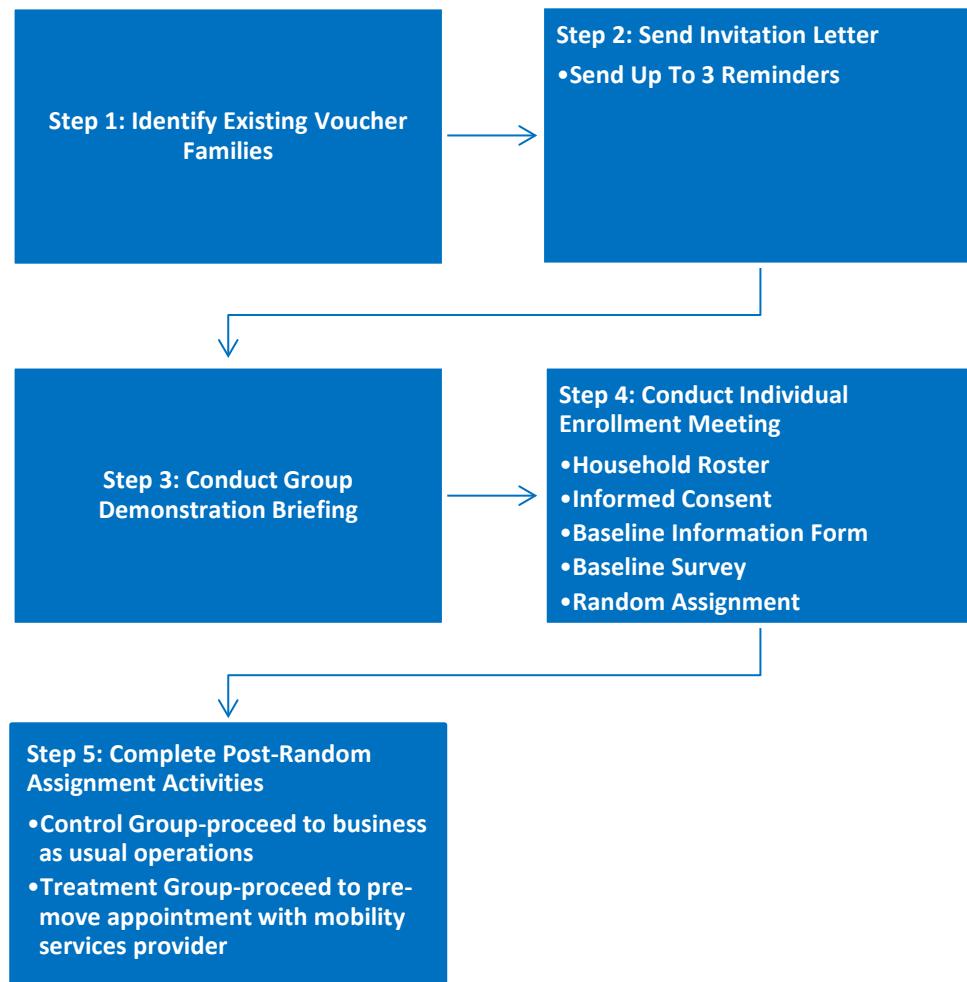
Most site monitoring and support by the Evaluation Team during the Pilot will occur remotely through regular communication with site staff and ongoing review of recruitment, enrollment, and service data. Site Liaisons will also conduct a two-day site visit to observe and support staff in enrollment and random assignment, and to provide additional training to staff as needed. To exit the pilot, each site must also meet the milestones included in the Statement of Responsibilities with HUD. However, achievement of these milestones does not automatically end the pilot.

The Pilot will last six months, with an opportunity to be extended by up to three months in individual sites that need the additional time to be ready to implement a quality program with fidelity to the program model.

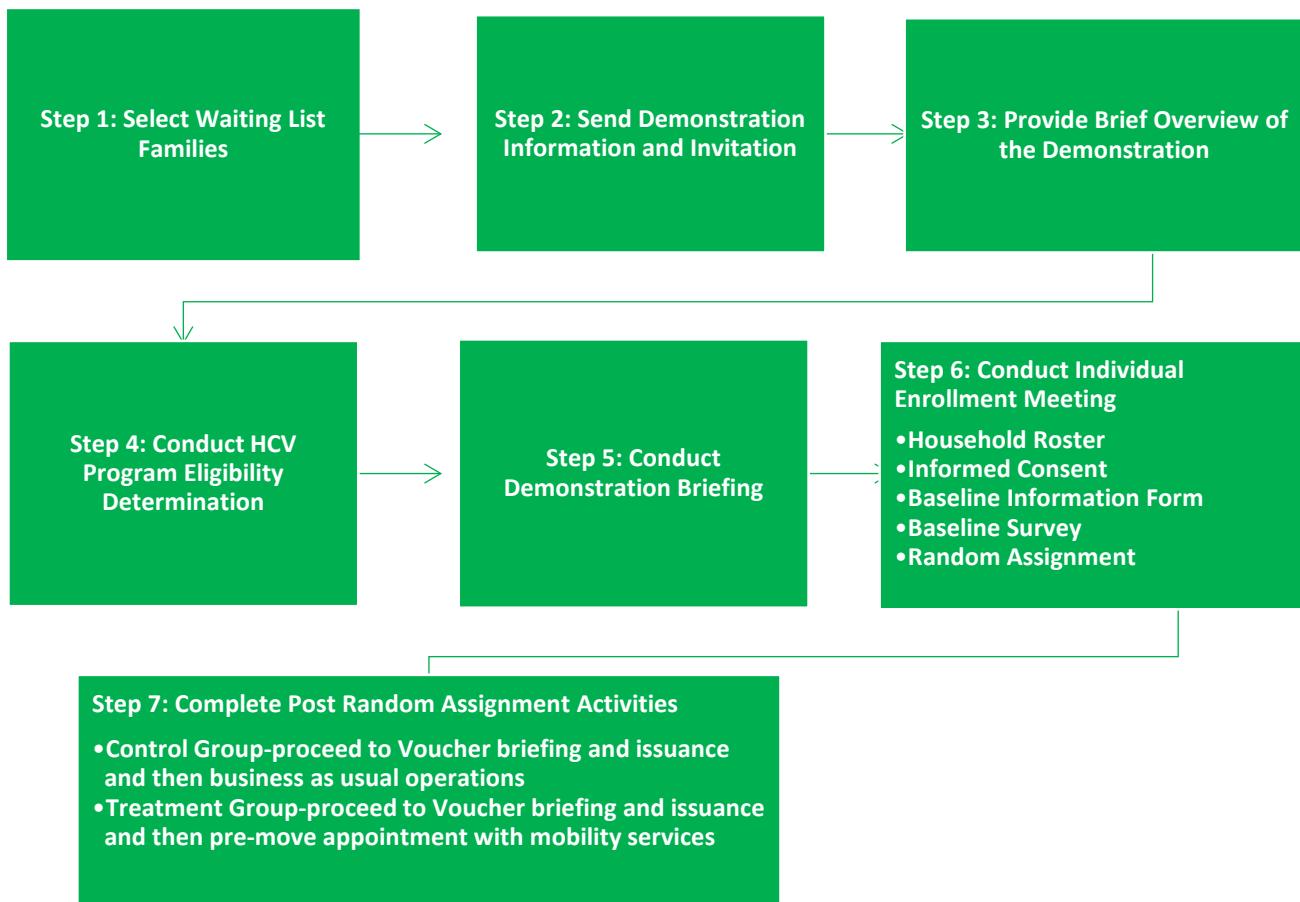
In addition to an assessment of PHAs operating with fidelity to the study procedures and program services model, the evaluation team set the following targets to determine when PHAs are ready to conclude the pilot and move to full operation. The Pilot at each site will be considered complete when the site has met the following criteria:

- Invited at least 245 existing voucher families and 10 waiting list families to participate in the study.
- Enrolled at least 70 families into the Demonstration, including 35 families into the treatment group.
- For those enrolled in the treatment group, at least 30 must have participated in at least the first meeting (the pre-move appointment) with their assigned mobility services coach, with the meetings proceeding in accordance with the mobility services model.
- At least 15 families must have progressed to the stage of actively searching for housing, with referrals provided by the mobility services provider, with the process proceeding according to the mobility services model.
- At least five families have turned in a Request for Tenancy Approval (RTFA) packet for a unit in an opportunity area to provide an opportunity to test the expedited leasing protocols.
- At least three families have received a payment from the PHA or mobility services provider for family financial assistance.
- At least two property owners have received a payment from the PHA or mobility services provider for property owner incentives.
- Have submitted at least one invoice for mobility-related services to HUD.
- Have completed all required trainings.
- Are properly entering data into VMS and PIC.
- Are properly entering data into the services delivery tool or the PHA equivalent tool.
- Have implemented the required waiting list preference, meaning the PHA has updated its Administrative Plan with the preference and is able to select families from the waiting list that meet the preference.

Attachment A1: Community Choice Demonstration—Existing Voucher Family Complete Enrollment Cycle



Attachment A2: Community Choice Demonstration Waiting List Family Complete Enrollment Cycle



Attachment B1: Existing Voucher Families-Outreach, Recruitment, and Enrollment Tracking Log

Month	Number of Invitations Sent	Number of Families Who Attended Group Demonstration Briefing	Number of Families Who Attended an Individual Enrollment Meeting	Number of Families Who Enrolled	Notes
August 2022					
September 2022					
October 2022					
November 2022					
December 2022					

NOTE: Complete this spreadsheet based on the numbers achieved in each month. This is not intended to follow specific cohorts of individuals defined by their initial invitation date.

Attachment B2: Waiting List Families-Invitation and Enrollment Tracking Log

Month	Number of Families Invited to Learn about the Demonstration	Number of Families Who Respond to the Invitation and Seek to Learn More about the Demonstration	Number of Families Who are Confirmed Eligible for HCV Program	Number of Families Who Attend Demonstration Briefing	Number of Eligible Families Who Attend Individual Enrollment Meeting	Number of Families Who Enrolled	Notes
August 2022							
September 2022							
October 2022							
November 2022							
December 2022							

NOTE: Complete this spreadsheet based on the numbers achieved in each month. This is not intended to follow specific cohorts of individuals defined by their initial invitation date.

Attachment C: Initial Projections of Outreach and Enrollment Flow

Full Implementation Period

	Percent of Families Expected to Enroll*	Number of Families Per Year in Phase 1 (Feb. 2023–Sept. 2024)	Number of Families Per Month in Phase 1 (Feb. 2023–Sept. 2024) **
Existing Voucher Families			
Initial Invitation Letters Sent		3,964	330
Attend Demonstration briefing	29%	1,149	96
Attend Enrollment Session	18%	713	59
Consent to Enroll	11%	436	36
Waiting List Families			
Initial Invitation Letters Sent		60	5
Attend Demonstration briefing	57%	34	3
Attend Enrollment Session	47%	28	2
Consent to Enroll	30%	18	2
Total Households Enrolled		454	38

* Percentages all based off initial number of invitations

Note: The last column shows targets on a monthly basis, but sites will likely pull waiting list families on a semi-annually or quarterly basis and should adjust the number of invitations to waiting list families accordingly.

Phase 1 Pilot Period

	Percent of Families Expected to Enroll*	Total Number of Families During Pilot Period	Number of Families Per Month During Pilot Period*
Existing Voucher Families			
Initial Invitation Letters Sent		637	110
Attend Demonstration briefing	29%	185	32
Attend Enrollment Session	18%	115	20
Consent to Enroll	11%	70	12
Waiting List Families			
Initial Invitation Letters Sent		14	5
Attend Demonstration briefing	57%	8	3
Attend Enrollment Session	47%	7	2
Consent to Enroll	30%	4	1
Total Households Enrolled		74	13

* Percentages all based off initial number of invitations

** Note: The last column shows targets on a monthly basis, but sites will likely pull waiting list families on a semi-annually or quarterly basis and should adjust the number of invitations to waiting list families accordingly.

[Site Liaisons: For ease of reference, the tables above indicate monthly enrollment in the last column for existing voucher families. For waiting list families, we provide these numbers monthly, but our recommendation is that PHAs pull waiting list families on a semi-annual or quarterly basis. Please adjust these numbers accordingly based on PHA plans for waiting list pulls.]

Appendix 8: Household Roster and Baseline Information Form

Enrollment is a five-step process. This document includes two of the components: the Household Roster (step 1 below) and Baseline Information Form (step 3 below):

- 1) Household Roster [Administered by PHA staff; either in-person or remotely (videoconference or phone) and entered into the Enrollment Tool].
- 2) Informed Consent [Administered by PHA staff; either in-person or remotely (videoconference or phone) and entered into the Enrollment Tool].
 - a. Head of Household Consent.
 - b. Consent for Child Data Collection (signed by Head of Household).
 - c. 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 and entered into the Enrollment Tool].
- 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].

The Household Roster and the Baseline Information Form are administered by PHA staff as online forms to the heads of all households enrolling in the Demonstration. A small amount of information (the Household Roster) is collected from the head of household prior to the head of household providing consent to participate, and more information (the Baseline Information Form) is collected from the head of household after they provide consent.]

INTRODUCTION

The information I am going to ask you about will only be used for the Community Choice Demonstration.

This research is conducted under the authority of the Secretary of the U.S. Department of Housing and Urban Development to undertake programs of research, studies, testing, and demonstration related to the mission and programs of HUD (12 USC 1701z-1 et seq.).

The information you provide may be used to help HUD improve the voucher program. I am going to record your name, date of birth, and Social Security number to confirm that you have not already enrolled in the Community Choice Demonstration. You will be asked some questions about your contact information and the members of your household. Your responses will not affect your current or future receipt of housing assistance or other benefits. The collection of this information has been

approved by the Office of Management and Budget under OMB No. 2528-0337, which expires on 06/30/2025. Please remember that your participation is voluntary, and you can choose not to answer any question. We appreciate your input.

The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to evaluate the U.S. 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 OMB number and expiration date for this collection are OMB #: 2528-0337, Exp: 06/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Anna P. Guido at Anna.P.Guido@hud.gov or 202-402-5535.

[UPPERCASE LETTER ("A," "B,"...) DENOTES A SEPARATE SURVEY ITEM.]
HOUSEHOLD ROSTER—BEFORE CONSENT FOR THE STUDY

1. *For PHA staff [not asked to the head of household]:* PHA Name:

[This element will be pre-filled by the Enrollment MIS, and the PHA user will not be able to edit it.]

2. *For PHA staff [not asked to the head of household]:* Is the family an existing voucher family or a new admissions voucher family?
 - (1) Existing voucher family
 - (2) New admissions voucher family
3. *For PHA staff:* Head of household information *[If possible, please copy and paste from your records. If not possible, ask for information (except Household ID number) from head of household.]:*
 - A. First Name, Middle Name, Last Name, Suffix
 - B. Date of Birth (MM/DD/YYYY)
 - C. Social Security Number
 - D. *[If no SSN]* Alien Registration Number
 - E. *[PHA]* Household ID Number

Please collect the following information from the head of household before you begin the consent process with the head of household. If desired, PHA staff can use PHA records to fill in the number of children and adults, names, and ages before the enrollment meeting begins, then confirm this information during the enrollment meeting.

Your household includes everyone who lives with you.

4. How many children aged 17 or younger are in your household? [New question]

5. [Loop over # of children provided in Q4] For Child #, please tell me their first and last name, and age in years.

A. First name

B. Last name

C. Age in years

D. Are you the parent or guardian of this child? [CMTO]

(1) Yes [SKIP TO NEXT CHILD. If this is the LAST CHILD, skip to question 6.]

(2) No

E. Does the parent or guardian of this child live in the household with you? [NEW]

(1) Yes

(2) No [SKIP TO NEXT CHILD. If this is the LAST CHILD, skip to question 6.]

F. What is the name of the parent or guardian? [NEW]

(1) First name

(2) Last name

G. How is this child related to the parent or guardian? [NEW]

(1) Birth child

(2) Adopted child

(3) Grandchild

(4) Foster child

(5) Birth child of Spouse/Partner

(6) Other _____

(7) Prefer not to answer

6. How many people aged 18 and over are there in your household other than yourself? [New question]

7. [Loop over # of adults provided in Q6] For Adult # other than yourself, please tell me their first name, last name, and age in years.

8. First name

- A. Last name
- B. Age in years
9. What is the primary (or main) language that your family speaks at home? (*Programmer: Customize list for each site.*) [CMTD-modified]
- (1) English
 - (2) Spanish
 - (3) Mandarin
 - (4) Cantonese
 - (5) Tagalog
 - (6) Vietnamese
 - (7) Arabic
 - (8) French or French Creole
 - (9) Korean
 - (10) Russian
 - (11) German
 - (12) Other (specify) _____
 - (13) Prefer not to answer
10. Which language would you prefer for the consent form and baseline survey form? [New question]
(Select only one answer.)
- (1) English
 - (2) Spanish
 - (3) Other: _____
11. To make sure we can reach you in the future, we would like to confirm your contact information. What is your cell phone number?
- _____
12. If you have an additional phone number, please tell me that number:
- (1) No additional number
 - (2) Number _____

13. May we send text messages to your cell phone? Message and data rates may apply.

- (1) Yes
- (2) No

14. May we leave you voice messages?

- (1) Yes
- (2) No

15. What is your email address?

16. May we send you email messages?

- (1) Yes
- (2) No

17. What is the best method for the study to contact you: phone, email, or text?

- (1) Phone or voice message
- (2) Email
- (3) Text message
- (4) No preference

Baseline Information Form (Bif)– After Consent

[Note to reviewers: Some of the questions include brackets at the end indicating whether the question was adopted or adapted from other prior surveys. These references will not be included in the questions read by PHAs or answered by families.]

Please collect the following information from the head of household after the head of the household has provided consent:

18. For PHA staff: Head of household's physical address (*If existing voucher family, please copy and paste from your records. If not possible, ask for information from head of household*):

- A. Street Address, Apt. No
- B. City
- C. State
- D. Zip Code

19. Is this address the best address to mail something to you?

- (1) Yes (*Skip to BIF20*)
- (2) No

20. If not, what address should we use if we mail something to you?

- A. Street Address, Apt. No.
- B. City
- C. State
- D. Zip Code

We would also like to collect contact information for three people who will always know how to reach you but who live at a different address than you. This information will be used by [PHA] and our research partners if we have a hard time reaching you and will be kept strictly confidential.

21. [*Other Contact. PHA staff will confirm from options “Supplement to Application for Federally Assisted Housing” if completed or collect below if not completed.*] Could you tell us the name of a person **who does not live with you** but who will always know how to contact you?

- A. First Name, Middle Name, Last Name, Suffix
- B. Street Address, Apt. No.
- C. City
- D. State
- E. Zip Code
- F. Cell Telephone Number
- G. Home Telephone Number
- H. Relationship (friend, relative, please specify)
- I. Email address

22. Could you tell us the name of a second person **who does not live with you** but who will always know how to contact you?

- A. First Name, Middle Name, Last Name, Suffix
- B. Street Address, Apt. No.
- C. City
- D. State
- E. Zip Code
- F. Cell Telephone Number
- G. Home Telephone Number

- H. Relationship (friend, relative, please specify)
- I. Email address
23. Could you tell us the name of a third person ***who does not live with you*** but who will always know how to contact you?
- A. First Name, Middle Name, Last Name, Suffix
 - B. Street Address, Apt. No.
 - C. City
 - D. State
 - E. Zip Code
 - F. Cell Telephone Number
 - G. Home Telephone Number
 - H. Relationship (friend, relative, please specify)
 - I. Email address

Now I'd like to ask you a few more questions about the people in your household.

24. A. [Loop over adults named in Household Roster Q7] How is [Name of Adult #] related to you? [ACS-modified]
- (1) Spouse/Partner
 - (2) Child of household head
 - (3) Parent of household head
 - (4) Live-in aide
 - (5) Other _____

We would like to ask [Name of Adult #] if they will agree to be part of this study. We are asking for the contact information of [Name of Adult #] so we can send them a consent form to sign.

23. B. What is the cell phone number of [Name of Adult #]?
-

23. C. What is the email address of [Name of Adult #]?
-

23. D. [IF BIF23A NOT EQUAL TO Live-in aide] Is [Name of Adult #] currently working for pay? [CMTO-modified]

- (1) Yes

(2) No

(3) Prefer not to answer

23. E. [IF BIF23D = Yes] What zip code or street and city does [Name of Adult #] currently work in, or does he or she work in multiple neighborhoods? [CMTO-modified]

(1) _____ (5 character zip code)

(2) [*If zip code not known*] Street address and city (or street and city): _____
(255 characters)

(3) Neighborhood or town name: _____

(4) Multiple neighborhoods

(5) Don't Know

Now I would like to ask you a few questions about your children, their schools, and their health.

25. A. [Loop over children named in Household Roster 7] How is [Name of Child #] related to you? [ACS-modified; MTO response categories]

(1) Birth child

(2) Adopted child

(3) Grandchild

(4) Foster child

(5) Birth child of Spouse/Partner

(6) Other _____

(7) Prefer not to answer

26. B. What grade is [Name of Child #] in? [CMTO]

(1) ____ grade

(2) Pre-School (a place intended for children between 2 and 4 years of age)

(3) Pre-K (a place intended for children between 4 and 5 years of age)

(4) Kindergarten

(5) Post-secondary school

(6) Not in school (Skip to BIF24J)

(7) Other (specify) _____

(8) Prefer not to answer

24. C. [If the child's age is less than 7] What types of childcare do you use for [Name of Child #]? (Check all that apply) [CMTO-modified]

- (1) I do not use outside childcare
- (2) Head Start daycare center or school kindergarten
- (3) Babysitter or childcare provider who is a relative
- (4) Babysitter who is not a relative
- (5) Private daycare from a center
- (6) Other (specify) _____
- (7) Prefer not to answer

24.D. Which school (or Pre-K/Pre-school program) is [Name of Child #] currently attending? [CMTO]

- (1) Name [Select from pre-populated list if possible]: _____
- (2) Name (type in if not in list) _____
- (3) Prefer not to answer

24. E. How satisfied or dissatisfied are you with the school (or Pre-K/Pre-school program) that [Name of Child #] attends this year? [PFI-NHES-modified]

- (1) Very satisfied
- (2) Somewhat satisfied
- (3) Somewhat dissatisfied
- (4) Very dissatisfied
- (5) Prefer not to answer

24. F. Does [Name of Child #] go to a special class for gifted students or do advanced work in any subjects? [MTO]

- (1) Yes
- (2) No
- (3) Prefer not to answer

24. G. Was [Name of Child #] enrolled in special education in the past year, or does he or she have an IEP or 504 plan? [CMTO]

- (1) Yes
- (2) No

(3) Prefer not to answer

24. H. During the past two years, has anyone from this [Name of Child #]'s school contacted you to talk about problems he or she was having with schoolwork or behavior? [MTO-modified]

(1) Yes

(2) No

(3) Prefer not to answer

24. Ia. Other than typical grade promotion, are you currently considering transferring him or her to a different school (or Pre-K/Pre-school program)? [CMTO]

(1) Yes

(2) No

(3) Not sure

(4) Prefer not to answer

24. Ib. [*If BIF24Ia = yes*] What is the reason you are considering transferring him or her to a different school (or Pre-K/Pre-school program)?

(1) _____

(2) Prefer not to answer

24. J. Does [Name of Child #] have a disability or chronic physical or mental health condition (such as asthma, diabetes, or ADHD)? [New question]

(1) Yes

(2) No

(3) Prefer not to answer

24. K. [*If BIF24J = yes*] What is/are the condition(s)? CHECK ALL THAT APPLY [New question]

(1) Asthma

(2) Diabetes

(3) ADHD

(4) Other _____

(5) Prefer not to answer

24. L. [*If BIF24K.(3) Asthma is checked*] During the past 12 months, has [Name of Child #] visited an emergency room or urgent care center because of his or her asthma? [NHIS]

(1) Yes

(2) No

(3) Prefer not to answer

24. M. [*If Child # age is 5 years or older*] How often does [Name of Child #] seem very anxious, nervous, or worried? Would you say... [WG/UNICEF CFM]

(1) Daily

(2) Weekly

(3) Monthly

(4) A few times a year

(5) Never

(6) Prefer not to answer

24. N. [*If Child # age is 5 years or older*] How often does [Name of Child #] seem very sad or depressed? Would you say... [WG/UNICEF CFM]

(1) Daily

(2) Weekly

(3) Monthly

(4) A few times a year

(5) Never

(6) Prefer not to answer

24. O. How tall is [Name of Child #] without shoes? [NHIS-modified]

Feet _____

Inches _____

Don't know

Prefer not to answer

24. P. How much does [Name of Child #] weigh now? [NHIS-modified]

(1) _____ pounds

(2) Don't know

(3) Prefer not to answer

APPENDIX 8: HOUSEHOLD ROSTER AND BASELINE INFORMATION FORM

Sources for Questions (Referenced in Item-by-Item Justification)

Acronym	Full Source Name
ACS	American Community Survey
CMTO	Baseline survey from the Creating Moves To Opportunity Demonstration
CPSFSS	Current Population Survey Food Security Supplement
GSS	General Social Survey
FTHB	Baseline survey from the HUD First-Time Homebuyer Education and Counseling Demonstration
HFSSM: Six-Item	U.S. Household Food Security Survey Module: Six-Item Short Form, Economic Research Service, USDA (September 2012)
HPQ	World Health Organization Health and Work Performance Questionnaire
K6	Kessler-6 items for psychological distress (Kessler et al. 2003)
MTO	Baseline survey from HUD's Moving to Opportunity for Fair Housing Demonstration
MCSUI	Multi-City Study of Urban Inequality
NHIS	National Health Interview Survey
PFI-NHES	2019 Parent and Family Involvement in Education Survey – National Household Education Surveys Program
Rent Reform (baseline)	Baseline information form from HUD's Rent Reform Demonstration
WG/UNICEF CFM	Washington Group/UNICEF Child Functioning Module

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Appendix 9: Baseline Survey

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]
 - a. Head of Household Consent
 - b. Consent for Child Data Collection (signed by Head of Household)
 - c. 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 the 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 U.S. 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. 2528-0337, which expires on 06/30/2025. Send comments

regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Anna P. Guido at Anna.P.Guido@hud.gov or 202-402-5535.

[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 the 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?
 - (1) In an apartment, home, or room that you rent or sublet
 - (2) In a home or apartment that you own
 - (3) In an apartment, home, or room that friends or extended family rents where you contribute to part of the rent
 - (4) With friends or family, where you do not pay any rent
 - (5) Homeless or in a group shelter (*Skip current home items: Q2, Q6H, Q6I*)
 - (6) Other housing arrangement: _____
 - (7) Prefer not to answer
2. 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”?
 - A. Strongly agree
 - B. Agree
 - C. Agree somewhat
 - D. Disagree
 - E. Strongly disagree
 - F. Prefer not to answer
3. How many years have you lived in the [SITE/METROPOLITAN AREA NAME] area in your lifetime?
 - (1) Number of years (please round to the nearest number): _____
 - (2) Less than one year
 - (3) I don’t live in the [SITE] area
 - (4) Prefer not to answer

4. How many years have you lived in your current neighborhood?
 - (1) Number of years (please round to the nearest number): _____
 - (2) Less than one year
 - (3) Prefer not to answer
5. Which of the following statements best describes how satisfied you are with your current neighborhood?
 - (1) Very satisfied
 - (2) Somewhat satisfied
 - (3) In the middle
 - (4) Somewhat dissatisfied
 - (5) Very dissatisfied
 - (6) Prefer not to answer

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

6. 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]
 - A. The friendliness of neighbors in your neighborhood?
 - B. The racial and ethnic mix of your neighborhood?
 - C. How near your neighborhood is to your job? [Responses: Very satisfied to Very dissatisfied, Not applicable, Prefer not to answer]
 - D. Your neighborhood’s access to public transportation?
 - E. The appearance of your neighborhood (cleanliness, lack of graffiti)?
 - F. The amenities of your neighborhood (parks, access to shops, places of worship, schools, dining)?
 - G. How near your neighborhood is to your family and friends?
 - H. The size of your home? [Skip if Q1 = 5]
 - I. The quality of your home? [Skip if Q1 = 5]

7. 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”?
- (1) Strongly agree
 - (2) Agree
 - (3) Agree somewhat
 - (4) Disagree
 - (5) Strongly disagree
 - (6) Prefer not to answer
8. 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
9. 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
10. How safe are the streets near your home at night?
- (1) Very safe
 - (2) Safe
 - (3) Somewhat unsafe
 - (4) Unsafe
 - (5) Very unsafe
 - (6) Prefer not to answer

11. How often are you worried about gun violence in your neighborhood?

- (1) None of the time
- (2) A little of the time
- (3) Some of the time
- (4) Most of the time
- (5) All of the time
- (6) Prefer not to answer

12. Please tell me if any of the following things have happened to you or anyone who lives with you in the past 6 months:

- A. Was anyone's purse, wallet, or jewelry snatched from them? [Yes, No, Prefer not to answer]
- B. Was anyone threatened with a knife or gun? [Yes, No, Prefer not to answer]
- C. Was anyone beaten or assaulted? [Yes, No, Prefer not to answer]
- D. Was anyone stabbed or shot? [Yes, No, Prefer not to answer]
- E. Did anyone try to break into your home? [Yes, No, Prefer not to answer]

13. 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.]

- A. One or more of my children's childcare providers
- B. One or more of my children's after-school activities
- C. My job or the job of another person in the household
- D. Other family members who do not live with me
- E. Close friends who do not live with me
- F. My church or place of worship
- G. Other community groups I or my family is involved with
- H. My primary care doctor
- I. The primary care doctor of one or more of my children
- J. Other medical services that I or others in the household use regularly
- K. Other important services (specify)_____
- L. Prefer not to answer

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

14. .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

15. 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.

16. 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

17. Is the apartment or house that you identified in your current neighborhood?

- (1) Yes
- (2) No (*Skip to Q21*)
- (3) Prefer not to answer

18. [*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.

- A. I want to keep my children in the same schools
- B. I want to stay near my childcare
- C. I want to stay near my job
- D. I want to stay near my family and friends
- E. For another reason (Please specify) _____
- F. Prefer not to answer [*“Prefer not to answer” response cannot be combined with any other responses.*]

19. Are you willing to consider moving to a new neighborhood?

- (1) Yes
- (2) No (*Skip to Q25*)
- (3) Prefer not to answer

20. How sure are you that you could find a home in a new neighborhood in [Site]?

- (1) Very sure
- (2) Fairly sure
- (3) Not very sure
- (4) Not at all sure
- (5) Prefer not to answer

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

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

22. 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?

- (1) Very comfortable
- (2) Comfortable
- (3) In the middle
- (4) Uncomfortable
- (5) Very uncomfortable
- (6) Prefer not to answer

23. 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.

24. 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.]?
- In trying to rent or buy an apartment or house?
 - In your child's school?
 - By public housing agency staff?
 - By your neighbors?
 - By law enforcement?
 - When looking for employment?
 - At some other time: _____? [Open end, without yes/no response options]
 - Prefer not to answer

The next set of questions are about your household finances.

25. In general, how do your household's finances usually work out at the end of the month?

- There is some money left over
- There is just enough to make ends meet
- There is not enough money to make ends meet
- Prefer not to answer

26. Do you currently have a savings or checking account at a bank or a credit union?

- Yes
- No
- Prefer not to answer

27. 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.

- Very sure
- Fairly sure
- Not very sure
- Not at all sure
- Prefer not to answer

28. Do you currently have any past due balances owed for utilities such as gas, electricity, or water?
- (1) Yes
 - (2) No
 - (3) Prefer not to answer
29. In the past, have you ever had a rental application denied by a landlord or rental agent/property manager because of your credit score?
- (1) Yes
 - (2) No
 - (3) Prefer not to answer
30. Do you think a landlord will find problems with your credit when they do a credit check to approve your application?
- (1) Yes
 - (2) No
 - (3) Prefer not to answer
31. During the past seven years, has a landlord ever told you to leave your rental unit because of nonpayment of rent or lease violations?
- (1) Yes
 - (2) No (*Skip to Q33*)
 - (3) 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?
- (1) Yes
 - (2) No
 - (3) Prefer not to answer
33. 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.
- (1) Yes
 - (2) No
 - (3) Prefer not to answer

34. 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?

- (1) Yes
- (2) No (*Skip to Q35*)
- (3) 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.

35. Are you currently working for pay?

- (1) Yes
- (2) No (*Skip to Q40*)
- (3) Prefer not to answer (*Skip to Q40*)

36. 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.*)

- (1) _____ hours
- (2) Prefer not to answer

37. How do you usually get to work? If you work at multiple jobs or locations, think about the one you work at most often.

- (1) By car or carpool
- (2) By bus, subway, or other public transportation
- (3) Walking
- (4) I work at home (*Skip to Q40*)
- (5) Other (specify) _____
- (6) Prefer not to answer

38. How long does it take you to get to your job?

- (1) _____ minutes
- (2) I have multiple employment locations (*Skip to Q40*)
- (3) Prefer not to answer

39. What zip code (or street address and city) do you currently work in?

- (1) _____ (5 character zip code)
- (2) *[If zip code not known]* Street address and city: _____ (255 characters)
- (3) I work in multiple employment locations
- (4) Prefer not to answer

40. Do you or anyone in your household have a valid driver's license?

- (1) Yes
- (2) No
- (3) Prefer not to answer

41. Do you or anyone in your household usually have access to a car that runs?

- (1) Yes
- (2) No
- (3) Prefer not to answer

The next two questions are about education.

42. Are you currently attending school or taking classes?

- (1) Yes
- (2) No
- (3) Prefer not to answer

43. What is the highest level of education that you have completed?

- (1) Grade 9 or less
- (2) Grade 10 or grade 11
- (3) Attended grade 12 but did not receive high school diploma or GED certificate
- (4) High school diploma
- (5) GED certificate

- (6) Some vocational/technical/business courses
- (7) Vocational/technical/business certificate or diploma
- (8) Some college
- (9) Associate's or two-year college degree
- (10) Bachelor's or four-year college degree or higher
- (11) Prefer not to answer

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

44. 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?

- (1) Very happy
- (2) Pretty happy
- (3) Not too happy
- (4) Prefer not to answer

45. 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
A. ...nervous?						
B. ...hopeless?						
C. ...restless or fidgety?						
D. ...so depressed that nothing could cheer you up?						
E. ...that everything was an effort?						
F. ...worthless?						

The next few questions are about your health.

46. In general, how would you rate your overall health now? Is it...

- (1) Excellent
- (2) Very good
- (3) Good
- (4) Fair
- (5) Poor
- (6) Prefer not to answer

47. Do you currently have health insurance coverage?

- (1) Yes
- (2) No
- (3) Prefer not to answer

48. Do all of your children who are aged 17 or younger currently have health insurance coverage?

- (1) Yes
- (2) No
- (3) Prefer not to answer

49. Are you currently pregnant?

- (1) Yes
- (2) No
- (3) Not applicable
- (4) Prefer not to answer

50. Has a doctor or other health professional ever told you that you had gestational diabetes, a type of diabetes that occurs only during pregnancy?

- (1) Yes
- (2) No
- (3) Not applicable
- (4) Prefer not to answer

51. [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

52. How tall are you without shoes?

- A. Feet _____
- B. Inches _____
- C. Prefer not to answer

53. [If Q49= “No” or “Prefer not to answer”] How much do you weigh?

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

A. Pounds _____

B. Prefer not to answer

The last few questions are about your background.

54. Do you consider yourself to be Spanish, Hispanic, or Latino?

(1) Yes

(2) No

(3) Prefer not to answer

55. Do you consider yourself to be: (Check all that apply)

A. American Indian or Alaska Native

B. Asian

C. Black or African American

D. Native Hawaiian or Other Pacific Islander

E. White

F. Some other race (Specify) _____

G. Prefer not to answer

56. In what country were you born?

(1) USA (*Skip to End*)

(2) Another country (Specify) _____

(3) Prefer not to answer

57. How many years have you lived in the United States?

(1) _____

(2) 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 the next steps you should take. This letter will be accompanied by a \$25 gift card.

OMB No. 2528-0337

Exp. 06/30/2025

PHA Household ID: _____

Appendix 10: Interview Guide for PHA Staff

CONSENT

Before we begin, I want to tell you a few things about this study and your participation in it. If you would like translated materials, or to complete the survey in a language other than English, please let us know, and we will do our best to accommodate you. If you need information to be presented in an accessible format, for example, Braille, audio, large type, or sign language interpreters, or need a reasonable accommodation (a change or adjustment) so that you can participate, please let us know. Please feel free to ask me any questions you might have. We will also [email/give] you a copy of this information.

The U.S. Department of Housing and Urban Development (HUD) hired a research team to conduct a study on HUD's Community Choice Demonstration (Demonstration) program. The research team is led by Abt Associates and includes the Urban Institute, MEF Associates, Sage Computing, Social Policy Research Associates, a team of consultants, and other researchers that may be added in the future. The research team and HUD want to determine whether and to what extent mobility-related services are effective in helping Housing Choice Voucher (HCV) holders move to opportunity neighborhoods. During this interview, we will ask you questions about the Demonstration, including questions about your role and [PHA NAME's] involvement in the Demonstration, your perspective on the Demonstration, and how well the Demonstration meets the needs of participating families.

We are not evaluating your agency or its services. As part of this process, we are talking with representatives from PHAs participating in the Demonstration [IF PHA DOES NOT PROVIDE MOBILITY-RELATED SERVICES IN-HOUSE: along with mobility services providers if services are provided through external partners]. We will be conducting at least two rounds of interviews, and we may reach out to you again in a couple of years for an additional interview.

I am required to tell you that the questions in this survey have been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. This collection of information is voluntary and will be used to evaluate the U.S. Department of Housing and Urban Development's Community Choice Demonstration. The information requested under this collection is fully protected and kept private to the extent permitted by law, including 5 U.S.C. 552a (Privacy Act of 1974) and OMB Circular No. A-130.

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 and expiration date for this collection are OMB #: 2528-0337, Exp: 06/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Anna P. Guido at Anna.P.Guido@hud.gov or 202-402-5535.

During the interview, one of the researchers will be taking detailed notes, but we will not identify your name in our notes. With your permission, we will audio record the interview to have an accurate record of what is said as a backup to our notes. We may contact you after the interview to ask for clarification. No one outside the research team will see any information that identifies you personally, listen to the audio recordings, or review the notes we take. We will make every effort to protect your privacy to the extent permitted by law, but if we think you are at risk of physical or emotional harm, we may need to notify someone.

Themes across all the interviews we are conducting will be published in a report to HUD. When we write our reports and discuss our findings, the answers you provide during an interview will be combined with answers from many individuals. We never share any information that identifies you or any other respondents by name outside of our research team. However, we may identify the agency you work for, and unique roles could allow an individual to indirectly attribute a statement to you. We make every effort to avoid this, but you should be aware of the possibility.

Do you have any questions about the study or today's discussion? *[Pause for response and address any questions]*

Do you agree to participate? *[Pause for response]*

Are you comfortable with this interview being recorded? *[Pause for response]*

Thank you, we are going to turn on the audio recorder now.

The tape recorder is now on.

Do you have any questions before we continue?

OK, let's start.

Thank you for taking the time to talk with us today.

BACKGROUND [ALL RESPONDENTS]

First, we'd like to hear about your organization and your position here. Please tell us about how you ended up working here and your role at [PHA].

1. Tell me about your current position.
 - a. How long have you held this position?
 - b. *[If new to the position]* What was your previous position?
2. What are your primary responsibilities at [PHA]?
 - a. What are your responsibilities related to the mobility demonstration?
3. How much of your time do you spend on the mobility demonstration?

Probes: Time with participating families assigned to the treatment group, time with contracted services staff or service provider, time with collaborating PHAs?

INSTITUTIONAL CONTEXT [ALL RESPONDENTS]

We would like to hear about [PHA]’s motivation for joining the mobility demonstration, and any previous experience [PHA] might have with providing mobility-related services before joining the demonstration.

4. Tell me about any role you played in helping the PHA to apply for the demonstration.
5. What motivated [PHA] to pursue the mobility demonstration opportunity? What was appealing about it?
 - a. How does the demonstration opportunity align with [PHA]’s mission? And organizational priorities?

Probes: Additional vouchers or service dollars, addressing challenges facing HCV participants, expanding housing choice, and improving location outcomes?

 - a. What are you hoping to achieve through the demonstration program?
6. Has [PHA] focused on facilitating neighborhood choice in the past, before applying for the mobility demonstration?
 - a. Which, if any, services or administrative policy options did you provide to standard voucher holders to support moves to opportunity areas before the demonstration?

Probes: Provided information (about neighborhoods or schools), housing/apartment lists, search assistance, provided mobility-related services, referrals to mobility-related services, alternative payment standards (neighborhood rents or SAFMRs), security deposit assistance or other financial support, financial incentives for owners, regional portability (defined as {PHA-SPECIFIC DETAIL})?

 - a. When did the agency offer these services or policy options?
7. How about now? Does [PHA] currently provide any mobility-related services or administrative policy options to standard voucher recipients—separate from the [MOBILITY PROGRAM] efforts?
 - a. *[If yes]* Which services? Tell me about them.
 - b. *[If yes]* Are those services still available to [PHA name] voucher holders?
 - c. *[If yes]* What proportion of PHA voucher participants would you say receive these services?

Probes: Specific mobility-related services, information about neighborhoods or schools, housing/apartment lists, search assistance, provided mobility-related services, referrals to mobility-related services, alternative payment standards (neighborhood rents or SAFMRs), regional portability?
8. Have standard HCV program operations changed in any way because of mobility demonstration participation?
 - a. *[If yes]* What has changed? Can you give examples? What prompted these changes?

Probes: Staffing or staff roles, HCV admission processes, administrative policies (search times, portability, payment standards, occupancy standards, HQS inspections, lease-up processes), availability of mobility-related services, alignment with partner PHA procedures, definitions of opportunity areas, tracking of voucher holders' residential locations?

MOBILITY PROGRAM PARTNERSHIPS [ALL RESPONDENTS]

We'd like to hear more about the partnerships that are part of [MOBILITY PROGRAM], including what has worked well so far and any challenges that you've faced implementing these partnerships and the program.

9. *[From site information]* We understand that your main partners in the demonstration program are [PHA(S) AND [MOBILITY SERVICES PROVIDER NAME(S)] (if relevant)]. Is this correct? Are there other partnerships or agencies involved in the mobility program that you consider key contributors to the program's success?

Probes: Other local service providers, local landlord association, funders, local evaluators, other partners aside from HUD technical assistance and implementation teams?

- a. *[If yes]* What are their roles in [MOBILITY PROGRAM]?

Probes: Specific CMRS components, outcomes tracking/evaluation, staff capacity building/TA, overall administrative design, championing/supporting the effort, landlord outreach?

10. How did [PHA] determine whether to provide mobility-related services directly versus through a contracted service provider?

Probes: PHA staff capacity, cost considerations, local provider capacity, PHA and partner preferences, and reputation?

11. *[If services provided in-house by [PHA]]* Did [PHA] already have the capacity to fully implement the [MOBILITY PROGRAM] CMRS model?

- a. How did you establish staff capacity to provide [MOBILITY PROGRAM] services in-house?

Probes: Redirecting existing program staff, hiring new staff?

PARTNER PHAS (ONLY SITES WITH MULTIPLE PHAS) [ALL RESPONDENTS]

Let's start with your work with your PHA partners.

12. Tell me about [PHA]'s role in the demonstration, in relation to [PARTNER PHA].

Probes: Primary leadership/lead PHA, collaborator, supporting other lead PHAs/organizations?

- a. What about the application process? Did one PHA initiate the application process?
 - b. What about designing and implementing the mobility program?

13. Has [PHA] worked with [PARTNER PHA] or other PHAs before the [MOBILITY PROGRAM] partnership?
 - a. *[If yes]* Please describe past collaborations.
14. Thinking about your current collaboration on [MOBILITY PROGRAM], what would you say has worked well so far in the collaboration? What has been challenging?

Probes: Building staff capacity, coordination of HCV services, communication, fidelity to the model, service provider coordination, enrollment issues, working with the evaluation/TA/implementation teams, portability across PHAs?

15. How do you stay in communication with [PARTNER PHA]?

- a. How often do you communicate with them? Who is your main collaborator there?

Probes: informal/as needed, standing meetings, trainings?

PARTNERSHIP WITH EXTERNAL SERVICE PROVIDER (ONLY SITES W/CONTRACT SERVICE PROVIDER) [ALL RESPONDENTS]

Now we'd like to hear more about [PHA]'s work with [MOBILITY PROGRAM]'s mobility services provider.

16. How did you identify [SERVICE PROVIDER] as your service provider for [MOBILITY PROGRAM]?

Probes: Issued an RFP, approached the provider based on reputation/experience, approached by provider?

- a. Has [PHA] worked with [SERVICE PROVIDER] in the past, before the [MOBILITY PROGRAM] collaboration?
 - b. *[If yes]* Please describe a past program/collaboration.

Probe: If RFP not already available, request copy of RFP.

17. Tell me about the performance of [SERVICE PROVIDER] so far.

- a. What is going smoothly?
 - b. What challenges have bubbled up with their work, if any?

HOUSING SEARCH CONTEXT [ALL RESPONDENTS]

We'd like to hear a bit more about your local housing market and the challenges facing voucher families searching for housing.

18. From your perspective, what are some common barriers families face while searching for housing with a voucher?

- a. What additional barriers, if any, do families face when searching for housing in an opportunity area?

19. Do these barriers differ for new admission families coming off the waitlist versus families who already have vouchers and are trying to move?

- a. *[If so]* in what ways?

20. To what extent do you think [MOBILITY PROGRAM] addresses these barriers?

- a. Tell me more about this. Which barriers are more challenging to address through mobility-related services? Which are easier?

DEMONSTRATION RECRUITMENT AND ENROLLMENT PROCESS [HCV STAFF]

Now we'd like to hear about your experience so far with enrolling families in the demonstration and mobility program. Walk me through how families are identified for the program, and how they are enrolled and connected to the mobility program.

21. How do existing HCV families learn about the opportunity? Describe how the PHA recruits existing voucher families into the demonstration.

22. How do new admission families learn about the opportunity? Describe how the PHA recruits new admission families from the waitlist.

- a. How is the recruitment process going?
- b. How has the process differed for new versus existing households?
- c. Have you experienced any challenges recruiting either existing or new admission voucher families?
- d. Are there any particular strategies that have been more or less effective in identifying interested families? Please describe.

23. Once eligible families interested in [MOBILITY PROGRAM] are identified, what happens next? Please walk us through:

- a. The enrollment process
- b. The randomization process
- c. The collection of information through the baseline information form and the self-administered survey
- d. Do these processes differ for new admission families compared to existing voucher families? In what ways?

24. How would you say enrollment and randomization have gone to date?

- a. What has worked well?
- b. Has enrollment of new admission families met expectations? How has it/has it not?
- c. Has enrollment of existing voucher families met expectations? How has it/has it not?
- d. What challenges have emerged for enrolling or randomizing eligible families?

- e. What would help improve/address these challenges?

Probes: Differences for new admissions or for existing families, voucher eligibility, interest in [MOBILITY PROGRAM]?

25. What, if any, differences do you see between families that choose to enroll and those that do not?

Probes: Children's ages (older/younger), smaller/larger families, by race/ethnicity or primary language, by current neighborhood; any challenges with take-up by new admission versus existing voucher families?

26. Do voucher families generally already have a housing unit or neighborhood in mind for their move when they enter [MOBILITY PROGRAM]?

- a. [If so] How common is it to have already selected a unit or neighborhood for their move?
- b. Does this differ between new admissions families and existing voucher families?
- c. Are some existing voucher families still deciding between moving and staying in their current unit when they enter the [MOBILITY PROGRAM]?

27. Do any families that are eligible for the mobility program express concerns about data, privacy, or the consent process for the evaluation? How widespread are any such concerns?

28. How are the families assigned to the treatment group connected to the staff who will provide mobility-related services?

- a. Is this matching process working well?
- b. What, if any, challenges have there been?

MOBILITY-RELATED SERVICES IMPLEMENTATION [HCV STAFF]

Now we'd like to hear more about the mobility program model and services, and implementation to date.

29. To what extent are all the planned comprehensive mobility-related services fully implemented and available to participating households? Tell me more about that.

30. Which services have not been fully implemented yet?

- a. Why have they not been fully implemented?
- b. Do you expect they will be provided going forward?

Probes: Ask about any site-specific CMRS not mentioned in response to Q1 or Q2 [prepare a list of a site's CMRS before the interview].

31. What would you say has gone well to date with the mobility-program launch and [PHA's] [SERVICE PROVIDER's] provision of mobility-related services?

- a. Are there aspects that were easier to launch?

32. What has been challenging about the launch and provision of comprehensive mobility-related services?

Probes: Staff capacity or expertise to provide comprehensive mobility-related services [at PHA or service provider], recruitment and enrollment, landlord engagement, fidelity to the model?

- a. Are there aspects of the comprehensive mobility-related services model that have been more difficult for the [PHA] [SERVICE PROVIDER] to launch or implement?
- b. What improvements, if any, are you hoping to see as implementation moves forward?

33. Which service or services provided through [MOBILITY PROGRAM] do you think are the most effective or important for helping families access opportunity areas?

- a. What led you to identify this service/these services as most effective?
- b. Are there any other services you think are particularly effective?

34. Have you or your team identified any gaps in the services needed to facilitate moves to opportunity areas? For families? For landlords?

- a. Do you have plans to fill the service gaps? If so, how?

EARLY OUTCOMES [ALL RESPONDENTS]

We would like to hear your perspective on how the mobility demonstration program is doing so far and any observations about early outcomes for families.

35. What types of information does [PHA] track on family outcomes related to the demonstration?

Probes: Enrollment, participation in various services, housing moves, outcomes related to services received?

- a. How do you track outcomes?
- b. *[If external service provider]* What types of information or reports does [PHA] receive from [SERVICE PROVIDER]? What does the PHA do with the information received?

36. What, if any, early trends have you observed in housing search outcomes for [MOBILITY PROGRAM] participants?

- a. What differences, if any, have you observed in housing search outcomes between new admission families and existing voucher families?

Probes: Moves to opportunity areas, time spent searching, types or amount of assistance received?

- b. What do you think explains these differences?

37. What other trends in search outcomes have you observed for families receiving services through the [MOBILITY PROGRAM] compared with families in the standard HCV program?

Probes: Longer or shorter search times; units of better, similar or worse quality; fewer or more HQS inspection failures; need for higher payment standards or HAP; more or less porting?

38. Has participation in the [MOBILITY PROGRAM] benefitted the participant families? In what ways?

Probes: Feeling hopeful about housing opportunities that better serve a family's needs, opportunity to live in a different area, sense of increased choice, support for landlord interactions, support for lease-up?

- a. Are there ways that participation has been challenging for families?

39. For families that want to remain in the opportunity areas, have you observed any challenges so far to [MOBILITY PROGRAM] participants' ability to remain in opportunity neighborhoods once they move there?

- a. *[If yes]* Can you describe the challenges?
- b. *[If yes]* Has [PHA] or your partners identified ways to try to address the challenges?
- c. What do you think might help families stay in opportunity areas?

Probes: Post-move services, supports for children, economic supports, access to a reliable car or reliable public transportation?

40. Among families that have moved to an opportunity area, do you know of any participants who do not want to stay there?
 - a. *[If yes]* What are the reasons they do not want to stay in opportunity areas?
 - b. What do you think might help encourage families to remain in opportunity areas?

REFLECTIONS [ALL RESPONDENTS]

41. To what extent has the [MOBILITY PROGRAM] implementation so far met expectations?
 - a. How has it been different from expectations?
42. Are you satisfied with the final opportunity area maps and administrative policies? *[If not]* Why are you unsatisfied with them?
43. Should the scope of comprehensive mobility-related services be changed in any way? *[If yes]* How?
 - a. What do you think are the most critical changes needed and why?
44. What might be useful to you and your team as you move forward with [MOBILITY PROGRAM] to improve family mobility outcomes?

Probes: Staff resources, expertise with comprehensive mobility-related services, HUD guidance, other waivers or programmatic flexibilities, TA provider support, additional partnerships within the community (landlord association)?

CLOSING [ALL RESPONDENTS]

45. Is there anything that I did not ask about that you think I should know about your experience with the mobility demonstration?
46. Do you think your organization has had the support and resources necessary to implement the Demonstration? *[If no]* What support or resources would be useful to you?
47. Are there any other PHA or service provider staff that you think we should be sure to talk to about the [MOBILITY PROGRAM]?
48. Do you have any final questions for me about the study?

Thank you for your time. I will turn off the recorder now.

OMB No. 2528-0337

Exp. 06/30/2025

PHA Household ID: _____

Appendix 11: Interview Guide for Mobility Services Staff

CONSENT

Before we begin, I want to tell you a few things about this study and your participation in it. If you would like translated materials, or to complete the survey in a language other than English, please let us know, and we will try to accommodate you. If you need the information to be presented in an accessible format, for example, Braille, audio, large type, or sign language interpreters, or need a reasonable accommodation (a change or adjustment) so that you can participate, please let us know. Please feel free to ask me any questions you might have. We will also [email/give] you a copy of this information.

The U.S. Department of Housing and Urban Development (HUD) hired a research team to conduct a study on HUD's Community Choice Demonstration (Demonstration) program. The research team is led by Abt Associates and includes the Urban Institute, MEF Associates, Sage Computing, Social Policy Research Associates, a team of consultants, and other researchers that may be added in the future. The research team and HUD want to determine whether and to what extent mobility-related services are effective in helping Housing Choice Voucher (HCV) holders move to opportunity neighborhoods. During this interview, we will ask you questions about the Demonstration, including questions about your role and [MOBILITY SERVICE PROVIDER's] involvement in providing mobility services as part of the Demonstration, your perspective on the Demonstration, and how well the Demonstration meets the needs of participating families.

We are not evaluating your agency or its services. As part of this process, we are talking with other mobility service providers, as well as with representatives from PHAs, participating in the Demonstration. We will be conducting at least two rounds of interviews, and we may reach out to you again in a couple of years for an additional interview.

I am required to tell you that the questions in this survey have been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. This collection of information is voluntary and will be used to evaluate the U.S. Department of Housing and Urban Development's Community Choice Demonstration. The information requested under this collection is fully protected and kept private to the extent possible by law, including 5 U.S.C. 552a (Privacy Act of 1974) and OMB Circular No. A-130.

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 and expiration date for this collection are OMB #: 2528-0337, Exp: 06/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Anna P. Guido at Anna.P.Guido@hud.gov or 202-402-5535.

During the interview, one of the researchers will be taking detailed notes, but we will not identify your name in our notes. With your permission, we will audio record the interview to have an accurate record of what is said as a backup to our notes. We may contact you after the interview to ask for clarification. No one outside of the research team will listen to the audio recordings, see any information that identifies you personally, or review the notes we take. We will make every effort to protect your privacy to the extent permitted by law, but if we think you are at risk of physical or emotional harm, we may need to notify someone.

Themes across all the interviews we are conducting will be published in a report to HUD. When we write our reports and discuss our findings, the answers you provide during an interview will be combined with answers from many individuals. We never share any information that identifies you or any other respondents by name outside of our research team. However, we may identify the agency you work for, and unique roles could allow an individual to indirectly attribute a statement to you. We make every effort to avoid this, but you should be aware of the possibility.

Do you have any questions about the study or today's discussion? *[Pause for response and address any questions]*

Do you agree to participate? *[Pause for response]*

Are you comfortable with this interview being recorded? *[Pause for response]*

Thank you, we are going to turn on the audio recorder now.

The tape recorder is now on.

Do you have any questions before we continue?

OK, let's start.

Thank you for taking the time to talk with us today.

BACKGROUND [ALL RESPONDENTS]

First, we'd like to hear about your organization and the position you hold.

1. *[Contractor staff]* Please describe your organization.
 - a. What are its main activities?
 - b. Tell me about any experiences your organization had providing mobility-related services before launching the [MOBILITY PROGRAM]?

Probes: Mobility services, housing navigators, services for voucher holder services?
2. What is your position?
 - a. What department or division do you work in? What does that department/division do?
 - b. Please describe your primary responsibilities at [PHA/ORGANIZATION NAME].
 - c. How long have you been in this position?
 - d. How did you come to work in this position? What were you doing before this?

3. Please describe your role and responsibilities with the [MOBILITY PROGRAM] specifically.
 - a. About how much of your time do you spend on [MOBILITY PROGRAM]?
 - b. About how much of that time do you spend working directly with [MOBILITY PROGRAM] families?
 - c. About how much of your time do you spend engaging with landlords with housing units in opportunity areas?

NOTE: If respondent works only with families or landlords, skip sections as appropriate.

4. How do you stay in communication with [the participating PHA(s)/other PHA teams if PHA staff] that administer the HCV/Section 8 vouchers?

Probes: Mainly informal or ad hoc, case conferencing, standing meetings, is there a direct point of contact at the PHA?

What do you generally talk with PHA staff about? Probes: individual families, training, questions on HCV policies, portability, rent amounts, inspections, engaging on behalf of families or landlords?

SERVICE CAPACITY AND CONTEXT [STAFF DIRECTLY ENGAGED WITH FAMILIES]

5. How are families assigned to work with case managers?

Probes: By family needs, new/existing voucher holders, case manager caseloads, language needs, age of kids, where a family is in its search and lease-up process?

6. How many families do you personally work with at any given time? Is your caseload typical of the caseloads of other staff working on [MOBILITY PROGRAM]?
 - a. Is it challenging to manage the workload? How?
7. Do families work with multiple staff or [coaches/case managers] during their time in [MOBILITY PROGRAM], or are they assigned to a particular case manager the whole time?
 - a. *[If families work with multiple staff]* Are there particular hand-off or collaboration points when families engage with different case managers or staff? *[If so]* What are these points? Can you tell me more about that?

FACTORS AFFECTING OPPORTUNITY MOVES [STAFF DIRECTLY ENGAGED WITH FAMILIES]

Let's talk about the factors and challenges that might affect whether families search for housing in opportunity neighborhoods or move to opportunity neighborhoods.

8. What are some of the things that affect families' interest or willingness to search for housing in an opportunity area?

Probe: Connections to baseline neighborhood; familiarity with opportunity areas; racial composition of opportunity areas; perception of landlords' willingness to accept vouchers; financial concerns about paying a security deposit; type or quality of housing; neighborhood safety; access to preferred schools, doctors, stores, family, childcare, work, other services or supports; children's preferences? *If not provided, ask for specific example(s).*

- a. Do the factors influencing a family's willingness to search for housing in an opportunity area differ for new admission families compared with existing voucher holders? *[If so] How do they differ?*
- b. Have you noticed any patterns based on family characteristics that make it challenging for certain types of families to search for or move to housing in an opportunity area?

Probes: rental or credit background; larger families, or families with older children; language; race/ethnicity of voucher families?

9. What factors affect whether families actually move to an opportunity area?

Probe: Connections to baseline neighborhood; familiarity with opportunity areas; racial composition of opportunity areas; a perception that landlords may be unwilling to accept vouchers; financial concerns about security deposits; credit issues; type or quality of housing; neighborhood safety; access to preferred schools, doctors, stores, family, childcare, work, other services or supports; children's preferences? If not provided, ask for specific example(s).

- a. Do these factors differ at all for new admission families versus existing voucher holders?
- b. What about other family characteristics? Are there families that have unique challenges searching for housing or moving to an opportunity area?

Probes: Rental or credit background; larger families, or families with older children; language; race/ethnicity of voucher families?

10. In your experience with [MOBILITY PROGRAM] participants, do they tend to have an apartment/house in mind for their move at the point they enter the program? Tell me more about that.

- a. Do they tend to have a particular neighborhood in mind? Tell me more about that.
- b. *[If voucher families do tend to have specific ideas in mind]* Does this differ between new admission families and existing voucher families?
- c. *[If voucher families do tend to have specific ideas in mind]* Do they tend to prioritize housing or neighborhood preferences?

11. How difficult is it for the families you work with to find units in opportunity areas that they can afford with their voucher?

- a. What are the key barriers or challenges families experience when searching for housing?

Probes: Knowledge of opportunity areas; time available to search; transportation; search costs; landlord unwillingness to accept vouchers, payment standards do not meet costs in opportunity areas, need for large deposits or search costs?

- b. Are there certain opportunity neighborhoods in which families are more successful at finding housing with their voucher than others? [*If so*] Why do you think that is?

Probes: Low vacancy/availability of units, large number of rentals, availability of affordable single-family homes, more affordable units to choose from, SOI law, transportation access, landlord acceptance of vouchers?

MOBILITY-RELATED SERVICES [STAFF DIRECTLY ENGAGED WITH FAMILIES]

Now we would like to talk through your work with participating families over the course of their housing search and lease-up process. We would like to learn more about your role in providing services to families, and what a typical engagement with a family is like from the point you first make contact with them, through their housing search and lease-up, and after they move.

12. Let's start with the point you first make contact with the families enrolled in the mobility program. How do you typically engage with families when they are first referred to you for [MOBILITY PROGRAM] services?

- a. How do you first make contact with families? Do you tend to encounter any challenges initially engaging them? Tell me about those challenges.
- b. About how long does it take to reach families after they first enroll in [MOBILITY PROGRAM] after you first contact them?
- c. Have they received their voucher at that point?
 - i. [*If no*] What stage of the voucher process are they in when you first engage with them?

13. What happens next? How do you work with families at this initial stage of engagement with the program?

- a. What is the main focus of your work with families at this stage? Tell me more about that. What services are you providing or offering families?
- b. How frequently do you interact with families during this first stage?
- c. How much time do you spend with a typical family during this phase?
- d. Walk me through a typical meeting with a family at this first stage of engagement.
- e. What activities, if any, happen in a group setting?
- f. What referrals, if any, do you make to outside service providers? How often do you make these referrals?

Probes: Individual coaching; map of family systems; identifying move goals; education about the program and opportunity areas; building motivation for HOA move; credit report review; application cover letter; Renter's Workshop; Housing Search Workshop?

14. What happens after that? How do you work with families once they are ready to start the housing search process?
 - a. What services do you offer to support the housing search? Tell me about all the search services you might provide a family.
Probes: Assistance identifying units, submitting applications, unit, or neighborhood tours?
 - b. How frequently do you interact with families during the search stage?
 - c. How much time do you spend with the typical family during this phase?
15. Tell me more about identifying available housing units. How do you help families find units in opportunity areas?
 - a. What is an example of how you might help a family identify available units in opportunity areas?
 - b. Do you provide families with rental listings for available units in the opportunity areas they are interested in? Can you tell me more about the listings?
16. At what point in the process of working with a family do you discuss whether they might need financial assistance? Does this come up at a specific time or at multiple times?
 - a. What financial services or supports are available for families?
Probes: Security deposit, pro-rated first month's rent, search costs, application fees, other search or move costs?
 - b. How do you determine the level of financial support to provide different families?
Probes: Coach discretionary fund, caps on assistance level, individual family need?
 - c. What role do you play in administering this financial assistance? What does a typical process look like for how you would support families' receiving financial assistance?
Probes: Discussion with families, with other case managers/service provider staff, internal agency guidance? Differences for new versus existing voucher holders; older or younger children; household size?
17. What happens next? How do you work with families during the lease-up process?
 - a. What services or supports do you offer at this point? Tell me more about that.
Probes: Expediting inspections, application support, financial assistance, coordinating with the PHA?
 - b. How frequently do you interact with families during lease-up?
 - c. How much time do you typically spend with a family during this phase?
18. How much time do you typically interact with a landlord or property manager during the housing search and lease-up process? What do these interactions usually involve?

19. *[External Services Provider]* How much time do you typically spend with the PHA during lease-up? What do these engagements usually involve?
- [PHA Services Provider]* How much time do you typically spend with other PHA divisions during lease-up? What do these engagements usually involve?
20. What happens once a family has successfully leased up and moved into their new home?
- Can you give me an example of how you might engage with a family after they have moved during post-move check-ins?
 - How frequently do you interact with families after their move?
21. In general, how do you typically interact or communicate with families (in person, by phone, by email, or by text)?
- Does this vary over the course of your work with a family? Or across families?
 - Does this vary for new versus existing voucher families? How so?
 - On average, how challenging or easy is it to stay in contact with families during and after their move?
22. How do you determine which services to offer families to meet their individual needs? Tell me more about that.
- How do families decide which services to use?
- Probes: Discussion with families, with other case managers/service provider staff, internal agency guidance, family service plans?
- EFFECTIVENESS OF COMPREHENSIVE MOBILITY-RELATED SERVICES PROVIDED TO FAMILIES [STAFF DIRECTLY ENGAGED WITH FAMILIES]**
- We'd like to hear more about how effective the specific services you provide to families are in helping them move to opportunity neighborhoods. Let's walk through the services you mentioned.
23. Let's start with the initial, pre-search services you described providing when you first engage with a family. Which of these services do you think are effective or important for supporting families' moves to opportunity areas? Why?
- Are there services that are less effective?
 - [If yes]* Why? Are there services that you think would be more effective?
 - Which of the pre-move services you identified as effective are the most important to help families successfully search and lease-up? Why?
24. What about housing search assistance? Which of these services do you think are effective or important to supporting moves to opportunity areas? Why?
- Are there services that are less effective?

- i. [If yes] Why? Are there services that you think would be more effective?
 - b. What are the most important of the housing search services you provide? Why?
Probes: Identifying available units, negotiating/mediating with landlords, coaching, information about opportunity areas?
25. What about financial assistance? How useful are these services for supporting moves to opportunity areas?
- a. What type of financial assistance is most important or effective?
 - b. Are any types of financial assistance less important or effective in supporting moves to opportunity areas?
26. How important do you think post-move check-ins are to families' ability to remain in opportunity areas after their initial move?
- a. Can you provide an example?
27. Are there any additional services you think families might need to help them move to or stay in an opportunity neighborhood that are not offered by [MOBILITY PROGRAM]?
- Probes: Ongoing counseling or coaching, PHA services, other social/economic supports, school choice, supports for children, post-move services if not currently available?
28. Tell me about what has been challenging about working with families to provide services?
- a. Tell me about what has gone well about working with families?
- Probes: Willingness to engage in services, relationship building, building, and maintaining motivation to find housing in an opportunity area, families' competing priorities in housing and other areas of life?
- ENGAGEMENT WITH LANDLORDS [STAFF DIRECTLY ENGAGED WITH LANDLORDS]**
- Now I'd like to hear more about how [MOBILITY PROGRAM] engages with landlords. FULL STOP
- (Then include these as probes: either through direct outreach, or any services and incentives offered to landlords.)
29. What does landlord engagement typically entail? Can you describe an example of how you do landlord outreach or engagement?
- Probes: Informational materials, direct outreach to landlords of available units, education about the voucher and mobility program?
- a. Is there a dedicated person who addresses landlords' questions or concerns? [If so, who is that person?]
 - b. Is outreach done on behalf of specific families or for the program as a whole?

- c. On average, how responsive are landlords to your outreach efforts?
- d. What kind of questions or concerns do landlords have about the voucher program? About the mobility program?
- e. How effective is landlord outreach or engagement for supporting moves to opportunity areas?

Probes: Identifying landlords with available units in opportunity areas, education about the HCV program and mobility program, advocating for individual families?

30. *[Check in advance whether expedited inspections are offered and ask only if relevant]* Please tell me about the process of providing expedited inspections for units occupied by mobility program participants in opportunity areas.

- a. Describe how the inspection timeline works.

Probes: Coordination with PHA staff, ensuring inspections are timely?

- b. How important do you think expedited inspections are in encouraging landlords in opportunity areas to accept voucher holder families?
- c. What role do you have in expediting any of the other administrative processes for the voucher program, such as requests for tenancy approvals (RFTAs), lease-signing, or determining rent reasonableness? *If any role is identified*, Can you tell me more about that role and your sense of its importance for landlords?

31. What, if any, financial incentives are available to landlords?

Probes: Signing bonuses, holding fees, move-in fees, damage mitigation fund?

- a. How do landlords become aware of these incentives? When do you engage with landlords about these available incentives?
- b. How important do you think financial incentives for landlords are in encouraging landlords in opportunity areas to accept voucher holder families?
- c. Which financial incentives do you think are most important or effective? Does this vary by type of landlord?

32. Do you engage with landlords after a [MOBILITY PROGRAM] moves in? *[If so, how? Can you give an example?*

- a. How frequently do you engage with landlords after lease-up?
- b. Are post-move check-ins with landlords important in helping clients maintain tenancy? How important?
- c. Are post-move check-ins important for keeping landlords in the program? How important?

Probes: Conflicts with mobility program tenants, information about how the voucher works, mobility program versus PHA/HCV program roles after lease-up, liaison with PHA/HCV staff, notification from landlords about additional units coming online?

33. Have you encountered any challenges in engaging with landlords during outreach, tenant leasing, or post-move check-ins? Can you give a couple of examples?
 - a. What has gone well?
 - b. What is missing from the program that would really make a difference for recruiting and retaining landlords in opportunity areas?
- Probes: Identifying landlords in opportunity areas, contacting/communicating with landlords, willingness to participate in the program, willingness to resolve issues with tenants?
34. How are the needs of landlords in opportunity areas different from landlords with units in traditional voucher neighborhoods in [PHA GEOGRAPHIC AREA]? Tell me more about that. Can you give an example?
35. Are there any services or incentives you offer that don't seem to be important to landlords? Which are these? Why do you think that is?
 - a. What additional services, if any, do you think are needed and not currently offered to encourage landlords to rent to mobility program families?
 - b. Do services offered vary by landlord characteristics or prior voucher involvement?
36. In general, what is your role in developing or mediating the relationship between families and landlords?

Probes: During the search or lease-up process? After lease-up?

- a. What is your role in developing or mediating the relationship between landlords and the PHA/HCV staff?

Probes: During the inspection and lease-up? After lease-up?

ADDITIONAL CONTEXT ON MOBILITY SERVICES [ALL RESPONDENTS]

37. Tell me about any changes in the services offered – or how they are offered – since [MOBILITY PROGRAM] launched?
 - a. What brought these changes about?
38. Does your program offer any other services or supports to [MOBILITY PROGRAM] participants, families, or landlords, beyond the ones we have discussed already?
 - a. [If so] What are these additional services?
 - b. [If so] Who provides these services?

REFLECTIONS [ALL RESPONDENTS]

For the last couple of questions, I'd like to ask you to reflect overall on your experience with the [MOBILITY PROGRAM].

39. What do you think is working well with [MOBILITY PROGRAM] implementation so far?

40. What do you think could be done better to implement [MOBILITY PROGRAM], and support your work with families moving to opportunity areas or with landlords?

41. Is there anything that I did not ask about the mobility demonstration that is important for us to understand?

42. Do you have any final questions for me about the study or about the research team?

Thank you for taking the time to talk with me today. We will now turn off the recorder.

Appendix 12: Interview Guide for Participating Families Currently Searching for Housing

This guide is for treatment and control group families searching for housing with a voucher.

Note for interviewer: The section transitions are important for clarifying nuanced differences between sections and reducing repetitiveness felt during pretests.

[AFTER CONSENT PROCESS IN ATTACHMENT H]

The tape recorder is now on.

OK, let's start.

WARM-UP/BACKGROUND [All Respondents]

First, I'd like to learn a bit about you, your family, and the reasons you are interested in moving.

1. Please tell me about the number of people who live with you.
 - a. How many children live here with you? What are their ages, and what grade are they in?
[Note that any names mentioned will be removed/redacted.]
2. Tell me about your current living situation while you are searching for new housing.
[Existing voucher families] Probes: Single-family house or apartment?
[New admission families] Probes: Living in own home, staying with family or friends, staying in a shelter, or something else?
 - a. How long have you lived in this apartment/home/shelter?
3. What is the name of your neighborhood? Can you tell me the zip code?
 - a. About how long have you lived in this neighborhood?
 - b. *[If living with family or friend]* Can you stay there as long as you like?
4. *[New admission families]* Do you want to find a new place to live, or do you plan to use your voucher to lease where you live now?
 - a. *[If new admission family wants to lease in place]* Why? *[Then skip to question 6]*
5. Why are you thinking about moving?

Probes: Safety, access to various resources, children's wellbeing, school options, ready for a change, problems with prior housing or landlord, in unsuitable housing situation, poor quality of housing unit?

APPENDIX 12: INTERVIEW GUIDE FOR PARTICIPATING FAMILIES CURRENTLY SEARCHING FOR HOUSING

GENERAL SEARCH QUESTIONS

The next questions focus on your housing search experiences.

6. Tell me about your current housing search.
 - a. How is the search going? What has been going well?
 - b. What has been challenging?
7. When deciding where to live, what is most important to you?
Probes: The home itself, the specific neighborhood, safety, the schools, close to family/friends, other factors?
8. What are the main platforms or sources you are using to search for housing?
Probes: Using the PHA's list or GoSection 8, searching other online websites for housing listings, asking family or friends, driving around neighborhoods?
 - a. *[Treatment group only]* Housing identified by [MOBILITY PROGRAM]?
9. What kind of house or apartment are you looking for?
 - a. How many bedrooms?
 - b. What kind of home (apartment or house)?
 - c. Are you looking for any specific features (e.g., pet-friendly, yard, washer/dryer in unit, parking, first floor, AC, etc.)?
 - d. Rent amount or range?
10. Roughly how many apartments/houses have you seriously thought about applying for so far during your search?
 - a. What neighborhoods were they in?
 - b. Have you submitted any rental applications so far? *[If yes]*
 - i. What neighborhoods were they in?
 - ii. Were any of these units from a list of apartments/homes that the [PHA] identified for you? *[If yes]* How many did the program identify?
 - iii. What happened after you applied? Was your application accepted/denied?
 - iv. Did you want to move to any of these apartments/homes but could not for some reason? *[If yes]* What was the main reason you couldn't move to the home you wanted?

Probes: Landlord did not accept application; other issues with landlord (didn't return phone call/hung up/didn't provide application/etc.); issue with the PHA's lease-up process (paperwork, rent amount, inspection); past eviction, foreclosure, or credit

APPENDIX 12: INTERVIEW GUIDE FOR PARTICIPATING FAMILIES CURRENTLY SEARCHING FOR HOUSING

problems; location concerns (safety, transportation options, location relative to employment, schools, etc.); landlord interactions; discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.; told unit was no longer available?

- c. Have there been other apartments or houses that you considered applying for but didn't?
 - i. *[If yes]* Why did you choose not to apply?

Probes: Location concerns (safety, transportation options, location relative to employment, schools, etc.); landlord interactions; discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.?

NEIGHBORHOOD PREFERENCE QUESTIONS

These next questions focus on your neighborhood-related preferences and experiences in your housing search.

- 11. *[Existing voucher families]* Did you already have an idea about the area or neighborhood where you want/wanted to live before you asked to move with your voucher?

[New voucher families] Did you already have an idea about the area or neighborhood where you want/wanted to live before you received your voucher?

- a. *[If yes]* Can you tell me more about that? Where did you want to move? Why?
- b. Has that changed at all since you started your search? *[If yes]* How so?

- 12. Can you list all the neighborhoods in which you are looking for housing?

Probe: Ask for neighborhood names or zip codes?

- a. How did you decide on those neighborhoods?
- b. Are you searching in a limited number of neighborhoods, or is your search broader than that?
- c. How familiar are you with these neighborhoods?
- d. Are there neighborhoods you want to avoid? *[If yes]* Which neighborhoods? What makes you want to avoid them?
- e. Does the racial or ethnic make-up of the neighborhood factor into your interest in moving there?
 - i. Can you tell me about how it factors into your decision?

- 13. Have your child/children's needs factored into your decision about which neighborhoods to search in? *[If yes]* How?

Probes: Daycare or childcare, schools, medical care, family or community ties, etc.?

APPENDIX 12: INTERVIEW GUIDE FOR PARTICIPATING FAMILIES CURRENTLY SEARCHING FOR HOUSING

- a. *[If schools/education identified as a decision factor]* In what ways does your children's schooling affect your decisions about where to search for housing?

Probes: Distance/commute, teacher quality, school safety, academic programs, extracurricular/after-school programs, college preparation?

- b. Do you expect your children will need to change schools when you move?
c. What are your thoughts about keeping them in the same school versus changing schools?

14. Have there been other *areas or neighborhoods* you thought about moving to but will not choose for one reason or another?

- a. Why will you not choose one of those areas?
b. Are there neighborhoods you might want to move to but don't think you can?
i. *[If yes]* What is the main reason you don't think you can move there?

Probes: Location concerns (safety, transportation options, location relative to employment, schools, etc.); landlord interactions; discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.; issues related to particular housing units?

15. Is anyone else in your life helping you make these move decisions? Family? Friends? Children? Can you tell me more about the help they provide?

[Treatment Respondents]

16. After working with the [MOBILITY PROGRAM], did you identify one or more neighborhoods that would work best for you and your family that you were not already considering?

- a. *[If yes]* Which neighborhoods were these?
b. *[If yes]* Did the coach's suggestions affect your search? *[If yes]* How?

Next, I'd like to get your perspective on the areas on the map that [MOBILITY PROGRAM] staff showed you that are labeled "Opportunity Areas." Do you recall seeing the map?

17. In your opinion, what are the features or amenities that should be available in an "opportunity area"?

a. How would you describe the benefits of moving your family to an Opportunity Area?

Probes: Housing features, transportation costs, community/social ties, identity, schools, safety?

- b. What downsides, if any, do you think there are?

18. [Ask if respondent recalls seeing the Opportunity Area Map]

How do you feel about moving to an Opportunity Area at this point?

APPENDIX 12: INTERVIEW GUIDE FOR PARTICIPATING FAMILIES CURRENTLY SEARCHING FOR HOUSING

Probes: Excited, worried, nervous?

- a. Has your opinion about such a move changed since you began receiving mobility services? [*If yes*] In what ways?

19. [Ask if respondent recalls seeing the Opportunity Area Map]

How do your children feel about moving to an Opportunity Area? What excites them? What worries them?

- a. [*As applicable*] Does it differ by age (teenagers compared with younger children) or what grade they are in? By gender? In what ways?

Probes: Worries about losing friends; school changes; teachers; other routines/access to family?

[All Respondents]

20. What has been your experience so far explaining the voucher to landlords during your current housing search?

- a. [*Treatment group*] Please tell me about your experience explaining [MOBILITY PROGRAM] to landlords.

21. Have you encountered any/any other challenges in finding a place you want to live that you haven't talked about?

Probes: Issue with the PHA's lease-up process (paperwork, rent amount, inspection); eviction, foreclosure, credit problems, transportation, location of employment, landlord interactions, landlords don't want families with children, landlords refuse to take voucher/Section 8, discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.; landlord/property manager didn't return phone call/hung up, said unit was no longer available, or didn't provide application to submit, etc.?

22. How confident are you that you are going to find a place that matches everything you are looking for? Why?

PHA SERVICES RECEIVED [All Respondents]

23. [*Existing voucher family*] Please tell me about the process of getting a voucher from [PHA] to move. What was easy? What was hard?

Probes: Paperwork/certification process, communicating with PHA staff, staff responsiveness, and clarity of information?

- a. What questions did you have after you got your moving voucher?

[*New admissions family*] Tell me about the process of getting the voucher from [PHA]. What was easy? What was hard?

Probes: Paperwork/certification process, communicating with PHA staff, staff responsiveness, and clarity of information?

APPENDIX 12: INTERVIEW GUIDE FOR PARTICIPATING FAMILIES CURRENTLY SEARCHING FOR HOUSING

- b. What questions did you have after you got your voucher?
24. Tell me about any information you have received from [the PHA] about how to use your voucher.
- a. What did they tell you about where you could use your voucher?
 - b. Did they tell you how much you can afford in rent?
 - c. Did they tell you what to expect as the next steps after you find a unit?
 - d. *[Treatment group]* Was the person who provided the information housing authority staff or the mobility services staff? Do you recall their name?

MOBILITY SERVICES AVAILABLE [Treatment Respondents]

Let's shift to discuss the [MOBILITY PROGRAM]. We are interested in learning about your interactions with staff and the services that were offered to you while you are searching for a new place to live and during the process of applying for a new place to live.

25. First, tell me about your decision to join [MOBILITY PROGRAM]. What made you interested in enrolling?

Mobility staff interactions

26. Are you assigned to a particular staff member, or do you interact with various people at [MOBILITY PROGRAM]?

- a. Tell me about how that works. Who do you interact with the most?
- b. What do you communicate about with [STAFF MEMBER(S)]?

27. How do you typically communicate with [MOBILITY PROGRAM] [STAFF MEMBER(S)]?

Probes: scheduled meetings, in-person, informal calls/texts, who initiates contact?

- a. How often do you speak with them?
- b. What do you find most helpful in your interactions with them? Can you give an example?
- c. What do you find not as helpful? Can you give an example?

28. Has your work with [STAFF MEMBER(S)] helped prepare you for your housing search? Tell me more about that.

29. Do you feel like [STAFF MEMBER(S)] understands what you're going through with the search process? Do they listen to your concerns?

30. How easy or difficult is it to work with [MOBILITY PROGRAM] staff to get the help you want for your search? Tell me more about that.

- a. *[If challenging]* Tell me more about a specific instance or example.

APPENDIX 12: INTERVIEW GUIDE FOR PARTICIPATING FAMILIES CURRENTLY SEARCHING FOR HOUSING

Probes: Communication with staff/reaching staff, availability of needed service(s), clarity on services available?

Mobility services/programming

Let's shift to talk about the services available from [MOBILITY PROGRAM] for your housing search and lease-up process and your experience with the program.

We're interested in hearing about all types of services or assistance available to you from [MOBILITY PROGRAM], even if you don't use them or don't think you will. Later, I'll ask you about the services you are using; for now, I'm interested in the variety of services you have been offered.

By services, we mean the types of help the program staff can provide to help your search, like one-on-one meetings with a [MOBILITY PROGRAM] coach, group workshops, help finding apartments/houses in opportunity areas, financial assistance, and help communicating with landlords.

31. What types of services or assistance have been available to you from [MOBILITY PROGRAM]?

Probes: One-on-one meetings with a [MOBILITY PROGRAM] coach; mapping family systems; help identifying goals for the move; education about the program and opportunity areas; review of credit report; help preparing an application cover letter; group workshops; financial assistance?

32. Which of the services that [MOBILITY PROGRAM] offers have you used so far?

- a. How did you decide to use these services as opposed to the other ones?
- b. Are there other services you think you will use at some point?

Probes: One-on-one meetings with a [MOBILITY PROGRAM] coach, mapping family systems, help identifying goals for the move, education about the program and opportunity areas, review of credit report, help preparing an application cover letter, group workshops, financial assistance?

33. Have the services from the [MOBILITY PROGRAM] been helpful during your housing search so far?

- a. Which services have been the most useful so far? Tell me more about that.

Probes: Working one-on-one with a [MOBILITY PROGRAM] coach, help identifying available units, help negotiating with landlords, help assisting with and expediting PHA's lease-up process, financial assistance (application fees, security deposits, other financial assistance), navigating perceived discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.?

- b. Which services have not been useful, if any? Can you give any examples of something that hasn't turned out to be useful?

Probes: Specific CMRS, goal is to focus on specific services or types of services?

APPENDIX 12: INTERVIEW GUIDE FOR PARTICIPATING FAMILIES CURRENTLY SEARCHING FOR HOUSING

34. *[If mentioned receiving financial assistance]* What have you used the financial assistance for?
- a. Does the program provide enough financial assistance to allow you to move to an Opportunity Area? *[If not]* What expenses do you have or anticipate having that you would need help with to move to an Opportunity Area?
35. Has the **[MOBILITY PROGRAM]** identified any available rental units for you that you chose not to apply for?
- a. *[If yes]* How many units? Why did you decide not to apply for them?
36. *[Existing voucher families]* Thinking back to past moves you have made with a voucher, do the services you are receiving through **[MOBILITY PROGRAM]** make a difference compared with your previous housing search experiences? Tell me about that.
- a. Tell me more about past experiences with landlords and using your voucher. How do the services you receive through **[MOBILITY PROGRAM]** make a difference in your interactions with landlords?
37. If you could improve the help **[MOBILITY PROGRAM]** provides to people with vouchers searching for housing, what changes would you make?

Probes: Make changes to types of services, how services are delivered, length of services, staffing changes, etc.?

REFLECTIONS ON MOBILITY PROGRAM [Treatment Respondents]

38. Overall, how satisfied are you so far with the services you have received during your housing search?

Probe: Why satisfied or dissatisfied?

39. Overall, how satisfied are you so far with **[MOBILITY PROGRAM STAFF]**? Tell me more about that.

CLOSING [All Respondents]

Thank you for taking the time to talk with me today.

40. Is there anything that I did not ask about your housing search experience or **[MOBILITY PROGRAM]** services that is important for us to understand?

41. Do you have any final questions for me about the study or about the research team?

Thank you for your time. I will now turn off the recorder.

[Discuss compensation and collect future contacts list.]

OMB No. 2528-0337

Exp. 06/30/2025

PHA Household ID: _____

Appendix 13: Interview Guide for Participating Families Who Have Leased Up

This guide is for treatment and control group families that have successfully leased up with a voucher through the [MOBILITY PROGRAM] program or with usual Housing Choice Voucher (HCV) program services, including both existing and new admission voucher families.

Note for interviewer: The section transitions are important for clarifying nuanced differences between sections and reducing repetitiveness felt during pretests.

[AFTER CONSENT PROCESS IN ATTACHMENT H]

The tape recorder is now on.

OK, let's start.

WARM-UP/BACKGROUND [All Respondents]

First, I'd like to learn a bit about you, your family, and the reasons you were interested in moving.

1. Please tell me about the number of people who live with you.
 - a. How many children live here with you? What are their ages, and what grade are they in?
[Note that any names mentioned will be removed/redacted.]
2. About how long have you been in the voucher program?
 - a. *[Existing voucher families only]* How many different apartments/homes have you lived in while in the voucher program?
 - b. *[New voucher families only]* Before you moved to your current place, were you living in your own apartment or home, with friends or family, or staying in a shelter?
 - i. *[If living with friend or family]* Was that a temporary arrangement, or were you able to stay there as long as you liked?
 - ii. *[If living in own apartment or home]* Did you end up moving with your voucher? Or did you use your voucher in the unit in which you were living?
 - c. *[All respondents]* What is the name of the neighborhood in which you were living before your most recent move? Can you tell me the zip code?
 - a. About how long did you live in that neighborhood?

GENERAL SEARCH QUESTIONS

The next questions focus on your most recent housing search experiences.

3. Tell me about your recent housing search.
 - a. What went well?
 - b. What was challenging?
4. *[For families that moved] What motivated you to move from where you were living before? [If respondent hesitates, move to probes immediately. Pretests indicated domestic violence/sensitivity/trauma might have influenced the move.]*

Probes: Housing-related reasons, including lack of stable housing/homelessness, neighborhood-related reasons, other reasons?

- a. *[If more than one reason]* What was the main reason you moved?

Probes: Housing-related reasons, including lack of stable housing/homelessness, neighborhood-related reasons, other reasons?

5. When deciding where to live, what was most important to you?

Probes: The home itself, the specific neighborhood, safety, the schools, close to family/friends, other factors?

6. What main platforms or sources are you using to search for housing?

Probes: Using the PHA's list or GoSection 8, searching other online websites for housing listings, asking family and friends, driving around neighborhoods; *[Treatment group]* Housing identified by *[MOBILITY PROGRAM]*?

- a. About how long did you search for housing with your voucher before you found the place you're in now?

7. Roughly how many apartments/houses did you seriously think about applying for during your most recent search before deciding to move to your current home?

- d. Did you end up submitting rental applications to any of those apartments/houses?
[If yes]

- i. What neighborhoods were they in?

- ii. Were any of these units from a list of apartments/homes that the *[PHA]* identified for you? *[If so]* How many did the program identify?

- iii. What happened after you applied?

- Was your application accepted/denied?
 - Did you decide not to move into the unit? Why?

- iv. Did you want to move to any of these apartments/homes but could not for some reason?

[*If yes*] What was the main reason you couldn't move to the home you wanted?

Probes: Landlord rejected application; didn't return phone call/hung up/didn't provide application/etc.; issue with the PHA's lease-up process (paperwork, rent amount, inspection); past eviction, foreclosure, or credit problems; location concerns (safety, transportation options, location relative to employment, schools, etc.); discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.; told unit was no longer available?

[*If no*] Were there any apartments/houses that you seriously considered that you did not submit a rental application for?

- i. Why did you choose not to apply?

Probes: Location concerns (safety, transportation options, location relative to employment, schools, etc.); landlord interactions; discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.?

8. What was your experience explaining the voucher to landlords during your housing search?

- a. [*Treatment group*] Tell me about your experience explaining [MOBILITY PROGRAM] to landlords.

9. Have you encountered any [*other*] challenges in finding a place you want to live that you haven't talked about? [*If no, ask some probes*]

Probes: Issue with the PHA's lease-up process (paperwork, rent amount, inspection); eviction, foreclosure, credit problems, transportation, location of employment; issues with landlord (don't want families with children; refuse to take voucher/Section 8; discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income; didn't return phone call/hung up; said unit was no longer available, or didn't provide application to submit, etc.)

NEIGHBORHOOD PREFERENCE QUESTIONS

These next questions focus on your neighborhood-related preferences and experiences in your housing search.

10. [*Existing voucher families*] Did you already have an idea about the area or neighborhood where you wanted to live before you asked to move with your voucher?

[*New voucher families*] Did you already have an idea about the area or neighborhood where you wanted to live before you received your voucher?

- a. [*If yes*] Can you tell me more about that? Where did you want to move?
- b. Did that change at all once you started your search? [*If yes*] How so?

11. About how many neighborhoods did you look in during your housing search?
- Did you search in a limited number of neighborhoods, or was your search broader than that?
 - How did you decide on those neighborhoods?
 - What did you like about the neighborhoods where you searched?
 - Were there neighborhoods you wanted to avoid? [*If yes*] Which neighborhoods? What made you want to avoid them?
12. Did your [child's/children's] needs factor into decisions about neighborhoods? [*If yes*] How?
Probes: Daycare or childcare, schools, medical care, family or community ties, etc.?
13. [*If schools/education identified as a decision factor, ask*] In what ways did your child's/children's schooling affect your decisions about where to search for housing?
Probes: School stability, distance/commute, teacher quality, school safety, academic programs, extracurricular/after-school programs, college preparation?
- Did your child/children change schools because of your move? [*If yes*] How did you/ feel about your child/children changing schools? How did your child/children feel about changing schools?
14. Have there been other areas or neighborhoods you thought about moving to but didn't choose for one reason or another?
- Why did you not choose one of those areas?
 - Did you want to move to any of those neighborhoods but could not for some reason?
 - [*If yes*] What was the main reason you couldn't move to the neighborhood you wanted?

Probes: Location concerns (safety, transportation options, location relative to employment, schools, etc.); landlord interactions; discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.; issues related to particular housing units?

[For mobility program participants]

15. After working with the [MOBILITY PROGRAM], did you identify one or more neighborhoods that would work best for you and your family that you were not already considering?
- [*If yes*] Which neighborhoods were these?
 - [*If yes*] Did the coach's suggestions affect your search? [*If yes*] How?

Next, I'd like to get your perspectives on the areas on the map that [MOBILITY PROGRAM] staff showed you that are labeled "Opportunity Areas." Do you recall seeing the map?

16. In your opinion, what are the features or amenities that should be available in an “opportunity area”?

- How would you describe the benefits of moving your family to an Opportunity Area?

Probes: Housing features, transportation costs, community/social ties, identity, schools, safety?

- What downsides, if any, have there been?

17. [Ask if respondent recalls seeing the Opportunity Area Map]

How did you feel about moving to an Opportunity Area when you started with [MOBILITY PROGRAM]?

Probes: Excited, worried, nervous?

- Has your opinion about moving to an Opportunity Area changed since you leased up? [*If yes*] In what ways?

18. [Ask if respondent recalls seeing the Opportunity Area Map]

How did your child/children feel about moving to an Opportunity Area when you were doing your search? What excited them? What worried them?

- [*As applicable*] Did it differ by age (teenagers compared with younger child/children) or the grade they are in? By gender? In what ways?

Probes: Worries about losing friends; school changes; teachers; other routines/access to family?

[For all respondents]

19. How does the neighborhood you moved to compare with the neighborhood you lived in before? What is different?

20. Do you think you will stay in this neighborhood?

- [*If no or unsure*] Do you have an idea of where you would like to move next?

- [*If yes*] What makes you want to move to [that/a different neighborhood]?

- [*If yes*] What makes you want to stay in this neighborhood?

Probes: Distance/proximity from services or networks; sense of community; child's/children's satisfaction; satisfaction with childcare, schools, safety, accessibility of alternative options/difficulty moving to alternative neighborhood?

- Did the racial or ethnic make-up of the neighborhood factor into your decision to move there?

- How did it affect your decision?

d. Does the racial or ethnic make-up of the neighborhood factor into your interest in staying there?

i. Can you tell me how it affects your interest in staying?

HOUSING CHARACTERISTICS [All respondents]

21. How did you eventually find the home you rented? Tell me more about that.

Probes: Program staff identified the unit, respondent found the unit on their own?

22. Did anyone else help you make the decision to choose this home? Family? Friends? Children? Can you tell me more about the help they provided?

23. I'm interested in what aspects of [the apartment/home you moved into] work well for your family and which don't work so well. Can you tell me about that?

a. What would make it better?

Probes: Cost, size, location of the apartment/home, neighbors?

24. How does your current apartment/house compare with the last place you lived?

a. What is different?

25. Is there anything you wish you had known about this house/unit before you moved in? [*If yes*] What was it?

PHA SERVICES RECEIVED [All Respondents]

26. [*Existing voucher family*] Please tell me about the process of getting a voucher from the [PHA] to move. What was easy? What was hard?

Probes: Paperwork/certification process, communicating with PHA staff, staff responsiveness, and clarity of information?

a. What questions did you have after you got your moving voucher?

[*New admissions family*] Tell me about the process of getting the voucher from [PHA]. What was easy? What was hard?

Probes: Paperwork/certification process, communicating with PHA staff, staff responsiveness, and clarity of information?

b. What questions did you have after you got your voucher?

27. Tell me about any information you received from [the PHA] about how to use your voucher.

a. What did they tell you about where you could use your voucher?

b. Did they tell you how much you could afford in rent?

c. Did they tell you what to expect as the next steps after you found a unit?

28. [Control group] Since you leased up, have you communicated with these PHA staff members? [If yes] What were these about?

MOBILITY SERVICES AVAILABLE [Treatment Respondents]

Let's shift to discuss the [MOBILITY PROGRAM]. We are interested in learning about your interactions with staff and the services that were offered to you when you were searching for a new place to live and during the process of applying for and leasing up in a new rental apartment or house.

29. First, tell me about your decision to join [MOBILITY PROGRAM]. What made you interested in enrolling?

Mobility staff interactions

30. Were you assigned to a particular staff member, or did you interact with various people at [MOBILITY PROGRAM]?

- a. Tell me about how that worked. Who did you interact with the most?
- b. What did you communicate about with [STAFF MEMBER(S)]?

31. How did you typically communicate with [MOBILITY PROGRAM] [STAFF MEMBER(S)]?

Probes: Scheduled meetings, in-person, informal calls/texts, who initiated contact?

- a. How often did you speak with them?
- b. What did you find most helpful in your interactions with them? Can you give an example?
- c. What did you find not helpful? Can you give an example?

32. Did your work with [STAFF MEMBER(S)] help prepare you for your housing search? Tell me more about that.

33. Do you feel like [STAFF MEMBER(S)] understood what you were going through with the search process? Do they listen to your concerns?

- a. Can you give me an example of when you felt staff really listened/did not hear your concerns?

34. How easy or difficult was it to work with [MOBILITY PROGRAM] to get the help you wanted? Tell me more about that.

- a. [If challenging] Tell me more about a specific instance or example.

Probes: Communication with staff/reaching staff, availability of needed service(s), clarity on services available?

35. Since you leased up, have you communicated with PHA or [MOBILITY PROGRAM] staff? [If yes] Who have you interacted with? What were these communications about?

Mobility services/programming

Let's shift to talk about the services available through the [MOBILITY PROGRAM] and your experiences with them.

We're interested in hearing about all types of services or assistance available to you from [MOBILITY PROGRAM], even if you have not used them. Later, I'll ask you about the services you did use; for now, I'm interested in the variety of services you were offered.

By services, we mean the types of help the program staff can provide to help your search, like one-on-one meetings with a [MOBILITY PROGRAM] coach, group workshops, help finding apartments/houses in opportunity areas, financial assistance, and help communicating with landlords.

36. What types of services or assistance have been available to you from [MOBILITY PROGRAM]?

Probes: One-on-one meetings with a [MOBILITY PROGRAM] coach; mapping family systems; help identifying goals for the move; education about the program and opportunity areas; review of credit report; help preparing an application cover letter; group workshops; financial assistance?

37. Which of the services that [MOBILITY PROGRAM] offers did you use?

- a. How did you decide to use these services as opposed to the other ones?
- b. Are there other services you think you will use at some point?

Probes: One-on-one meetings with a [MOBILITY PROGRAM] coach; mapping family systems; help identifying goals for the move; education about the program and opportunity areas; review of credit report; help preparing an application cover letter; group workshops; help covering application fees, security deposits, other moving expenses?

38. Were the services you used from [MOBILITY PROGRAM] helpful during your housing search and lease-up?

- a. Which were the most useful? Tell me more about that.

Probes: Working one-on-one with a [MOBILITY PROGRAM] coach; help identifying available units, help negotiating with landlords, help assisting with and expediting PHA's lease-up process; help covering application fees, security deposits, or other moving expenses; navigating perceived discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.?

- b. Which service or services did you find least useful, if any? Can you give any examples of something that hasn't turned out to be useful?

39. *[If they mention getting financial assistance]* How helpful was the financial assistance in moving to an Opportunity Area?

- a. Did you have other expenses not covered by the financial assistance that you needed help with to move to an Opportunity Area?

40. [Existing voucher families] Thinking back to other moves you have made with your voucher, did the help you received through [MOBILITY PROGRAM] make any difference compared with your previous housing search experiences? Tell me about that.
- a. Tell me more about past experiences with landlords and using your voucher. Did the services you receive(d) through [MOBILITY PROGRAM] make a difference with your interactions with landlords?
41. If you could improve the help [MOBILITY PROGRAM] provides to people with vouchers searching for housing and leasing up, what changes would you make?

Probes: Make changes to types of services available, how services are delivered, length of services, staffing changes, etc.?

POST-MOVE SERVICES (if available) [Treatment Respondents]

42. I understand the mobility program also offers help after your move. Please tell me about the help that has been available to you since your recent move.
- a. What services or assistance have you used?
- b. [If used services or assistance] In what ways has the help you received from [MOBILITY PROGRAM] after moving into your apartment/house been useful, if any?
- i. Has any of the assistance since your move not been useful? [If yes] What hasn't been useful?

Probes: Support for landlord disputes; conflicts with neighbors; housing quality concerns; second moves; voucher questions; complaints from neighbors; discriminatory actions based on race, ethnicity, family status, disability status, sexual orientation, gender identity, age, or source of income, etc.? Can you tell me about any help you were offered since you moved, but you did not end up using?

43. [Existing voucher families, if used post-move services] Did the help you received from [MOBILITY PROGRAM] after your move make any difference compared with your previous move experiences with a voucher? [If yes] How so? Tell me more about that.

Probes: Particular services, specific things said or done by coach/counselor?

44. If you could get other help from [MOBILITY PROGRAM] after your move, what type of help would you want?

Probes: Make changes to types of services, how services are delivered, frequency of contact with coach/counselor, etc.?

SATISFACTION WITH MOVE AND NEIGHBORHOOD [All Respondents]

45. Are you satisfied with how your most recent move turned out? Can you tell me more about that? Why or why not?

Probes: Satisfied with the neighborhood, with the house/apartment, with your landlord, with schools, with neighbors?

- a. Has the help you got from [MOBILITY PROGRAM] affected how satisfied you are? If so, how?
46. Are your child/children satisfied with the move? Tell me more about that. Why or why not?

Probes: Satisfaction with new housing, neighborhood, school (if changed), distance from friends or school, distance from family, interaction with neighbors, new friends?

REFLECTIONS ON MOBILITY PROGRAM [Treatment Respondents]

47. Overall, how satisfied are you with the help that you received during your housing search and since your move?
- Probe: Why satisfied or dissatisfied?
48. *[Treatment group]* Do the services you have received play into your thoughts about staying in this neighborhood? How so?
- a. How might [MOBILITY PROGRAM] help you stay in this neighborhood if you want to?
49. Overall, how satisfied are you with [MOBILITY PROGRAM] [STAFF MEMBER(S)]? Tell me more about that.

CLOSING [All Respondents]

Thank you for taking the time to talk with me today.

50. Is there anything I did not ask about your moving experience or [MOBILITY PROGRAM] services that is important for us to understand?

51. Do you have any final questions for me about the study or about the research team?

Thank you for your time. We will now turn off the recorder.

[Discuss compensation and collect future contacts list.]

OMB No. 2528-0337

Exp. 06/30/2025

PHA Household ID: _____

Appendix 14: Interview Guide for Opportunity Area Landlords

This interview guide is intended for landlords, property owners, or property managers who have units in opportunity areas and who have interacted with housing mobility services in the past.

Note for interviewer: The section transitions are important for clarifying nuanced differences between sections and reducing repetitiveness felt during pretests.

CONSENT

Thank you for taking the time to speak with me today. I am <NAME>, a researcher at <ORGANIZATION>, and this is <NAME> from <ORGANIZATION>. Before we begin, I want to tell you a few things about this study and your participation in it. Please feel free to ask me any questions you might have as I move through the introduction.

The U.S. Department of Housing and Urban Development (HUD) hired a research team to conduct a study on HUD's Community Choice Demonstration (Demonstration). The research team is led by Abt Associates and includes the Urban Institute and other organizations that are involved in other components of the demonstration. The Demonstration is underway in nine sites across the United States and involves offering services to families and to property owners to help families who have a Housing Choice Voucher find and remain in rental housing in lower-poverty areas. The purpose of the study is to determine whether and to what extent mobility services are effective in helping Housing Choice Voucher (HCV) families move to higher-opportunity, lower-poverty neighborhoods.

As part of this study, we will be talking with other landlords, representatives from Public Housing Agencies (PHAs), mobility service providers, and households who are participating in the Demonstration. During this interview, we will ask you questions about your experiences as a landlord/property manager/owner, and your perspective on the standard Housing Choice Voucher (HCV) or Section 8 voucher program and on the Demonstration, including questions about how well the HCV or Section 8 and the Demonstration voucher programs meet the needs of participating families. We are not evaluating your work as a landlord. At the end of the interview, you will receive a \$30 gift card. Your participation is voluntary, and you can choose not to answer any question and choose to end the conversation at any time.

We will be conducting at least two rounds of interviews, and we may reach out to you again in a couple of years for an additional interview.

I am required to tell you that the questions in this interview have been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. Public reporting burden for this collection of information is estimated to average 60 minutes, including preparation and follow-up. The OMB number is OMB #: 2528-0337, expiring on 06/30/2025.

During the interview, one of the researchers will be taking detailed notes, but we will not identify your name in our notes. With your permission, we will audio record the interview to have an

accurate record of what is said; we will not record any video of this call. We may contact you after the interview to ask for clarification. We will not allow anyone outside the research team, which includes staff from the Urban Institute, Abt Associates, and other HUD contractors, to listen to the audio recordings or review the notes we take. We will make every effort to protect your privacy to the extent permitted by law, but if we think you are at risk of harm, we may need to notify someone. Only the people doing the research will see any information that identifies you personally, and we will destroy the recording, transcript, and notes at the conclusion of the project, which we anticipate will be in 2028.

Themes across all the conversations we are having will be published in a report to HUD. When we write our reports and discuss our findings, the answers you provide during an interview will be combined with answers from many individuals. We never share any information that identifies you or any other respondents by name outside of our research team. However, we may identify the neighborhood your properties are in, and the location could allow an individual to indirectly attribute a statement to you. We make every effort to avoid this, but you should be aware of the possibility.

Do you have any questions about the study or today's discussion? *[Pause for response and address any questions]*

Do you agree to participate? *[Pause for response]*

Do you grant us permission to record the interview? *[Pause for response]*

Thank you, we are going to begin recording now.

[If permission is granted] The recorder is now on.

Do you have any questions before we continue?

OK, let's start.

BACKGROUND (ALL RESPONDENTS)

Please tell me about yourself and your work as a property owner/property manager.

1. How should we refer to you?

Probes: An investor, landlord, property owner, property manager?

2. How long have you been an owner of rental properties/a property manager?

a. What led you to get into the property rental business?

3. To help us understand differences in landlords' experiences, it is helpful to have some context. Can you tell me how many rental units you own/manage?

It sometimes helps if I write down each of your property/properties, and we can talk more about them one at a time:

a. Where are they located?

Probes: City, region, specific neighborhoods?

- b. What types of properties are they?

Probes: Apartments in duplexes or multifamily homes, single-family homes?

The next questions will help me decide which questions in the guide are relevant to your experience.

- 4. Do you currently rent to tenants with standard HCV or Section 8 vouchers?

- a. *[If no]* Have you rented to housing choice voucher (HCV) or Section 8 tenants in the past?
- b. *[If yes]* About what percentage of your units are typically occupied by tenants with an HCV or Section 8 voucher? *[If trouble estimating the percentage]* About how many of your units are typically occupied by tenants with a voucher?
 - i. Are there units that you rent exclusively to voucher tenants? Tell me all about that.
 - ii. Are there units you don't rent to voucher tenants? Tell me all about that.

- 5. Do you currently rent to any tenants who participate in [MOBILITY PROGRAM]?

- a. *[If yes]* How many [MOBILITY PROGRAM] tenants do you currently have in your property/properties?
- b. *[If yes]* About how long have you been renting to [MOBILITY PROGRAM] tenants?
- c. *[If no]* Have you rented to any [MOBILITY PROGRAM] tenants in the past?

HCV PROGRAM EXPERIENCE (LANDLORDS WITH HCV/Section 8 EXPERIENCE)

[Ask these questions of landlords who are currently renting to tenants with a Housing Choice Voucher/Section 8 or who have rented to such tenants in the past (Q4 or Q4a = "Yes").]

As we mentioned, we're really interested in landlords' experiences with the HCV or Section 8 program, positive and negative, and anything in between. *[If Q5 = Yes]* I'll ask about your tenants in [MOBILITY PROGRAM] later. Right now, I'd like to focus on the voucher program.

You said you rent or have rented to voucher tenants.

- 6. Tell me about your experience with and understanding of the HCV or Section 8 program.

- a. Does the program set the amount of rent you can charge your tenants? What is that process?

Probes: For particular areas? For particular units?

- b. Tell me about the logistics involved with renting to a tenant with a voucher. Take me through the whole process.

- i. What are the rules and regulations that make renting to these tenants different from renting to market-rate tenants?

- Probes: At lease-up, during tenancy, annual releasing, evictions?
- ii. How are you paid for units occupied by tenants with housing vouchers? How is this process different for tenants without a voucher?
 - iii. When are you paid the rent?
 - iv. What have you done, or would you do if a tenant doesn't pay their portion? Does this differ for tenants without a voucher?
7. [If 4.i., 4.ii = Yes] You said that you manage some of your units especially for the voucher program. Do you advertise specifically to tenants with vouchers for some units?
- a. Tell me what makes those units better candidates for a voucher tenant.
 - b. How about units you do not market or rent to voucher tenants? What makes those units better for tenants without a voucher?
- Probes: Rent caps, housing location, neighborhood, housing condition?
8. Tell me about your experience renting to HCV or Section 8 voucher tenants, for example, experience with length of tenure, unit upkeep?
- a. Tell me about any advantages of renting to people with vouchers?
- Probes: Assurance you will get rent, tenant characteristics, tenants already screened, rent amount paid?
- b. How about any downsides to renting to people with vouchers?
- Probes: Government intervention, tenants, bureaucracy, inspections?
9. Has your experience with voucher tenants been different in any way from tenants who do not use vouchers? [If yes] Give me an example.
10. [If rented to tenants with a standard HCV or Section 8 voucher in the past and does not currently] You said you used to rent to people with vouchers but don't now. We would love to know more about this. What led you to decide not to rent to voucher holders?

Probes: Experience with the PHA, rents, tenants, other concerns?

MOBILITY PROGRAM EXPERIENCE (MOBILITY PROGRAM LANDLORDS)

[Ask these questions of landlords who are currently renting to mobility program participants, or who have rented to mobility program participants in the past (Q5 or Q5c = "Yes").]

The next set of questions shifts from the HCV or Section 8 voucher program to your experience with [MOBILITY PROGRAM], and what it is like working with the program.

11. How did you first learn about [MOBILITY PROGRAM]?

Probes: Learned from a tenant, a mobility services staff member, PHA staff, word of mouth?

- a. What were your initial impressions of [MOBILITY PROGRAM]?

Probes: Willing to participate, reservations, didn't know the difference with standard HCV?

12. How much do you/your staff interact with [MOBILITY PROGRAM] staff?
 - a. *[If interacts with staff]* What do you interact with [MOBILITY PROGRAM] staff about?
Probes: Interact at different stages of the process (search and application, lease-up, post-move); information about the voucher; discussions about lease/tenants; inspections; use of any incentives or financial incentives; post-move check-ins?
13. How helpful or useful have you found/did you find the [MOBILITY PROGRAM] to be?
14. Tell us what aspect of the MOBILITY PROGRAM is/was most helpful to you?
15. Did any of the families who participated in [MOBILITY PROGRAM] prepare a tenant resume or cover letter when they applied for housing that described their background and why they would be a good tenant?
 - a. *[If yes]* What did the letters talk about?
Probes: children, credit, eviction history, employment, recovery, the importance of housing for their family goals?
 - b. *[If yes]* How did the rental resume affect/change your impressions of the tenant (if at all)? OR How effective was the rental resume?
16. We understand that the [MOBILITY PROGRAM] offers a streamlined housing inspection process. How does that process work?
17. We understand that the [MOBILITY PROGRAM] provides a signing bonus to owners for leasing to a participant. Tell us anything you've heard about that.
 - a. *[If landlord has rented to a family in the mobility program]* Have you ever received a signing bonus for participating in the [MOBILITY PROGRAM]? Tell us how that worked.
 - b. *[If the landlord has received a sign-up bonus]* How long did the process take to receive the bonus?
 - c. *[If the landlord is familiar with the bonus but has not received it yet]* How much is the bonus for (if you know)?
18. The [MOBILITY PROGRAM] will pay a holding fee to help protect the owner in the event a voucher family does not follow through and rent a unit which the owner has agreed to hold for them. Are you familiar with this policy?
 - a. Have you ever requested or received a holding fee for tenants in the mobility program?
 - b. Tell us how that worked.
19. The [MOBILITY PROGRAM] has a damage mitigation fund to help protect owners from damage to the unit. Have you submitted any claims to this fund?

- a. *[If they have used the fund]* Tell me how that process worked.
 - v. Who did you work with?
 - vi. How long did it take to process?
 - b. *[If they have used it]* How well would you say it worked for you?
20. [MOBILITY PROGRAM] offers tenants assistance with their security deposit upon request. Tell me about any of your tenants getting security deposits from the [MOBILITY PROGRAM]. How did that work for you?
21. How do the services/incentives I've asked about shape your decision to rent or consider renting to tenants participating in the [MOBILITY PROGRAM]?
- a. Which services/incentives are most appealing? Which are less important to you? Which services are missing that you would find really helpful?
22. *[If landlord rents to standard HCV tenants (Q4 or 4a = Yes)]* How does the process of leasing to tenants in [MOBILITY PROGRAM] compare with leasing to tenants with an HCV or Section 8 voucher who are not a part of the [MOBILITY PROGRAM]?
- a. What about inspections? How does the process for tenants in the [MOBILITY PROGRAM] compare with other HCV or Section 8 voucher tenants? Is it the same?
 - b. What about dealing with [PHA/PHAs]? How does that process differ for [MOBILITY PROGRAM]?

EXPERIENCE WITH MOBILITY PROGRAM TENANTS (MOBILITY PROGRAM LANDLORDS)

[Ask these questions of landlords who are currently renting to mobility program participants or who have rented to mobility program participants in the past (Q5 or Q5c = "Yes").]

For the next set of questions, we'll shift from the [MOBILITY PROGRAM] processes to your experience with [MOBILITY PROGRAM] tenants.

23. How are your [MOBILITY PROGRAM] tenants doing in their units?
Probes: No issues/some issues with behavior, upkeep, length of tenure; training and preparation for tenancy through the program?
24. Has there been a time when you had any issues with your [MOBILITY PROGRAM] tenant? What happened?
 - a. *[If yes]* How was it resolved?
Probes: Interaction with mobility program staff, the local housing authority, etc.?
 - b. *[If yes]* How did the mobility program or housing authority help resolve it?
25. Have you experienced turnover with any of the tenants participating in [MOBILITY PROGRAM]?

- a. *[If yes]* Take me through the story of how they left and what happened.
 - b. *[If yes]* What interactions did you have with staff at [MOBILITY PROGRAM] about it?
 - c. *[If yes]* Have you continued renting to tenants participating in the [MOBILITY PROGRAM] after the initial [MOBILITY PROGRAM] tenant left? Tell me more about that.
26. Tell me about any advantages of renting to [MOBILITY PROGRAM] tenants. Give me an example.

Probes: Program staff, signing bonus or holding fee, other services or incentives, assurance that you will get the rent on time, government intervention, tenant characteristics?

27. Tell me about any downsides of renting to [MOBILITY PROGRAM] tenants?
- a. Has there been a time when you were frustrated with [MOBILITY PROGRAM] with regard to your dealings with tenants? Can you tell me more about that? What would have helped at that time?

Probes: Program staff, service quality, support and communication, application and approval process, inspections, administrative delays, small area FMRs, tenant damages, leases?

28. Looking forward, would you be willing to rent to more tenants from [MOBILITY PROGRAM]? Why or why not?
- a. What would make you more likely to rent to MOBILITY PROGRAM tenants?

PERCEPTIONS OF HCV PROGRAM (LANDLORDS WITH NO HCV/Section 8 PROGRAM EXPERIENCE)

[Ask these questions of landlords who have never rented to tenants who used a Housing Choice/Section 8 Voucher (Q4 and Q4a = "No").]

You said you've never rented to a Housing Choice or Section 8 voucher tenant. I'd like to know more about your thoughts on the Housing Choice Voucher (HCV) or Section 8 program so we can learn how to improve it.

29. Have you ever been approached by a potential tenant with an HCV or Section 8 voucher?

- a. *[If yes]* About how frequently have you been approached by a person with an HCV or Section 8 voucher?
- b. *[If yes]* Tell me about the last time you were approached by a person with an HCV or Section 8 voucher. How did that go? Why did you end up not renting to them?

Probes: Decided not to participate; declined to follow-up; issues related to HCV or Section 8 voucher program (rent cap, inspection process, occupancy); issues related to the tenant/family (income, debit/credit, background, deposit issues)?

30. Have you heard that there are any advantages or disadvantages to renting to HCV or Section 8 voucher tenants? Tell me about that.

- a. What are the advantages?

Probes: Assurance you will get rent on time, tenant characteristics?

- b. What about the disadvantages?

Probes: Tenants, bureaucracy, inspections, lost rent/money while waiting for unit approval?

- c. How likely are you to rent to an HCV or Section 8 voucher tenant in the future?
- d. What would need to change about the program for you to rent to an HCV or Section 8 voucher tenant or list your units through the program?

Probes: support for tenant leasing, access to a damage mitigation fund, landlord signing bonus, post-move check-in supports?

31. Do you have any concerns about participating in the HCV or Section 8 voucher program?

- a. What could be done to alleviate those concerns?

MOBILITY PROGRAM KNOWLEDGE (LANDLORDS without mobility program experience)

[Ask these questions of landlords who have never rented to mobility program participants (Q5 and Q5c = “No”).]

32. Has anyone reached out to talk to you about the [MOBILITY PROGRAM]?

- a. *[If yes]* How did they reach out to you? Tell me more about how they contacted you and what they shared about the program.

Probes: Shared information, invited you to attend a training/education session, shared tools to market your units to HCV or Section 8 voucher tenants, shared information about program incentives for landlords?

33. *[If contacted about the mobility program]* How helpful was the information that was shared with you?

- a. How did the information affect your interest in renting to program participants?
- b. Tell me about any reservations you had with the mobility program that the outreach/interaction did not address.

REFLECTIONS (ALL RESPONDENTS)

For the last couple of questions, I’d like to ask you to reflect on the mobility Demonstration and the voucher program overall.

34. What do you think of the [MOBILITY PROGRAM] overall?

- c. What was shared with you about the goals of the program? What do you think about that?

35. One of the goals of [MOBILITY PROGRAM] is to help families move to safe neighborhoods with good schools that will help them and their children to thrive. What do you think about that?
- a. *[If MOBILITY PROGRAM landlord]* How do you see your role in supporting the goals of the mobility program as a landlord?
36. *[If MOBILITY PROGRAM landlord]* What do you think is working well with [MOBILITY PROGRAM] so far?
- d. What do you think could be done to make [MOBILITY PROGRAM] more effective?
37. *[NON-MOBILITY PROGRAM landlord only]* The mobility program offers households pre-move coaching, deposit and other moving-related costs, a holding fee, and a damage mitigation fund. Which of these services, if any, would be helpful to you in renting to families using a voucher?
- e. Which of these services, if any, would make a difference for you in deciding whether to rent a property to a family using a housing voucher?
38. What could be done to make the regular HCV or Section 8 voucher program more effective?

CLOSING (ALL RESPONDENTS)

Thank you for taking the time to talk with me today. I have just a few more questions.

39. Is there anything that I did not ask about [MOBILITY PROGRAM] or the Housing Choice Voucher program that is important for us to understand?
40. What else should we understand about being a [LANDLORD/PROPERTY OWNER] in this housing market?
41. Do you have any final questions for me about the study or about the research team?

Thank you for your time. We will now turn off the recorder.

OMB No. 2528-0337

Exp. 06/30/2025

PHA Household ID: _____

Appendix 15: Cost Data Collection Interview Guide

ROLE OF COST INTERVIEW WITHIN COST ANALYSIS

This interview guide will be administered to staff of Public Housing Agencies (PHAs) and mobility-related service providers participating in the Community Choice Demonstration. The purpose of the interview is to collect detailed cost data to inform the evaluation's cost analysis. This primary data collection will confirm and supplement the analysis of administrative expenditure reports and records of mobility-related financial assistance.

CONSENT SCRIPT

Before we begin, I want to tell you a few things about this study and your participation in it. If you would like translated materials, or to complete the survey in a language other than English, please let us know, and we will try to accommodate you. If you need information to be presented in an accessible format, for example, Braille, audio, large type, or sign language interpreters, or need a reasonable accommodation (a change or adjustment) so that you can participate, please let us know. Please feel free to ask me any questions you might have. We will also [email/give] you a copy of this information.

The U.S. Department of Housing and Urban Development (HUD) hired a research team to conduct a study on HUD's Community Choice Demonstration (Demonstration) program. The research team is led by Abt Associates and includes the Urban Institute, MEF Associates, Sage Computing, Social Policy Research Associates, a team of consultants, and other researchers that may be added in the future. The research team and HUD want to determine whether and to what extent mobility-related services are effective in helping Housing Choice Voucher (HCV) holders move to higher-opportunity, lower-poverty neighborhoods.

As part of this study, we are conducting interviews with PHAs and mobility service providers that have implemented mobility-related services as part of the Demonstration. These interviews are being conducted at each of the participating sites, including [PHA]. This cost interview is one of several interviews the evaluation team will conduct with PHA [and service provider] staff. The purpose of the interview is to gather information that will allow us to understand, estimate, and document the costs of mobility-related services provided to voucher-holder families as part of the Demonstration. We are not conducting an audit, and we are not evaluating your agency or its services.

We will conduct interviews about costs twice over the course of our evaluation—in the first year of implementation (to review the cost of the mobility-related services initially implemented) and in the third year of implementation (to update the prior estimates). In prior correspondence, we requested documents and files related to mobility-related services costs to date. We will request these documents annually for each subsequent year of evaluation data collection. We have reviewed the documents you have already provided to prepare for this interview. During the interview, we will confirm our understanding of these documents and fill in any gaps in the information we need for our analysis. All findings will be reported back to HUD in aggregate

form, but given the small number of PHAs involved in the Demonstration, it may be possible to identify specific PHAs. Evaluation reports will not include names or other identifying information of any individual staff.

I am required to tell you that the questions in this survey have been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. This collection of information is voluntary and will be used to evaluate the U.S. Department of Housing and Urban Development's Community Choice Voucher Demonstration. The information requested under this collection is fully protected and kept private to the extent possible by law, including 5 U.S.C. 552a (Privacy Act of 1974) and OMB Circular No. A-130.

Public reporting burden for this collection of information is estimated to average 2 hours per individual responding, 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 and expiration date for this collection are OMB #: XXX-XXXX, Exp: 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 XX at XXXX@XXX., or by phone at XXX-XXX-XXXX.

Do you have any questions about the study or today's discussion? *[Pause for response and address any questions]*

Do you agree to participate? *[Pause for response]*

OK, let's start.

Thank you for taking the time to talk with us today.

MOBILITY-RELATED SERVICES

1. Based on your application to participate in the demonstration, a review of monthly invoices for the program that are sent to HUD, expenditure reports you provided to us prior to the interview, and prior conversations with evaluation and technical assistance staff, we have developed a list of the mobility-related services provided by your PHA as part of the demonstration.
 - Tenant-focused interventions
 - Pre-move services
 - Housing search assistance
 - Family financial assistance
 - Security deposit
 - Flexible financial assistance
 - Discuss subcategories from services tracking tool
 - Other:

- Post-move services
- Other: _____
- Other: _____
- Landlord-focused interventions
 - Recruitment
 - Financial or insurance incentives
 - Lease-up bonus
 - Holding fee
 - Damage mitigation fund
 - Other: _____
 - Other: _____
- Other: _____

Are there any other services that are being provided as part of the [MOBILITY PROGRAM] that are not yet on our list? *[If yes, add services to the list and probe until the list is comprehensive. If not sure, and someone else is more knowledgeable about services provided, confirm who that person is. If the cost analysis interviews do not currently include that person, schedule an additional interview with that person, or reschedule this interview with that person present.]*

2. In assessing the costs of mobility-related services, we are interested in understanding the combined extra cost of services that are provided because a family participates in [MOBILITY PROGRAM]. This means that we need to estimate the cost of any similar services obtained by comparison group members outside of the demonstration.

Does [PHA OR SERVICE PROVIDER] also provide any of these services, or similar services, to families that are assigned to the control group in this study?

- a. *[If yes]* Which services do they receive?
 - b. Are any resources outside of the [MOBILITY PROGRAM] used to provide similar services to control group families, such as services provided before participating in [MOBILITY PROGRAM]?
 - c. *[If yes]* What resources are those?
3. Do any other partner or community organizations provide these or similar services to voucher holders in your area (apart from MOBILITY PROGRAM)?
 - a. *[If yes]* Which services? Which voucher holders are eligible for these services? About how many voucher holders use these services?

[If yes to either Question 2 or 3, complete “Services available to non-CMRS participants” at the end of the interview]

RESOURCES USED TO PROVIDE MOBILITY-RELATED SERVICES

I would like to begin with a high-level review of the resources used to provide mobility-related services, beginning with staffing. We will also discuss:

- financial assistance or incentives provided to households or landlords,
- any materials or incidental costs, and
- any management or overhead costs.

As we discuss costs, it may be helpful to distinguish between ***one-time start-up costs***, like hiring and onboarding staff or providing mobility-related service-specific trainings, and ***ongoing costs***, like staff salaries and costs associated with services.

PARTNERING ORGANIZATIONS

[PHAs] Different sites in the Demonstration take different approaches to providing services. In some places, PHAs contract with community organizations to provide mobility-related services. In others, the PHA provides services in-house. It is our understanding that [PHA] *[pre-fill with site-specific information on any PHA partners]*.

[Mobility Service Providers] It is our understanding that you provide services for the [MOBILITY PROGRAM]. However, it is often the case that some costs for some services are shared between the mobility service provider and the PHA.

[If applicable] As we review the mobility-related services provided, we will ask you to identify which services are provided by your organization and which are provided by a partner.

STAFFING

Let's review the staffing used to provide mobility-related services. We will first review individual staffing positions by job title and average salary, and then we want to understand the link between staffing costs and invoice and expenditure reports. We understand that staffing can be in flux over time. We are looking for a best estimate of the staffing that you have used to provide comprehensive mobility-related services (CMRS) when your program is running at full capacity (or as close to full capacity as your program has achieved to date).

As we ask these questions, we are interested in you providing (1) the job title that is relevant to the mobility-related services work of a staff member and (2) the average salary for the respective job title that fills that role. We do not want or need specific names or the actual salary of any particular individual. We will also ask you to estimate the proportion of the individual's time they spend providing each of the various services. Best estimates of this proportion are fine if it is not something that you normally keep track of. If you prefer, you can also get back to us with an updated estimate after discussing it with staff after our interview.

[Responses to questions 4 through 9 should be used to fill out Table 1. For each staff member identified, complete the table with the responses to questions 4 through 6.]

1. Let's start by identifying the staff positions that manage the mobility-related services for [MOBILITY PROGRAM]. How many individuals are involved in managing mobility-related services, making decisions, and generally responsible for the oversight of the implementation of mobility-related services in [MOBILITY PROGRAM]?
 - a. What is the job title of the position(s), and for what organization do they work?
 - b. What is the average salary, or what is a typical salary range, for this position?
 - i. What is the salary itself?
 - ii. What is the salary when "fully loaded," including benefits, payroll taxes, etc.?
 - c. About how much of their time do they spend on [MOBILITY PROGRAM] (fraction of FTE, best estimate)?
 - d. When did this staff position begin? (And end?)
 - e. *[If needed]* About how many hours a week, on average, does this person spend on [MOBILITY PROGRAM], as opposed to other programs or initiatives?
 - f. Does this person focus on some mobility-related services more than others? If so, what percent of their time is spent on each service (best estimate)?
2. How many individuals directly provide mobility-related services?
 - a. What is the job title of this position, and for what organization do they work?
 - b. What is the average salary, or what is a typical salary range, for this position ("fully loaded," including benefits, payroll taxes, etc.)?
 - i. What is the salary itself?
 - ii. What is the salary when "fully loaded," including benefits, payroll taxes, etc.?
 - c. About how much of their time do they spend on mobility-related services (fraction of FTE, best estimate)?
 - d. *[If needed]*: About how many hours a week, on average, does this person spend on mobility-related services, as opposed to other programs or initiatives?
 - e. Does this person focus on some mobility-related services more than others? If so, what percent of their time is spent on each service (best estimate)?
3. Are any other staff involved in providing or supporting mobility-related services? Have there been any additional staffing requirements in other initiatives because of mobility-related services? (For example, are more staff required in other aspects of administering vouchers because mobility-related services result in more work for them in some way?)

[If yes, add to the table with all information addressed in questions 5a through 5e].
4. What time period does this level of staffing cover? (e.g., FY 2022, Q2-Q3 2022, etc.)

5. How do you assess your staffing levels for mobility-related services? Do you keep track of caseloads, or do you have some other way?
 - a. How does the staffing we have reviewed compare to the staffing that would be optimal for the level of mobility-related services provided during this time?
6. Has the level of staffing changed over time? If yes, ...
 - a. In what time period was the staffing at the levels you have described in this interview? *[Probe to understand which month.]*
 - b. How many families [have] received assistance during this time period?
 - c. Please describe in general terms how staffing levels have changed. *[Probe for number of staff and time periods]*
 - d. Do you have any documents or reports that would help us understand how staffing levels have evolved since the beginning of the demonstration?
7. What training and onboarding processes were required for staffing to start up mobility-related services?
 - a. How often do you expect to need to provide this type of training moving forward?
 - b. Do you have any documents that would help us understand the cost of this training? Is it captured in the staffing time we have already discussed or in the expenditure records you have shared with us?

Table 1: Staffing Detail for Mobility-Related Services

For each column with a %, specify the percent of mobility-related services time spent on specific services.

FINANCIAL OR OTHER ASSISTANCE, INCIDENTAL COSTS, PARTNER OR IN-KIND COSTS

Now let's turn to other types of costs of mobility-related services. These could include, for example, financial payments to families or landlords, incidental costs for materials or travel, or costs incurred by partner organizations or as in-kind donations. To capture and estimate these costs, we will discuss each mobility-related service provided, and ask for your input on each kind of cost. We have prefilled information on financial assistance costs from monthly invoices and reports from the service delivery tool to date. In this discussion, we are asking you to confirm and provide context to these administrative data sources. We will also work together to determine allocations of costs from invoices and expenditures reports across the various CMRS service components.

[Ask the following questions for each mobility-related service identified, which should also be listed in either Table 2 or 3 (or both).]

1. What types of financial assistance are provided to families or to landlords as part of the [MOBILITY PROGRAM]?
Probes: Security deposits to families, application fees, administrative and processing fees, holding fees, prorated first-month's rent, move-in fees, Coach Discretionary Fund, owner lease-up bonus?
2. Are there any incidental costs incurred in providing [MOBILITY SERVICE]? Examples may include vehicle expenses or mileage for traveling, printing costs of materials, computer costs, or any others.
3. Are there any other organizations that provide individuals or landlords with financial assistance, other tangible materials, or in-kind support as part of providing this service? Examples may include a professional volunteer (e.g., real estate professional) supporting efforts to provide mobility counseling.

[A deciding factor to help determine whether the organization should be included: Would the service be provided to prospective tenants that did not have an HCV?]

- a. Please describe and detail the service provided, estimating hours per week/month of assistance, value of financial assistance, value of in-kind assistance, etc., for each other organization. *[For all sites except New York City, do not include a landlord representative that is showing or advertising property as part of normal business operations.]*
- b. Is there any documentation of this partnership and assistance provided?
4. *[If it is unclear whether an identified service includes financial assistance]* Does the family receive any financial assistance as part of [MOBILITY SERVICE]?
5. *[For each service that involves the provision of financial assistance, collect the following information in Table 3.]*
 - a. To whom is financial assistance directed (i.e., household or landlord), and at what frequency is it provided?

- b. How much assistance, on average, is provided to each household/landlord?
- c. How is the amount determined?
- d. What is the maximum that a household/landlord can receive? Minimum?
- e. Are all assistance amounts tracked in the service delivery tool? If not, how are amounts documented and tracked? *[Ask for a copy of documentation.]*

Table 2: Incidental and Partner Costs of Mobility-Related Services

Tenant-Focused Costs	Incidental Costs	Partner/In-Kind Assistance
• Pre-move		
• Housing search		
• Financial assistance		
• Security deposit/rent pre-payment		
○ Moving expenses		
○ Transportation assistance		
○ Other: _____		
• Post-move services		
• Other 1: _____		
• Other 2: _____		
• Non-divisible		
Landlord-focused		
• Recruitment		
• Financial or insurance incentives		
• Other 1: _____		
Non-divisible		
• Other 1: _____		
• Other 2: _____		

NOTE: The first column lists the mobility-related services. The second column is for incidental costs, such as travel, materials, furnishings, or other. The third column is for partner/in-kind assistance (time with hours / FTEs, value of donations, etc.).

Table 3: Question 14 – Financial Assistance Costs of Mobility-Related Services (Prefilled From Services Delivery Tracking Tool)

Financial Assistance	Number of families	Average	Unit (i.e., household, landlord, etc.)	Frequency (one-time, monthly, per event, etc.)
Tenant-focused				
• Security deposit/rent pre-payment				
• Flexible financial assistance				
○ [Subcategory rows]				
○ Other: _____				
Landlord-focused				
• Financial or insurance incentives				
○ [Subcategory rows]				
• Other 1: _____				

ORGANIZATION-LEVEL COSTS AND OVERHEAD

Organizations incur costs for items that apply to all activities and overhead expenses. These costs can be difficult to apportion between various activities. Examples include occupancy costs (rent, or the value of the space owned or used by the organization), insurance, executive leadership salaries, organizational membership dues, professional services costs (legal and accounting), and development or marketing expenses (for non-profit organizations). We have reviewed the expenditure reports you provided prior to this interview and the invoices to HUD and want to be sure we understand how the amounts in these documents relate to the costs we have discussed above.

1. Does your organization itemize any expenses in the following categories for mobility-related services?
 - a. Rent for space occupied (or share of space used)?
 - i. [If yes] Does this amount represent a market rate?
 - ii. [If no to either 1.a. OR 1.a.i]: How much space is used by [PHA OR MOBILITY SERVICE PROVIDER], and approximately what portion of that space is used for providing mobility-related services? Staff or programming?
 - b. Professional services (legal and accounting), insurance, organizational membership dues, etc.?
 - c. Executive leadership costs, corporate/organization incidental costs, etc.?
 - d. Fund-raising or marketing expenses?
 - e. Software subscriptions or hardware (e.g., tablets or notebooks) used to provide mobility-related services (including virtual adaptations)?
 - f. Other (printing and mailing, Limited English Proficiency, 504 compliance or other costs for reasonable accommodations, translation and interpretation services, banking and other financial transaction and audit fees, security, etc.)?

2. Does your organization calculate an overhead percent or multiplier that estimates the cost of these (or some of these) expenses as a share of organizational expenses? What is that multiplier?
3. What share of organizational expenses do mobility-related services represent? [Separate out financial assistance if it skews this response.]
4. What share of staffing costs are for mobility-related services?

SERVICES AVAILABLE TO NON-CMRS PARTICIPANTS

At the beginning of the interview, you indicated that some services similar to CMRS services are available to some families that do not participate in the [MOBILITY PROGRAM].

From my notes, these services include [refer to answers to questions 2 and 3]. We would like to ask you about each of these services provided to individual households by the PHA or service provider.

5. About how many voucher households use these services in a given month or year?
 - a. Who is eligible to receive the services? Do treatment group members ever access these services outside the CMRS demonstration program? [If yes, then determine whether frequency has decreased.]
 - b. Approximately what share of eligible households participate in services?
 - c. Do you have any documentation of the staffing and other resources needed to provide these services?
 - i. [If yes] May I add those to the list of documents that I will have you share with us?
6. How many staff members provide these mobility-related services? [For Each staff member identified, complete Table 3 with the following information.]
 - a. What is the job title of this position, and at what organization does the individual work?
 - b. What is the average salary, or what is a reasonable salary range, for this position (“fully loaded,” including benefits, payroll taxes, etc.)?
 - c. About how much of their time do they spend on these mobility-related services (fraction of FTE, best estimate)?
 - d. [If needed] About how many hours a week, on average, does this person spend on these mobility-related services, as opposed to other programs or initiatives?
 - e. Does this person focus on some of these mobility-related services more than others? If so, what percent of their time is spent on each service (best estimate)? Refer to the table below or the list above.
7. Do these mobility-related services include financial assistance? If so, what type of assistance is provided? [For each type of financial assistance, collect the following information.]

- a. To whom is financial assistance directed (i.e., household or landlord), and at what frequency is it provided?
 - b. How much assistance, on average, is provided to each household/landlord?
 - c. How is the amount determined?
 - d. What is the maximum that a household/landlord can receive? Minimum?
 - e. How are amounts documented and tracked? Arrange to acquire a copy of the documentation.
8. *[If services are provided to individual households by some organization besides the PHA or service provider]* Are there any other costs incurred in providing the mobility-related services? Examples may include mileage for traveling, printing costs of materials, data acquisition costs, or any others?
9. Do you have any information on how many voucher households use these services (financial assistance) in a given month or year?
- a. Who is eligible to receive the services?
 - b. Approximately what share of eligible households participate in services?
 - c. Do you have any information or documentation of the staffing and other resources needed to provide these services?
 - i. *[If yes]* May I add those to the list of documents that I will have you share with us? Or could you put me in touch with someone that could share this documentation with our study team?

Probes: Letters of commitment, MOU communication?

10. Do you have any information that you could share with us on the cost, per family served, of providing these services? Or estimates of the staffing and resources involved?
- a. *[If no]* What is your best assessment of how intensive these services are (in terms of staffing and assistance costs) as compared to similar services provided by [MOBILITY PROGRAM]?

For each column with a %, specify the percent of mobility-related services time spent on specific services.

Table 4: Staffing Detail for Similar Services to Mobility-Related Services

CONCLUSION

Thank you for taking the time to help us understand the resources and costs needed to provide mobility-related services.

1. Are there any other aspects of the costs of mobility-related services that we did not cover today that you think we should be aware of in conducting our analysis?
 2. Do you have any questions for us about the study or our planned analysis?

Thank you.

OMB No. 2528-0337

Exp. 06/30/2025

PHA Household ID: _____

Appendix 16: Consent Forms



HEAD OF HOUSEHOLD EXISTING VOUCHER FAMILY CONSENT FORM

Evaluation Of the Community Choice Demonstration

If you would like translated consent materials, or to complete the survey in a language other than English, please let the staff person you are talking to know. Please let them know if you need information to be presented in an accessible format, for example, Braille, audio, large type, or sign language interpreters. The staff person will do their best to provide a reasonable accommodation (a change or adjustment) so that you can participate.

You and the other people living in your household are invited to take part in an important study called the Community Choice Demonstration (CCD). The study is sponsored by the U.S. Department of Housing and Urban Development (HUD).

- This form asks you to provide consent to participate in the Community Choice Demonstration study. The purpose of this study is to help HUD understand how well different types of services help families move to different neighborhoods of their choice. Your participation in this study may help other families in the future.
- Your participation in the study is completely voluntary.
- In order to participate in the study, you need to allow the study to collect information about at least one of your children.
- If you agree to be in the study, you will be asked some questions about your children's current school experiences and health. You will also be asked to fill out a survey that will ask about your housing situation, your thoughts on moving, your education and employment status, and your health. Responding to the questions and the survey will take about 45 minutes.
- If you agree to participate, you will be randomly assigned to one of two groups. Randomly assigned means that you have an equal chance of getting into either group, like a coin flip. The first group will be offered the usual services from the [Public Housing Agency Name (PHA)] without any additional services. The second group will be offered additional services that will assist them in searching for and moving to housing in specific areas.
- You may be asked to participate in future surveys or interviews for up to 15 years. Your participation in those future study activities is voluntary.

- Researchers approved by HUD may be provided with data about you and your children from other agencies for up to 30 years as described more under the “What does it mean to be in the CCD study?” and “Will my information be used in the future? Can it be used for additional studies?” sections below.
- Your information will be kept private to the full extent provided by law and will be protected as described in the section “How will my information be protected?”

The [PHA] is operating the CCD program, with support provided by [LOCAL PROVIDER PARTNER(S)]. HUD contracted with Abt Associates and their research team to conduct the study. The research team includes Abt Associates, the Urban Institute, MEF Associates, Social Policy Research Associates, Sage Computing, a team of consultants, and other researchers that may be added in the future.

What is the CCD study?

The CCD study will allow us to learn how to help households find housing that can help children succeed in life. Some households will receive a special set of services to help them move to a new neighborhood of their choice. The CCD study will measure whether children in households that move to these new neighborhoods do better in school and earn more money later in life. The study will also measure how well these services help adults in the households.

Over 16,000 families from the participating public housing agencies will be invited to participate in this study. Families in the study will be put into one of two groups, at random:

- The “**Standard Services Group**”: this group will get a Housing Choice Voucher and all the existing services that [PHA] normally provides to families with a Housing Choice Voucher.
- The “**CCD Comprehensive Mobility Related Services Group**”: this group will get a Housing Choice Voucher and ongoing guidance from a staff member who will help them get ready to search for housing, connect them with landlords in specific areas, and provide funds to help pay for some housing search and certain leasing expenses, such as rental application fees, holding fees, and security deposits. Some services, such as guidance from a staff member on how to overcome obstacles to renting a new unit, will be offered to all families in this group. Other services, such as assistance paying a security deposit or an application fee, will be available only to help families move to specific areas. These are the neighborhoods that past research has suggested are particularly beneficial to children.

Your household will have the same chance of being offered the comprehensive services as all the other households that agree to be in the study. Families will be put into groups randomly by a computer process that is like pulling names from a hat. Group assignment is not based on anything you tell us about you or your household. You cannot choose which group you will be in.

Who can be in the CCD study?

You and the members of your household can be in the CCD study if:

- Your household currently has a Housing Choice Voucher from [PHA]
- Your household currently includes at least one child 17 years of age or younger.

- You agree to be in the study.
- You agree to allow at least one child 17 years of age or younger to be in the study.

The rest of this form explains what it means to be in the study. This form also describes the type of information that the research team will collect. We hope you will agree to participate.

What does it mean to be in the CCD study?

If you choose to join the CCD study, the research team will collect information about you and other members in your household in up to three ways. We will collect this information from all individuals no matter which group you are in.

- 1) **Current Information Collection:** We will collect information from you at enrollment (a baseline survey that will take up to 45 minutes). Baseline survey questions will include questions about your current housing status, thoughts about searching for housing, health and well-being, information about your children, and demographic information. We will ask you for your date of birth and your social security number or alien registration number, which will be used to gather your data from other state and federal agencies. We will also collect information about you from [PHA] records.
- 2) **Other Surveys and Interviews:** We might contact you in the future to collect additional information, which may be done either by the study team or other HUD-approved researchers. The long-term outcomes, especially for children, are important to HUD and the research team, so you may be contacted during the next fifteen years to complete one or more surveys. The follow-up surveys or interviews may ask about topics such as experiences with the program, searching for housing, education, work status, living situation, your and your children's health, and your children's schooling. Your children may also be asked to participate in future information collection efforts including interviews. We will also use your SSN to locate you through credit bureau data and other directories for follow up surveys and interviews over the life of the study. These follow-up surveys and interviews will also be voluntary. You do not have to participate.
- 3) **Longer-Term Information Collection:** Because we are interested in long-term outcomes, especially for children, part of the research includes getting information about you and your household members from federal agencies, state departments of labor, local school districts, child welfare agencies, and credit bureaus. Getting these types of data about you from other agencies means we can learn about some of the long-term outcomes of interest without asking you to do too many surveys. The information will be combined with the information you provide today and any future surveys to help HUD understand how families that enrolled in the CCD study are doing. This will help the research team learn how different kinds of housing and services helps families. This information will only be used for research. HUD will never use these data to determine your ability to participate in different programs.

Here are some examples of the types of information the research team may collect about you and your children for up to 30 years:

- Information from PHA records such as your address, your voucher issuance and expiration dates, characteristics of your rental unit, and your household's total income, assets, and rent;
- How much money you earned, maintained by federal agencies or your state's department of labor;
- Your financial well-being from databases maintained by credit bureaus (the study's collection of this information will have no effect on your credit score);
- Your children's school records from kindergarten through high school, including information about how they scored on achievement tests, their school absences, if they repeated a grade, if they had any disciplinary actions, how they are doing in school, and as they age out of high school, data from other educational agencies about whether they enrolled in college, and whether they graduated from college;
- Information from other educational agencies about whether you enrolled in college, and whether you graduated from college;
- Receipt of disability benefits;
- Health records, including Medicare or Medicaid;
- Information from federal government agencies, on employment, individual and household earnings, family composition, education, residency, neighborhood quality, and information found in tax returns.
- Participation in Temporary Assistance for Needy Families (TANF) or Supplemental Nutrition Assistance Program (SNAP).

You can stop being in the CCD study at any time. If you wish to stop being in the CCD study at any time, please see "Can I stop being in the study after I join?" section on page 5.

What are the benefits of being in the study?

Since you currently have a Housing Choice Voucher, you may be randomly picked to be offered special services to help you search for housing, explore new neighborhoods, and receive some financial help to cover some leasing expenses. If you do join the study, you are helping the research team and HUD learn about ways to help households move to specific neighborhoods and whether moving to these neighborhoods improves the lives of families with children.

What are the risks of being in the study?

There are very few risks involved. You may be uncomfortable with some of the questions asked at enrollment or in interviews or surveys. You can refuse to answer any question at any time. There is a small risk that your information could be lost or misused, even though the research team takes great care to protect it. The research team has strict requirements to notify you if any of your information is lost or misused.

Do I have to participate?

No, your participation in the study is completely voluntary. You currently have a Housing Choice Voucher (also called Section 8). If you do not agree to be in the study, you will keep your voucher and all services normally offered as part of the Housing Choice Voucher program and continue with the routine annual recertification requirements. Your decision not to participate will not affect your current or future receipt of housing assistance or other benefits. However, if you choose not to participate in the study, you will not have a chance to receive the special mobility services offered as part of this study to help you move to a different neighborhood of your choice. You can refuse to answer any question or ask to stop being in the study at any time.

Can I stop being in the study after I join?

Yes, you can choose to stop being in the study at any time. To do so, contact the research team, as listed below. If you choose to stop being in the study, you will still keep your Housing Choice Voucher (if eligible) and you will not lose any current or future [PHA] benefits or standard services that you are entitled to. However, if you were selected to receive the comprehensive mobility-related services when you enrolled in the study, you will no longer be able to get any of those services after you withdraw. The research team will still use the information that was collected about you while you were in the study. The research team will not continue to collect information about you and your family after you tell the study team that you want to stop being in the study. You may contact the Community Choice Demonstration Helpdesk at 1-888-239-5156 (a toll-free number) to withdraw from the study.

How will my information be protected?

We want to assure you that all your responses and personal information that you provide will be kept private to the full extent provided by law. This research is conducted under the authority of the Secretary of the U.S. Department of Housing and Urban Development (HUD) to undertake programs of research, studies, testing, and demonstration related to the mission and programs of HUD (12 USC 1701z-1 et seq.). The research team will never use your name or other personally identifiable information (PII) that could identify you in reports about the research. Your personally identifiable information will be removed from your responses before they are combined with responses from over 16,000 other participants.

All information will be analyzed and reported for groups of individuals. There will be no way to link your responses back to you in reports. The research team has been trained in protecting private information. The team uses safety procedures like secure computers and data storage systems to help protect data from being seen by anyone other than the researchers. The research team may need to report information about you to the appropriate authorities if it learns that you or someone else may be at risk of harm.

[PHA] will have access to some of your study data, such as the mobility services you received as part of this study. [PHA] will not have access to other data (including non-housing-related administrative data, follow-up surveys or interviews, and college or school records) collected by the research team. The [PHA] not be able to use any of the study data to determine your eligibility for the Housing Choice Voucher program or any other assistance it may offer.

The research team will maintain the privacy of the information you provide from the start of the study until the end of their contract with HUD. At that time, all data, including your personal

information, will be provided to HUD. Your data and personal information will be kept private by HUD to the full extent provided by law. The information requested under this collection is protected and held private in accordance with 5 U.S.C. 552a (Privacy Act of 1974) and OMB Circular No. A-130. Please remember, HUD will use this information only for research purposes. HUD will not use these data to determine your eligibility for any current or future housing assistance or receipt of other benefits.

Will my information be used in the future? Can it be used for additional studies?

To fully understand how the program helped you and the other members of your household long-term, HUD may wish to continue learning from this study for up to 30 years. We understand that sounds like a very long time, but research from an earlier HUD study has shown the benefits of moving to a different neighborhood for families and especially their children as they grow into adults. HUD and the research team want to be able to continue that research with this new study.

The information you will provide for this study is important for research on how to help families with housing. HUD will make this data available to other people to maximize the benefits of this research. HUD will make two versions of the data available. Neither version of the data will include any identifying information about you. Only HUD-approved researchers will be able to use the first version of the data. HUD will require anyone who they provide access to these data to commit to protecting the data, and to presenting results in summary form only. The other version of the data will be available to the public. There will be no restrictions on who can use the public version of the data. Because there are no limits on who could use the public data, HUD will take additional steps to make sure your identity is protected. They will do this by including more summarized information. For example, rather than showing that a study participant is 30 years old it would show that the study participant is between 25 and 35 years old.

Who can I call with questions?

If you have any questions about this study, you may contact the research team:

- The Abt Associates Project Manager, at 301-347-5673, or by email at Laura.Paulen@abtassoc.com.
- The study contact for HUD at 202-402-5705 or by email at Marina.L.Myhre@hud.gov.

If you have any questions about your rights as a participant in the study, you may contact:

- Abt Associates Institutional Review Board Administrator at 877-520-6835, or by email at IRB@abtassoc.com.

Statement

I have read this document, or had the document read to me. I had my questions answered. I agree to be part of the study. I agree that my participation is voluntary and that I can refuse to answer any question or stop being in the study at any time. I agree all information about me will be kept private unless doing so would put me or someone else in danger. I consent to the data collection as described above, for as long as the study is ongoing. I agree that a copy of this consent form will be given to me to keep for my records.

Yes, I agree to be part of the CCD study.

No, I do not agree to be part of the CCD study.

Print Name: _____

Signature: _____ Date: _____

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 15 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 and expiration date for this collection are OMB #: 2528-0337, Exp: 06/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Anna P. Guido at Anna.P.Guido@hud.gov or call at 202-402-5535.



HEAD OF HOUSEHOLD WAITLIST FAMILIES CONSENT FORM

Evaluation of the community choice demonstration

If you would like translated consent materials, or to complete the survey in a language other than English, please let the staff person you are talking to know. Please let them know if you need information to be presented in an accessible format, for example, Braille, audio, large type, or sign language interpreters. The staff person will do their best to provide a reasonable accommodation (a change or adjustment) so that you can participate.

You and the other people living in your household are invited to take part in an important study called the Community Choice Demonstration (CCD). The study is sponsored by the U.S. Department of Housing and Urban Development (HUD).

- This form asks you to provide consent to participate in the Community Choice Demonstration study. The purpose of this study is to help HUD understand how well different types of services help families move to different neighborhoods of their choice. Your participation in this study may help other families in the future.
- Your participation in the study is completely voluntary.
- In order to participate in the study, you need to allow the study to collect information about at least one of your children.
- If you agree to be in the study, you will be asked some questions about your children's current school experiences and health. You will also be asked to fill out a survey that will ask about your housing situation, your thoughts on moving, your education and employment status, and your health. Responding to the questions and the survey will take about 45 minutes.
- If you agree to participate, you will be randomly assigned to one of two groups. Randomly assigned means that you have an equal chance of getting into either group, like a coin flip. The first group will be offered the usual services from the [Public Housing Agency Name (PHA)] without any additional services. The second group will be offered additional services that will assist them in searching for and moving to housing in specific areas.
- You may be asked to participate in future surveys or interviews for up to 15 years. Your participation in those future study activities is voluntary.
- Researchers approved by HUD may be provided with data about you and your children from other agencies for up to 30 years as described more under the "What does it mean to be in the CCD study?" and "Will my information be used in the future? Can it be used for additional studies?" sections below. Your information will be kept private to the full extent provided by law and will be protected as described in the section "How will my information be protected?"

The [PHA] is operating the CCD program, with support provided by [LOCAL PROVIDER PARTNER(S)]. HUD contracted with Abt Associates and their research team to conduct the study. The research team includes Abt Associates, the Urban Institute, MEF Associates, Social Policy Research Associates, Sage Computing, a team of consultants, and other researchers that may be added in the future.

What is the CCD study?

The CCD study will allow us to learn how to help households find housing that can help children succeed in life. Some households will receive a special set of services to help them move to a new neighborhood of their choice. The CCD study will measure whether children in households that move to these new neighborhoods do better in school and earn more money later in life. The study will also measure how well these services help adults in the households.

Over 16,000 families from the participating public housing agencies will be invited to participate in this study. Families in the study will be put into one of two groups, at random:

- The “**Standard Services Group**”: this group will get a Housing Choice Voucher and all the existing services that [PHA] normally provides to families with a Housing Choice Voucher.
- The “**CCD Comprehensive Mobility Related Services Group**”: this group will get a Housing Choice Voucher and ongoing guidance from a staff member who will help them get ready to search for housing, connect them with landlords in specific areas, and provide funds to help pay for some housing search and certain leasing expenses, such as rental application fees, holding fees, and security deposits. Some services, such as guidance from a staff member on how to overcome obstacles to renting a new unit, will be offered to all families in this group. Other services, such as assistance paying a security deposit or an application fee, will be available only to help families move to specific areas. These are the neighborhoods that past research has suggested are particularly beneficial to children.

Your household will have the same chance of being offered the comprehensive services as all the other households that agree to be in the study. Families will be put into groups randomly by a computer process that is like pulling names from a hat. Group assignment is not based on anything you tell us about you or your household. You cannot choose which group you will be in.

Who can be in the CCD study?

You and the members of your household can be in the CCD study if:

- Your household is on the [PHA] Housing Choice Voucher Program Waitlist and is under consideration to receive a voucher from [PHA]
- Your household currently includes at least one child 17 years of age or younger.
- You agree to be in the study.
- You agree to allow at least one child 17 years of age or younger to be in the study.

The rest of this form explains what it means to be in the study. This form also describes the type of information that the research team will collect. We hope you will agree to participate.

What does it mean to be in the CCD study?

If you choose to join the CCD study, the research team will collect information about you and other members in your household in up to three ways. We will collect this information from all individuals no matter which group you are in.

- 4) **Current Information Collection:** We will collect information from you at enrollment (a baseline survey that will take up to 45 minutes). Baseline survey questions will include questions about your current housing status, thoughts about searching for housing, health and well-being, information about your children, and demographic information. We will ask you for your date of birth and your social security number or alien registration number, which will be used to gather your data from other state and federal agencies. We will also collect information about you from [PHA] records.
- 5) **Other Surveys and Interviews:** We might contact you in the future to collect additional information, which may be done either by the study team or other HUD-approved researchers. The long-term outcomes, especially for children, are important to HUD and the research team, so you may be contacted during the next fifteen years to complete one or more surveys. The follow-up surveys or interviews may ask about topics such as experiences with the program, searching for housing, education, work status, living situation, your and your children's health, and your children's schooling. Your children may also be asked to participate in future information collection efforts including interviews. We will also use your SSN to locate you through credit bureau data and other directories for follow up surveys and interviews over the life of the study. These follow-up surveys and interviews will also be voluntary. You do not have to participate.
- 6) **Longer-Term Information Collection:** Because we are interested in long-term outcomes, especially for children, part of the research includes getting information about you and your household members from federal agencies, state departments of labor, local school districts, child welfare agencies, and credit bureaus. Getting these types of data about you and your household from other agencies means we can learn about long-term outcomes without asking you to do a lot of surveys over the follow-up period. The information will be combined with the information you provide today and any future surveys to help HUD understand how families that enrolled in the CCD study are doing. This will help the research team learn how different kinds of housing and services helps families. This information will only be used for research. HUD will never use these data to determine your ability to participate in different programs.

Here are some examples of the types of information the research team may collect about you and your children for up to 30 years:

- Information from PHA records such as your address, your voucher issuance and expiration dates, characteristics of your rental unit, and your household's total income, assets, and rent;
- How much money you earned, maintained by federal agencies or your state's department of labor;

- Your financial well-being from databases maintained by credit bureaus (the study's collection of this information will have no effect on your credit score);
- Your children's school records from kindergarten through high school, including information about how they scored on achievement tests, their school absences, if they repeated a grade, if they had any disciplinary actions, how they are doing in school, and as they age out of high school, data from other educational agencies about whether they enrolled in college, and whether they graduated from college;
- Information from other educational agencies about whether you enrolled in college, and whether you graduated from college;
- Receipt of disability benefits;
- Health records, including Medicare or Medicaid;
- Information from federal government agencies, on employment, individual and household earnings, family composition, education, residency, neighborhood quality, and information found in tax returns; and
- Participation in Temporary Assistance for Needy Families (TANF) or Supplemental Nutrition Assistance Program (SNAP).

You can stop being in the CCD study at any time. If you wish to stop being in the CCD study at any time, please see "Can I stop being in the study after I join?" section on page 5.

What are the benefits of being in the study?

You are currently on the Housing Choice Voucher Program Waitlist at [PHA] Participating in the study may shorten your wait before you receive a Housing Choice Voucher. You may be selected at random to receive a special housing choice voucher and services to help you search for housing, explore new neighborhoods, and receive some financial help to cover some leasing expenses to help you move to a new neighborhood of your choice. If you do join the study, you are helping the research team and HUD learn about ways to help households move to specific neighborhoods and whether moving to these neighborhoods improves the lives of families with children.

What are the risks of being in the study?

There are very few risks involved. You may be uncomfortable with some of the questions asked at enrollment or in interviews or surveys. You can refuse to answer any question at any time. There is a small risk that your information could be lost or misused, even though the research team takes great care to protect it. The research team has strict requirements to notify you if any of your information is lost or misused.

Do I have to participate?

No, your participation is completely voluntary. If you do not agree to be in the study, you will not lose any assistance you may be receiving now or in the future based on your choice to not participate in this study. However, if you choose not to participate in the study, you will remain on the waiting list to receive a housing choice voucher until a voucher becomes available. You

will also not have a chance to receive the special mobility services offered as part of this study to help you move to a different neighborhood of your choice. You can refuse to answer any question or ask to stop being in the study at any time. Your responses will not affect your current or future receipt of housing assistance or other benefits.

Can I stop being in the study after I join?

Yes, you can choose to stop being in the study at any time. To do so, contact the research team, as listed below. If you choose to stop being in the study, you will still keep your Housing Choice Voucher (as long as you remain eligible). However, if you were selected to receive the comprehensive mobility-related services when you enrolled in the study, you will no longer be able to get any of those services after you withdraw. The research team will still use the information that was collected about you while you were in the study. The research team will not continue to collect information about you and your family after you tell the study team that you want to stop being in the study. You may contact the Community Choice Demonstration Helpdesk at 1-888-239-5156 (a toll-free number) to withdraw from the study.

How will my information be protected?

We want to assure you that all your responses and personal information that you provide will be kept private to the full extent provided by law. This research is conducted under the authority of the Secretary of the U.S. Department of Housing and Urban Development (HUD) to undertake programs of research, studies, testing, and demonstration related to the mission and programs of HUD (12 USC 1701z-1 et seq.). The research team will never use your name or other personally identifiable information (PII) that could identify you in reports about the research. Your personally identifiable information will be removed from your responses before they are combined with responses from over 16,000 other participants.

All information will be analyzed and reported for groups of individuals. There will be no way to link your responses back to you in reports. The research team has been trained in protecting private information. The team uses safety procedures like secure computers and data storage systems to help protect data from being seen by anyone other than the researchers. The research team may need to report information about you to the appropriate authorities if it learns that you or someone else may be at risk of harm.

[PHA] will have access to some of your study data, such as the mobility services you received as part of this study. [PHA] will not have access to other data (including non-housing-related administrative data, follow-up surveys or interviews, and college or school records) collected by the research team. The [PHA] will not be able to use any of the study data to determine your eligibility for the Housing Choice Voucher program or any other assistance it may offer.

The research team will maintain the privacy of the information you provide from the start of the study until the end of their contract with HUD. At that time, all data, including your personal information, will be provided to HUD. Your data and personal information will be kept private by HUD to the full extent provided by law. The information requested under this collection is protected and held private in accordance with 5 U.S.C. 552a (Privacy Act of 1974) and OMB Circular No. A-130. Please remember, HUD will use this information only for research purposes. HUD will not use these data to determine your eligibility for any current or future housing assistance or receipt of other benefits.

Will my information be used in the future? Can it be used for additional studies?

To fully understand how the program helped you and the other members of your household long-term, HUD may wish to continue learning from this study for up to 30 years. We understand that sounds like a very long time, but research from an earlier HUD study has shown the benefits of moving to a different neighborhood for families and especially their children as they grow into adults. HUD and the research team want to be able to continue that research with this new study.

The information you will provide for this study is important for research on how to help families with housing. HUD will make this data available to other people to maximize the benefits of this research. HUD will make two versions of the data available. Neither version of the data will include any identifying information about you. Only HUD-approved researchers will be able to use the first version of the data. HUD will require anyone who they provide access to these data to commit to protecting the data, and to presenting results in summary form only. The other version of the data will be available to the public. There will be no restrictions on who can use the public version of the data. Because there are no limits on who could use the public data, HUD will take additional steps to make sure your identity is protected. They will do this by including more summarized information. For example, rather than showing that a study participant is 30 years old it would show that the study participant is between 25 and 35 years old.

Who can I call with questions?

If you have any questions about this study, you may contact the research team:

- The Abt Associates Project Manager, at 301-347-5673, or by email at Laura.Paulen@abtassoc.com.
- The study contact for HUD at 202-402-5705 or by email at Marina.L.Myhre@hud.gov.

If you have any questions about your rights as a participant in the study, you may contact:

- Abt Associates Institutional Review Board Administrator at 877-520-6835, or by email at IRB@abtassoc.com.

Statement

I have read this document, or had the document read to me. I had my questions answered. I agree to be part of the study. I agree that my participation is voluntary and that I can refuse to answer any question or stop being in the study at any time. I agree all information about me will be kept private unless doing so would put me or someone else in danger. I consent to the data collection as described above, for as long as the study is ongoing. I agree that a copy of this consent form will be given to me to keep for my records.

- _____ Yes, I agree to be part of the CCD study.
- _____ No, I do not agree to be part of the CCD study.

Print Name: _____

signature: _____ Date: _____

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 15 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 and expiration date for this collection are OMB #: 2528-0337, Exp: 06/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Anna P. Guido at Anna.P.Guido@hud.gov or call at 202-402-5535.



OTHER ADULT HOUSEHOLD MEMBER INFORMED CONSENT

Evaluation of the community choice demonstration

If you would like translated consent materials, or to complete the survey in a language other than English, please let the staff person you are talking to know. Please let them know if you need information to be presented in an accessible format, for example, Braille, audio, large type, or sign language interpreters. The staff person will do their best to provide a reasonable accommodation (a change or adjustment) so that you can participate.

The head of your household agreed to take part in an important study called the Community Choice Demonstration (CCD). The study is sponsored by the U.S. Department of Housing and Urban Development (HUD).

- This form asks you to provide consent to participate in the Community Choice Demonstration study. The purpose of this study is to help HUD understand how well different types of services help families move to different neighborhoods of their choice. Your participation in this study may help other families in the future.
- Your participation in the study is completely voluntary.
- In order to participate in the study, you need to allow the study to collect information about you. The study will use your social security number to collect this information. The study will get your social security number from PHA records.
- You may be asked to participate in future surveys or interviews for up to 15 years. Your participation in those future study activities is voluntary.
- Researchers approved by HUD may be provided with data from other agencies for up to 30 years as described more under “What does it mean to be in the CCD study?” and “Will my information be used in the future? Can it be used for additional studies?” sections below.
- Your information will be kept private to the full extent provided by law and will be protected as described in the section “How will my information be protected?”

You and the other members of your household are also invited to take part in this study. The [PHA] is operating the CCD program, with support provided by [LOCAL PROVIDER PARTNERS]. HUD contracted with Abt Associates and their research team to conduct the study. The research team includes Abt Associates, the Urban Institute, MEF Associates, Social Policy Research Associates, Sage Computing, a team of consultants, and other researchers that may be added in the future.

What is the CCD study?

The CCD study will allow us to learn how to help households find housing that can help children succeed in life. Some households will receive a special set of services to help them move to a

new neighborhood of their choice. The CCD study will measure whether children in households that move to these new neighborhoods do better in school and earn more money later in life. The study will also measure how well these services help adults in the households.

Over 16,000 families from the participating public housing agencies will be invited to participate in this study. Families in the study will be put into one of two groups, at random:

- The “**Standard Services Group**”: this group will get a Housing Choice Voucher and all the existing services that [PHA] normally provides to families with a Housing Choice Voucher.
- The “**CCD Comprehensive Mobility Related Services Group**”: this group will get a Housing Choice Voucher and ongoing guidance from a staff member who will help them get ready to search for housing, connect them with landlords in specific areas, and provide funds to help pay for some housing search and certain leasing expenses, such as rental application fees, holding fees, and security deposits. Some services, such as guidance from a staff member on how to overcome obstacles to renting a new unit, will be offered to all families in this group. Other services, such as assistance paying a security deposit or an application fee, will be available only to help families move to specific areas. These are the neighborhoods that past research has suggested are particularly beneficial to children.

Your household will have the same chance of being offered the comprehensive services as all the other households that agree to be in the study. Families will be put into groups randomly by a computer process that is like pulling names from a hat. Group assignment is not based on anything you tell us about you or your household. You cannot choose which group you will be in.

Who can be in the CCD study?

The head of your household was found to be eligible to participate in the study. Since they agreed to take part in the study, you and the members of your household are also eligible to participate.

The rest of this form explains what it means to be in the study. This form also describes the type of information that the research team will collect. We hope you will agree to participate.

What does it mean to be in the CCD study?

If you choose to join the CCD study, the research team will collect information about you and other members in your household in up to three ways. We will collect this information from all individuals no matter which group your household is placed in.

- 7) **Current Information Collection:** We will collect information about you at enrollment from the head of your household. This includes information about your employment, your age, and your email and cell phone contact information. We will also collect information about you from [PHA] records. We will use your social security number to gather your data from other state and federal agencies.
- 8) **Other Surveys and Interviews:** We might contact you in the future to collect additional information, which may be done either by the study team or other HUD-approved researchers. The long-term outcomes, especially for children, are important to HUD and the research team, so you may be contacted during the next fifteen years to complete one

or more surveys. The follow-up surveys or interviews may ask about topics such as experiences with the program, searching for housing, education, work status, living situation, your and your children's health, and your children's schooling. Your children may also be asked to participate in future information collection efforts including interviews. We will use your SSN to locate you through credit bureau data and other directories for follow up surveys and interviews over the life of the study. These follow-up surveys or interviews will also be voluntary. You do not have to participate.

- 9) **Longer-Term Information Collection:** Because we are interested in long-term outcomes, especially for children, part of the research includes getting information about you and other members of your household members from federal agencies, state departments of labor, local school districts, child welfare agencies, and credit bureaus. Getting these types of data about you from other agencies means we can learn about some of the long-term outcomes of interest without asking you to do too many surveys. The information will be combined with the information you provide today and any future surveys to help HUD understand how families that enrolled in the CCD Study are doing. This will help the research team learn how different kinds of housing and services helps families. This information will only be used for research. HUD will never use these data to determine your ability to participate in different programs.

Here are some examples of the types of information the research team may collect about you for up to 30 years:

- Information from PHA records such as your address, your voucher issuance and expiration dates, characteristics of your rental unit, and your household's total income, assets, and rent;
- How much money you earned maintained by federal agencies or your state's department of labor;
- Your financial well-being from databases maintained by credit bureaus (the study's collection of this information will have no effect on your credit score);
- Your children's school records from kindergarten through high school, including information about how they scored on achievement tests, their school absences, if they repeated a grade, if they had any disciplinary actions, how they are doing in school, and as they age out of high school, data from other educational agencies about whether they enrolled in college, and whether they graduated from college;
- Information from other educational agencies about whether you enrolled in college, and whether you graduated from college;
- Receipt of disability benefits;
- Health records, including Medicare or Medicaid;
- Information from federal government agencies, including employment, individual and household earnings, family composition, education, residency, neighborhood quality, and information found in tax returns; and

- Participation in Temporary Assistance for Needy Families (TANF) or Supplemental Nutrition Assistance Program (SNAP) programs.

You can stop being in the CCD study at any time. If you wish to stop being in the CCD study at any time, please see “Can I stop being in the study after I join?” section on page 5.

What are the benefits of being in the study?

Your household may be randomly chosen to be offered special help in searching for housing and exploring new neighborhoods and financial help to cover some leasing expenses. If you do join the study, you are helping the research team and HUD learn about ways to help households move to specific neighborhoods and whether moving to these neighborhoods improves the lives of families with children.

What are the risks of being in the study?

There are very few risks involved. You may be uncomfortable with the questions asked in future interviews or surveys. You can refuse to answer any question. There is a small risk that your information could be lost or misused, even though the research team takes great care to protect it. The research team has strict requirements to notify you if any of your information is lost or misused.

Do I have to participate?

No, your participation in the study is completely voluntary. Neither you nor your household will lose any assistance you may be receiving now or in the future based on your choice to not participate in this study.

Can I stop being in the study after I join?

Yes, you can choose to stop being in the study at any time. To do so, contact the research team, as listed below. If you choose to stop being in the study, your family will still keep its Housing Choice Voucher (if eligible) and neither you nor your family will lose any current or future [PHA] benefits or standard services that you are entitled to. The research team will still use the information that was collected about you while you were in the study. The research team will not continue to collect information about you after you tell the study team that you want to stop being in the study. You may contact the Community Choice Demonstration Helpdesk at 1-888-239-5156 (a toll-free number) to withdraw from the study.

How will my information be protected?

We want to assure you that all your responses and personal information that you provide will be kept private to the full extent provided by law. This research is conducted under the authority of the Secretary of the U.S. Department of Housing and Urban Development (HUD) to undertake programs of research, studies, testing, and demonstration related to the mission and programs of HUD (12 USC 1701z-1 et seq.). The research team will never use your name or other personally identifiable information (PII) that could identify you in reports about the research. Your personally identifiable information will be removed from your responses before they are combined with responses from over 16,000 other participants.

All information will be analyzed and reported for groups of individuals. There will be no way to link your responses back to you in reports. The research team has been trained in protecting

private information. The team uses safety procedures like secure computers and data storage systems to help protect data from being seen by anyone other than the researchers. The research team may need to report information about you to the appropriate authorities if it learns that you or someone else may be at risk of harm.

[PHA] will have access to some of your study data, such as the mobility services you received as part of this study. [PHA] will not have access to other data (including non-housing-related administrative data, follow-up surveys or interviews, and college or school records) collected by the research team. The [PHA] will not be able to use any of the study data to determine your or your family's eligibility for the Housing Choice Voucher program or any other assistance it may offer.

The research team will maintain the privacy of the information you provide from the start of the study until the end of their contract with HUD. At that time, all data, including your personal information, will be provided to HUD. Your data and personal information will be kept private by HUD to the full extent provided by law. The information requested under this collection is protected and held private in accordance with 5 U.S.C. 552a (Privacy Act of 1974) and OMB Circular No. A-130. Please remember, HUD will use this information only for research purposes. HUD will not use these data to determine your eligibility for any current or future housing assistance or receipt of other benefits.

Will my information be used in the future? Can it be used for additional studies?

To fully understand how the program helped you and the other members of your household long-term, HUD may wish to continue learning from this study for up to 30 years. We understand that sounds like a very long time, but research from an earlier HUD study has shown the benefits of moving to a different neighborhood for families and especially their children as they grow into adults. HUD and the research team want to be able to continue that research with this new study.

The information you will provide for this study is important for research on how to help families with housing. HUD will make this data available to other people to maximize the benefits of this research. HUD will make two versions of the data available. Neither version of the data will include any identifying information about you. Only HUD-approved researchers will be able to use the first version of the data. HUD will require anyone who they provide access to these data, to commit to protecting the data, and to presenting results in summary form only. The other version of the data will be available to the public. There will be no restrictions on who can use the public version of the data. Because there are no limits on who could use the public data, HUD will take additional steps to make sure your identity is protected. They will do this by including more summarized information. For example, rather than showing that a study participant is 30 years old it would show that the study participant is between 25 and 35 years old.

Who can I call with questions?

If you have any questions about this study or about your rights as a participant in the study, you may contact the research team:

- The Abt Associates Project Manager, at 301-347-5673, or by email at [Laura Paulen
@abtassoc.com](mailto:Laura_Paulen@abtassoc.com).

- The study contact for HUD at 202-402-5705 or by email at Marina.L.Myhre@hud.gov.

If you have any questions about your rights as a participant in the study, you may contact:

- Abt Associates Institutional Review Board Administrator at 877-520-6835, or by email at IRB@abtassoc.com.

Statement

I have read this document, or had the document read to me. I had my questions answered. I agree to be part of the study. I agree that my participation is voluntary and that I can refuse to answer any question or stop being in the study at any time. I agree all information about me will be kept private unless doing so would put me or someone else in danger. I consent to the data collection as described above, for as long as the study is ongoing. I agree that a copy of this consent form will be given to me to keep for my records.

- Yes, I agree to be part of the CCD study.
- No, I do not agree to be part of the CCD study.

Print Name: _____

signature: _____ Date: _____

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 15 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 and expiration date for this collection are OMB #: 2528-0337, Exp: 06/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Anna P. Guido at Anna.P.Guido@hud.gov or call at 202-402-5535.



PARENT/GUARDIAN PERMISSION FORM

Evaluation of the community choice demonstration

If you would like translated consent materials, or to complete the survey in a language other than English, please let the staff person you are talking to know. Please let them know if you need information to be presented in an accessible format, for example, Braille, audio, large type, or sign language interpreters. The staff person will do their best to provide a reasonable accommodation (a change or adjustment) so that you can participate.

Thank you for agreeing to participate in the [Community Choice Demonstration (CCD)], sponsored by the U.S. Department of Housing and Urban Development (HUD). The [PHA] is operating the CCD program, with support provided by [LOCAL PROVIDER PARTNER(S)] HUD contracted with Abt Associates and their research team to conduct the study. The research team includes Abt Associates, the Urban Institute, MEF Associates, Social Policy Research Associates, Sage Computing, a team of consultants, and other researchers that may be added in the future.

- The purpose of this study is to help HUD understand how well different types of services help families move to different neighborhoods of their choice.
- The research team is interested in the experiences of children in households who move to new neighborhoods and receive special CCD services compared to children in households who do not move to new neighborhoods and receive special CCD services.
- This form asks your permission to allow the research team and other researchers approved by HUD to collect information about your children aged 17 and under, as described more in “Housing agency information”, “Other surveys and interviews”, and “Longer-term information collection below”. Collecting information about your children may help children in other families in the future.
- This form explains the risks and benefits of participation for your children, and how the research team will protect your children’s information.
- The form also provides guidance on how to provide your permission for each of your children to participate.

The consent form you signed at the time of enrollment explained that the research team is looking to see if the children in households who move to new areas and receive the special CCD services do better in school, earn more money later in life, enroll in college, get a college degree, and report better health and well-being than other children their age who did not move to new areas or receive the special services. To help answer these questions, we are asking your permission to collect information about your children. You already provided some information about your children when we enrolled you into the study. We would like your permission to collect three types of additional data about your children.

- 10) **Housing agency information:** The research team will collect information from the housing authority about your children, including name, date of birth and Social Security Number (SSN). This information will be used by the research team to keep in contact with your children for follow-up surveys or interviews and access administrative data described below.
- 11) **Other Surveys and Interviews:** We might contact you in the future to collect additional information, which may be done either by the study team or other HUD-approved researchers. The long-term outcomes, especially for children, are important to the HUD and the research team, so you may be contacted during the next fifteen years to complete one or more surveys. The follow-up surveys or interviews may ask about topics such as your children's health and schooling. Your children may also be asked to participate in future information collection efforts including interviews. These follow-up surveys or interviews will be voluntary. They do not have to participate.
- 12) **Longer-Term Information Collection:** Because we are interested in long-term outcomes, especially for children, part of the research includes getting information about your children from federal agencies, state departments of labor, local school districts, child welfare agencies, and credit bureaus. The information will be combined with the information you provide today and any future surveys to help HUD understand how families that participated in the CCD study are doing. This will help the research team learn how different kinds of housing and services help children. This information will only be used for research. HUD will never use these data to determine your ability to participate in different programs.

Here are some examples of the types of information the research team may collect about your children for up to 30 years:

- Records of how much money your children earned, maintained by federal agencies or your state's department of labor;
- Information about your child's financial well-being from databases maintained by credit bureaus (the study's collection of this information will have no effect on your child's credit score);
- Your children's school records from kindergarten through high school, including information about how they scored on achievement tests, their school absences, if they repeated a grade, any disciplinary actions, how they are doing in school, and as they age out of high school data from other educational agencies about whether they enrolled in college, and whether they graduated from college;
- Information about receipt disability benefits;
- Your children's health records, including Medicare or Medicaid;
- Your children's records from federal government agencies, including information on employment, individual and household earnings, family composition, education, residency, neighborhood quality, and information found in tax returns; and

- Your and your children's participation in Temporary Assistance for Needy Families (TANF) or Supplemental Nutrition Assistance Program (SNAP) programs.

Risks, benefits, withdrawal from the study, and protecting your children's information

For details of the study risks and benefits, and how to withdraw from the study, please refer to the “Agreement to Participate in the Community Choice Demonstration (CCD) Study-Head of Household Form.”

What are the benefits of being in the study?

There are no direct benefits to your children for being in the study. If you do join the study, you are helping the research team and HUD learn about ways to help households move to specific neighborhoods and whether moving to these neighborhoods improves the lives of families with children.

What are the risks of being in the study?

There is a small risk that your children's information could be lost or mishandled, even though we take great care to protect it. There is also a small risk that if your child participates in future follow-up surveys or interviews, your child may find some of the questions to be sensitive. It is okay for them to skip those questions.

How will my child's information be protected?

We want to assure you that all responses and personal information that you or your child provide will be kept private to the full extent provided by law. Please refer to the sections “*How will my information be protected?*” and “*Will my information be used in the future? Can it be used for additional studies?*” in the consent form that you signed for more information on how your data and your child's data will be protected.

Do all of my children have to participate?

No, you do not have grant permission for all of your children to participate in the study. You can choose to grant permission for as many of your children to participate as you'd like. However, as explained in the consent form that you signed, in order to be eligible for the study, you must have at least one child aged 17 or under living with you. In order to be part of the study, you must grant permission for at least one of the children in your household to be part of the study. You can choose to withdraw your permission for your child to participate at any point before their 18th birthday. Children can choose stop being part of the study themselves once they turn 18 by contacting the study team as listed below. If your child turns 18 and decides not to be in the study any longer, you and the other members of your household will still be part of the study. The research team will still use the information that was collected about your child while your child was in the study. The research team will not continue to collect information about your children after you—or your child—ask to stop being in the study. You may contact the Community Choice Demonstration Helpdesk at 1-888-239-5156 (a toll-free number) to withdraw from the study.

Who can I call with questions?

If you have any questions about this study or about your children's rights as a participant in the study, you may contact the research team:

- The Abt Associates Project Manager at 301-347-5673, or by email at Laura_Paulen@abtassoc.com.
- The study contact for HUD at 202-402-5705, or by email at Marina.L.Myhre@hud.gov.

If you have any questions about your rights as a participant in the study, you may contact:

- Abt Associates Institutional Review Board Administrator at 877-520-6835, or by email at IRB@abtassoc.com.

TURN TO SIGNATURE PAGE

Please click the appropriate box next to the name of each child in the household to indicate whether or not you give your permission for that child to participate.

YES means:

Yes, I agree to have my child participate in the CCD study data collection, to the matching of my child's information to the other data noted above, and to the disclosure of the student level education records (transitions from grade to grade, attendance, special education services, grades, disciplinary actions, and test scores) from any [LOCAL AREA] school until they graduate from high school or turn 18.

NO means:

No, I do not agree to have my child participate in the CCD study.

	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Child Name	Child Age	
	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Child Name	Child Age	
	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Child Name	Child Age	
	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Child Name	Child Age	

Once you are done indicating whether or not you give the research team permission to collect data on your children, please enter your name and date below.

Print Parent or Guardian Name

Parent or Guardian Name Signature

Date

Appendix 17: Mobility Services Tracking Tool

The Mobility Services Tracking Tool will be used by mobility services staff as a case management system. It will also collect important information about the services being provided that will inform the study.

Data fields to be collected on each head of household:

- Head of Household Name
- Head of Household Age
- Head of Household Initial Address
- Head of Household Current Address
- Number of Children
- Age of Children
- Gender of Children
- PHA Name
- Voucher size
- Estimated voucher issuance date
- Actual voucher issuance date
- Date of pre-move appointment
- (Data from pre-move appointment)
 - Barriers to housing search
 - Credit report
 - Previous rental history
 - Previous criminal history
 - Issue with a current property manager
 - Other [open data entry field]
 - Referrals provided
 - Housing search workshop
 - Renter's workshop
 - Banking and budgeting workshop
 - Credit coaching
 - Legal services
 - Other [open data entry field]
 - Initial neighborhoods of interest
 - [Open data entry fields]
 - Initial goal move date
 - Initial date estimated to begin receiving unit referrals

- Has driver's license [y/n]?
- Someone in household has driver's license [y/n]?
- Has access to car that runs [y/n]?
- Date of attendance at housing search workshop
- Date of attendance at renter's workshop
- Date of attendance at banking and budgeting workshop
- Followed up on credit coaching referral [y/n]?
- Followed up on legal services referral [y/n]?
- Followed up on other referrals [y/n]?
- (For each proactive pre-move check-in from the program or contact from the client)
 - Date of check-in
 - Check-in format
 - In-person
 - Phone
 - Text
 - Video call
 - Topic discussed
 - Barriers to Housing Search
 - Credit report
 - Previous rental history
 - Previous criminal history
 - Issue with a current property manager
 - Other [open data entry field]
 - Referrals provided
 - Housing search workshop
 - Renter's workshop
 - Banking and budgeting workshop
 - Credit coaching
 - Legal services
 - Other [open data entry field]
 - Opportunity neighborhoods
 - Neighborhoods of interest
 - Questions about neighborhood amenities and features
 - Questions about schools
 - Other [open data entry field]
 - Applications submitted

- Address
- Neighborhood
- Contract rent
- Payment standard
- Security deposit
- Property owner name
- Accepted or denied?
- Reason for denial
- Credit report
- Previous rental history
- Previous criminal history
- Other [open data entry field]
 - Family financial assistance [open data entry field]
 - Owner incentives [open data entry field]
 - HCV Issues
 - Recertifications
 - Inspections
 - Other [open data entry field]
 - Other topics [open data entry field]
- (For each unit referred to the client)
 - Address
 - Neighborhood
 - Bedroom size
 - Contract rent
 - Payment standard
 - Security deposit
 - Property owner name
 - Property owner previously rented to PHA
 - Property owner previously rented as part of mobility program
 - Date referral provided to client
- (For family financial assistance provided on behalf of the client)
 - Application fee
 - Amount
 - Paid date

- Paid to
 - Paid for address
 - Transportation stipends
 - Amount
 - Paid date
 - Bus or train
 - Security Deposit
 - Amount
 - Paid date
 - Paid to
 - Paid for address
 - Utility Arrears
 - Amount
 - Paid date
 - Paid to
 - Administrative or Processing Fees
 - Amount
 - Paid date
 - Paid to
 - Paid for address
 - Move-in Fees
 - Amount
 - Paid date
 - Paid to
 - Paid for address
 - Coach's Discretionary Fund
 - Amount
 - Paid date
 - Paid to
 - Purpose [open data entry field]
- (For owner incentives paid to a property owner associated with the client)
 - Holding Fee
 - Amount
 - Paid date
 - Paid to
 - Paid for address
 - Kept by owner due to family backing out [y/n]?

- Signing Bonus
 - Property owner name
 - Property owner address
 - TIN
 - Amount
 - Paid date
 - Paid to
 - Paid for address
- Damage Mitigation Fund
 - Property owner name
 - Property owner address
 - TIN
 - Amount
 - Paid date
 - Paid to
 - Paid for address
- (Unit Approval Process)
 - Date request for tenancy approval (RFTA) received
 - Property owner
 - Address
 - Contract rent
 - Bedroom size
 - Payment standard
 - Neighborhood
 - Date RFTA approved
 - Date inspection scheduled for
 - Date second inspection scheduled for
 - Unit pass/fail
 - Lease start date
 - Move-in date
 - Date welcome packet mailed
 - Scheduled date for initial post-move check-in with client
 - Scheduled date for initial post-move check-in with owner
- (For each proactive post-move check-in from the program or contact from the client)
 - Date of check-in

- Check-in format
 - In-person
 - Phone
 - Text
 - Video call
- Topics discussed
 - Accessing neighborhood features and amenities
 - School and/or daycare enrollment
 - Property owner interactions
 - Upkeep of the home
 - Utility transfers
 - Meeting neighbors
 - Transportation
 - Retention in neighborhood/opportunity area
 - Other topics [open data entry field]
- Referrals provided
 - Credit coaching
 - Legal services
 - HCV case manager
 - Second move services
 - Other [open data entry field]
- Scheduled date for follow-up check-in
- (For post-move one-month check-in with owner)
 - Date of check-in
 - Check-in format
 - In-person
 - Phone
 - Text
 - Video call
 - Topics discussed
 - HAP payments
 - Incentive payments
 - Client interactions
 - Upkeep of home
 - HCV questions
 - Other [open data entry field]
- Date moved to phase 3: family preparation
- Date moved to phase 4: searching and applications

- Date moved to phase 5: leasing-up
- Date moved to phase 6: post-move
- Date moved to phase 7: successful move
- Date moved to inactive client's caseload
- Date client requested to unenroll in study

Data fields to be collected on property owner recruitment and engagement

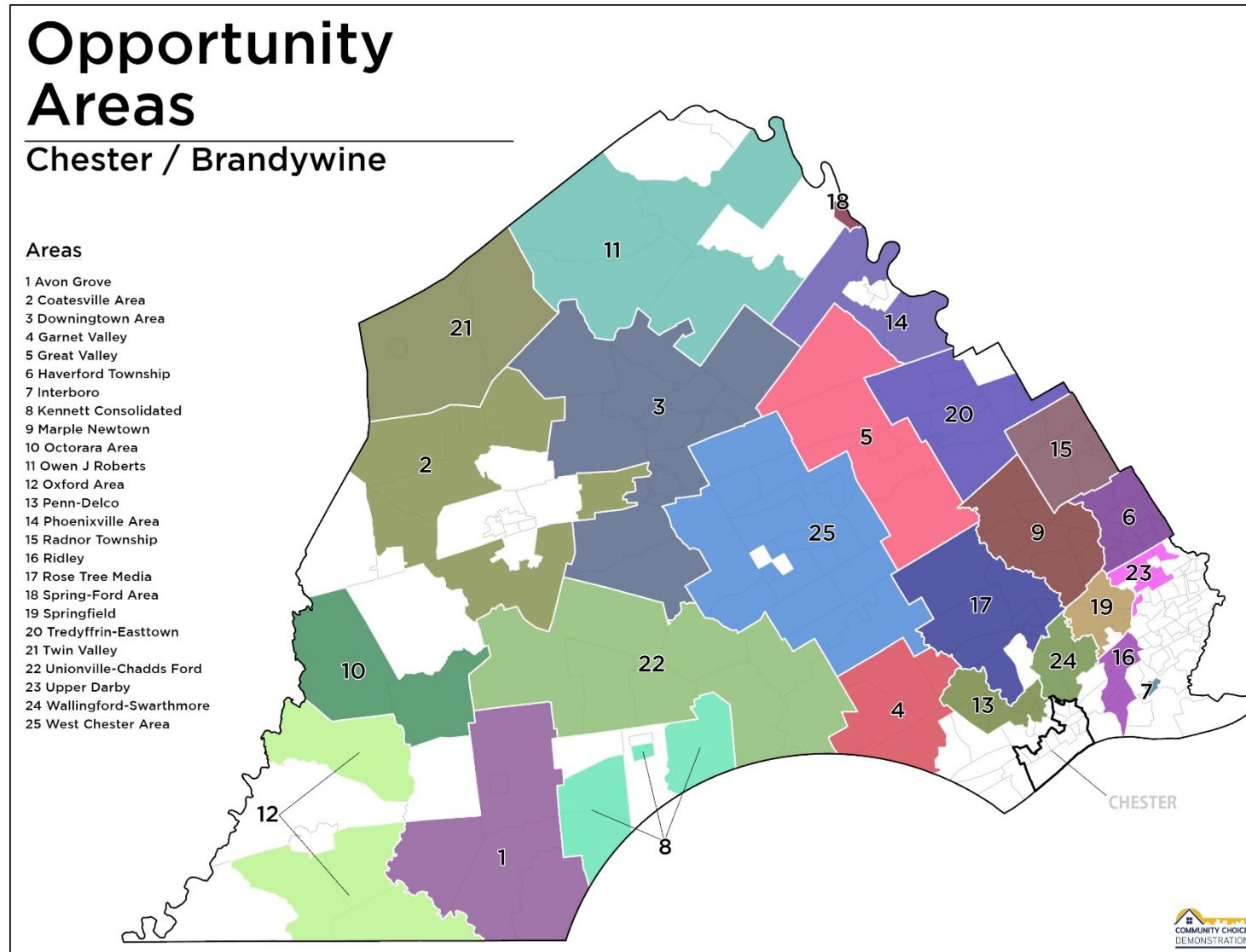
- Property Owner Events
 - Property owner advisory group meeting
 - Date of advisory group meeting
 - Time length of advisory group meeting
 - Time spent preparing for advisory group meeting
 - Property owner outreach event
 - Date of outreach event
 - Time length of outreach meeting
 - Time spent preparing for outreach event
- Property Owner Engagement
 - Number of property owners contacted, daily
 - Number of new units listed, daily
 - Time spent engaging with property owners
- For each unit listed by the program
 - Address
 - Neighborhood
 - Contract rent
 - Bedroom size
 - Payment standard
 - Security deposit
 - Property owner name
 - Property owner previously rented to PHA
 - Property owner previously rented as part of mobility program

Appendix 18: Opportunity Area Maps as of Pilot Launch

This appendix contains the following Opportunity Area Maps as of Pilot Launch:

- Chester/Brandywine
- Cuyahoga County
- Los Angeles:
 - Map Key
 - Los Angeles: Northwest/San Fernando Valley (Map 1 of 5)
 - Los Angeles: West/Los Angeles City (Map 2 of 5)
 - Los Angeles: Southeast (Map 3 of 5)
 - Los Angeles: East (Map 4 of 5)
 - Los Angeles: South (Map 5 of 5)
- Minneapolis
- Nashville MDHA
- New Orleans: Orleans Parish
- New York City
- Pittsburgh Metro
- Rochester

Chester/Brandywine



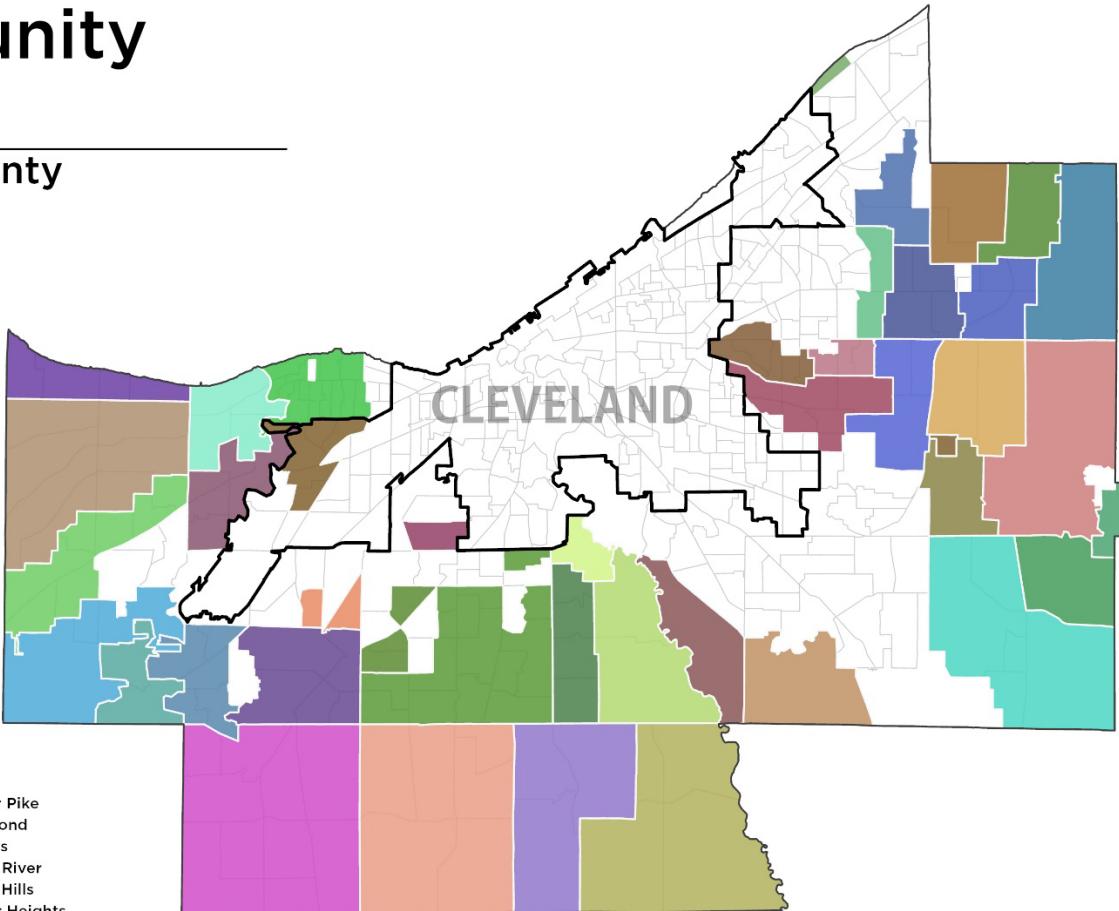
Cuyahoga County

Opportunity Areas

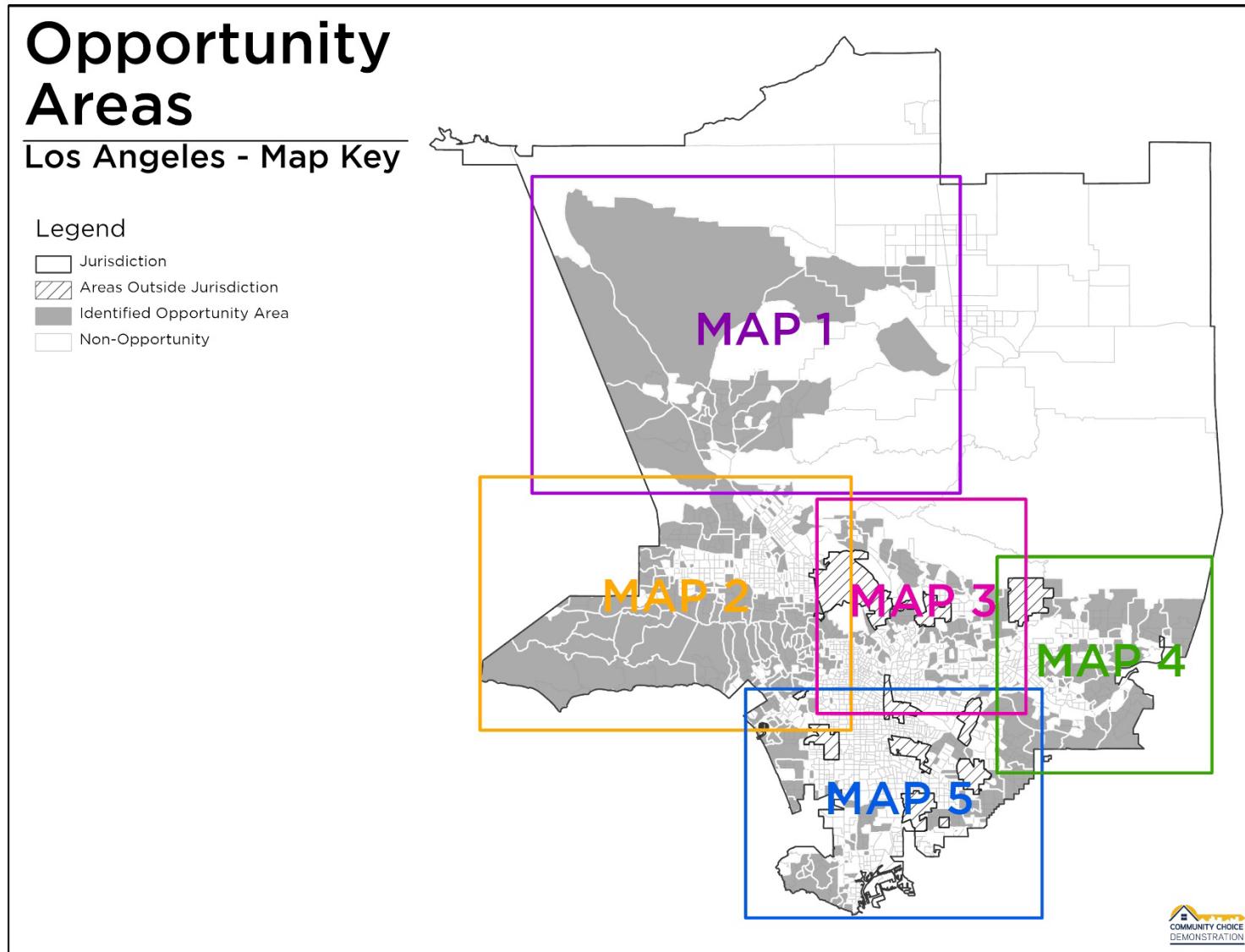
Cuyahoga County

Areas

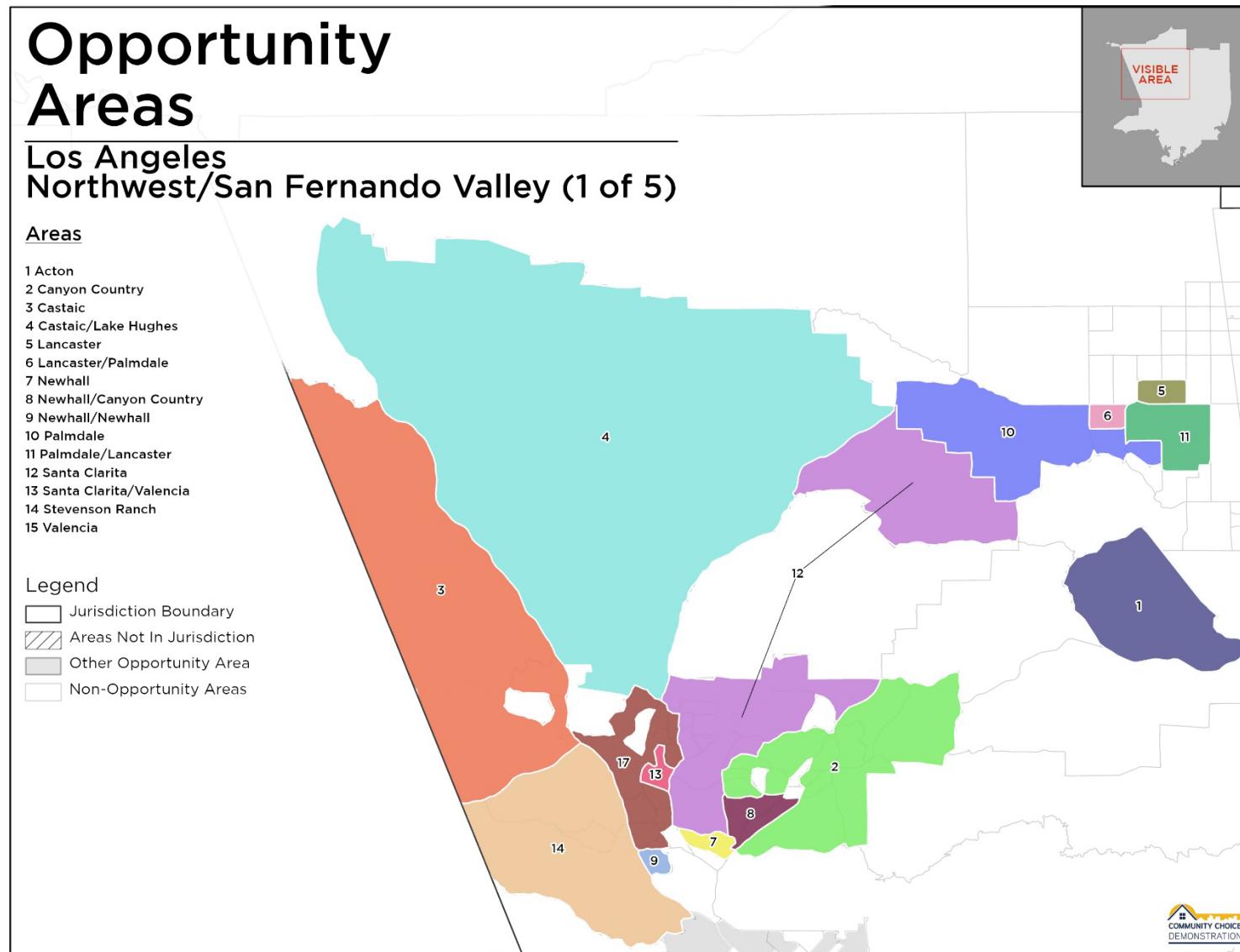
- 1 Bay Village
- 2 Beachwood
- 3 Bentleyville
- 4 Berea
- 5 Brecksville
- 6 Broadview Heights
- 7 Brook Park
- 8 Brooklyn
- 9 Brooklyn Heights
- 10 Chagrin Falls
- 11 Cleveland Heights
- 12 Euclid
- 13 Fairview Park
- 14 Gates Mills
- 15 Highland Heights
- 16 Independence
- 17 Woodmere
- 18 Lakewood
- 19 Lyndhurst
- 20 Mayfield
- 21 Mayfield Heights
- 22 Middleburg Heights
- 23 Moreland Hills
- 24 North Olmsted
- 25 North Royalton
- 26 Olmsted Falls
- 27 Olmsted Township
- 28 Orange
- 29 Parma
- 30 Parma Heights
- 31 Pepper Pike
- 32 Richmond Heights
- 33 Rocky River
- 34 Seven Hills
- 35 Shaker Heights
- 36 Solon
- 37 South Euclid
- 38 Strongsville
- 39 University Heights
- 40 Valley View
- 41 Walton Hills
- 42 Westlake



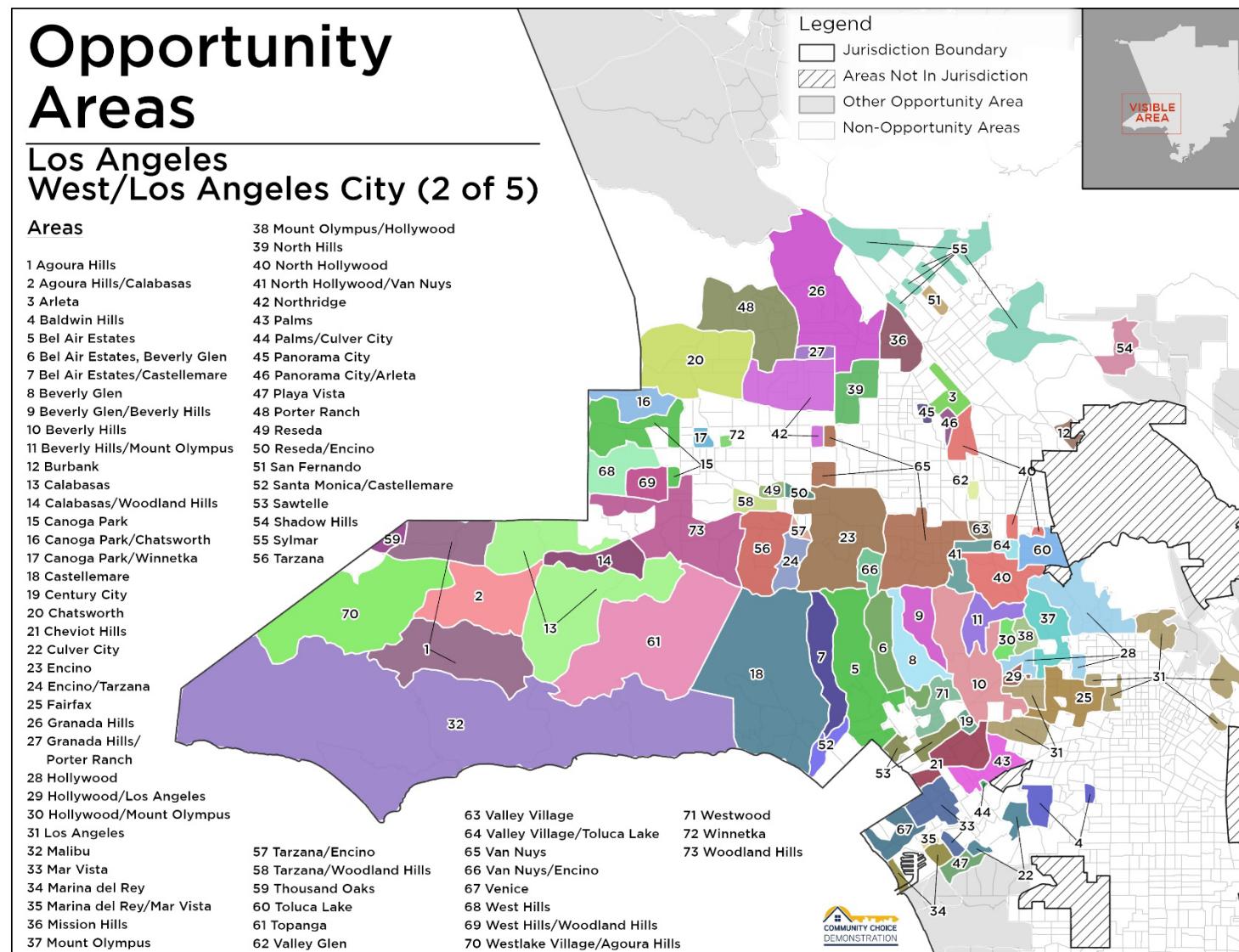
Los Angeles – Map Key



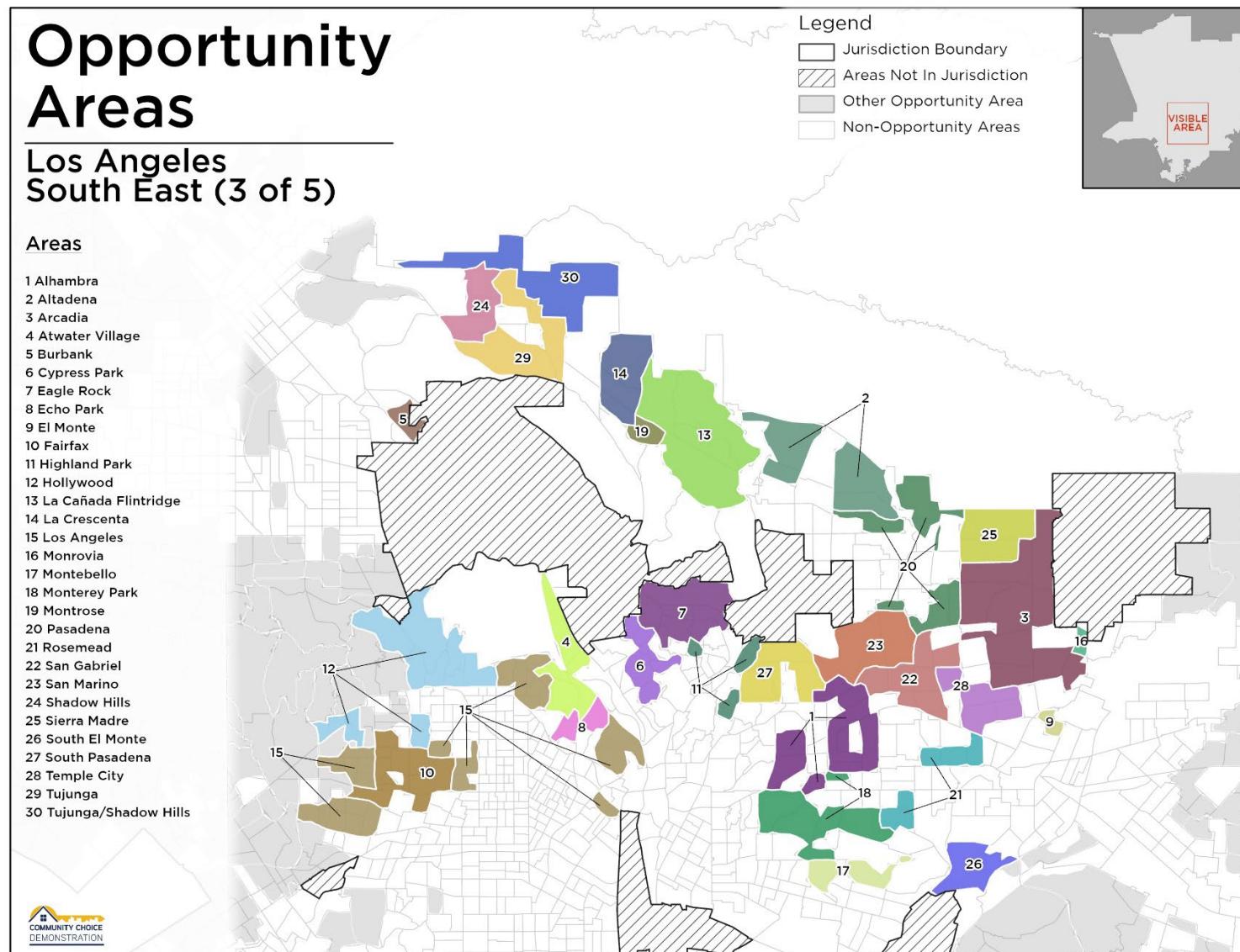
Los Angeles: Northwest/San Fernando Valley (Map 1 of 5)



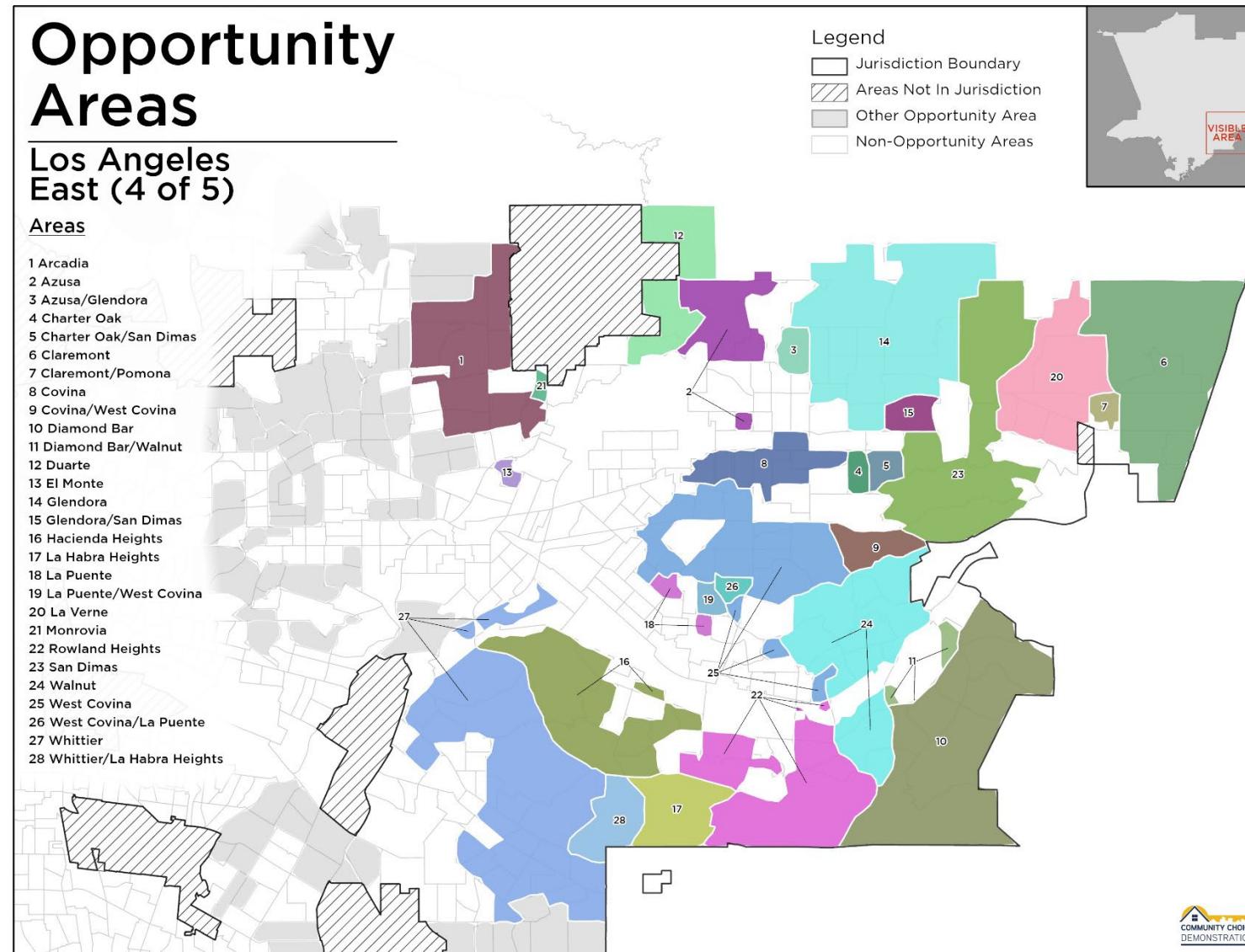
Los Angeles: West/Los Angeles City (Map 2 of 5)



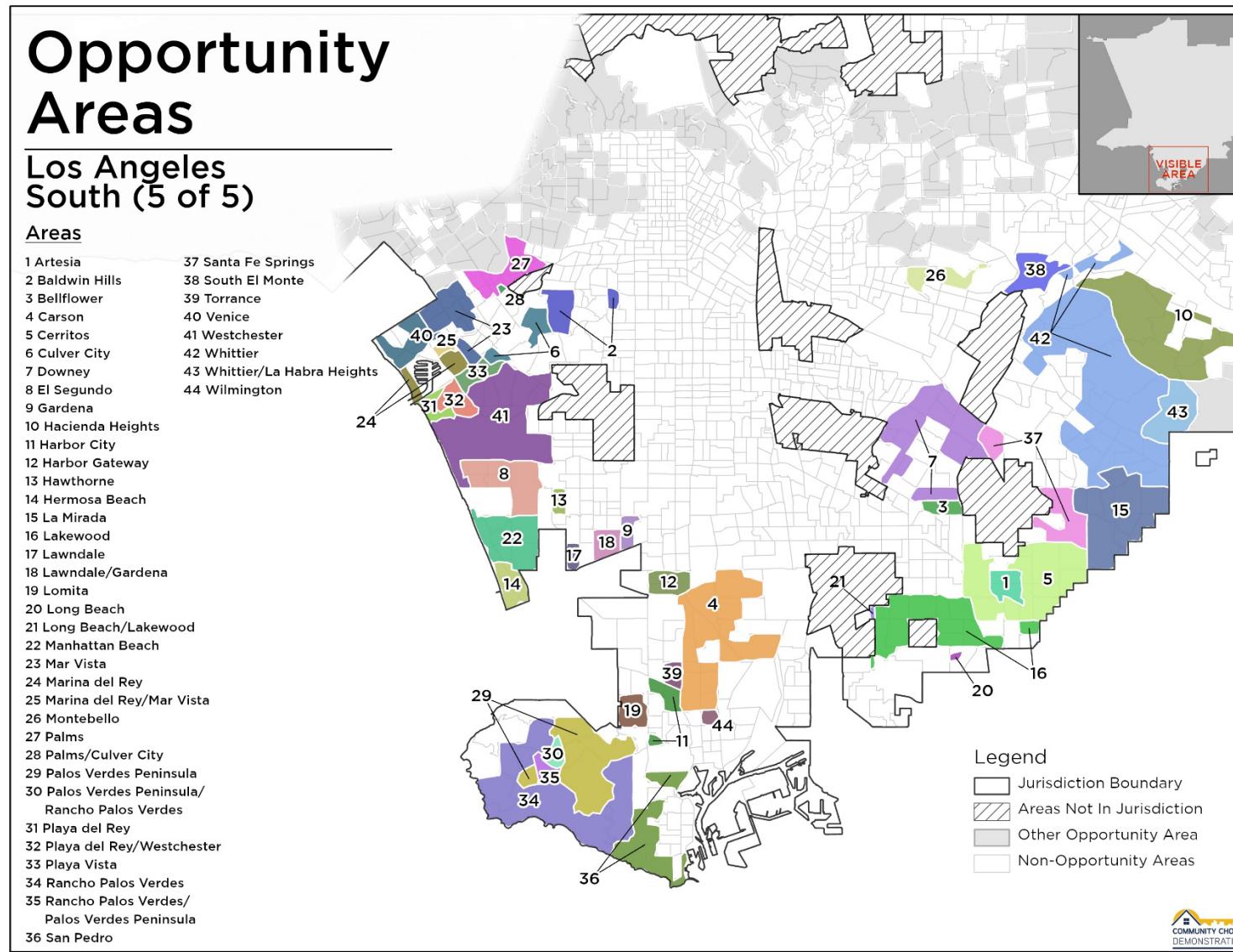
Los Angeles: Southeast (Map 3 of 5)



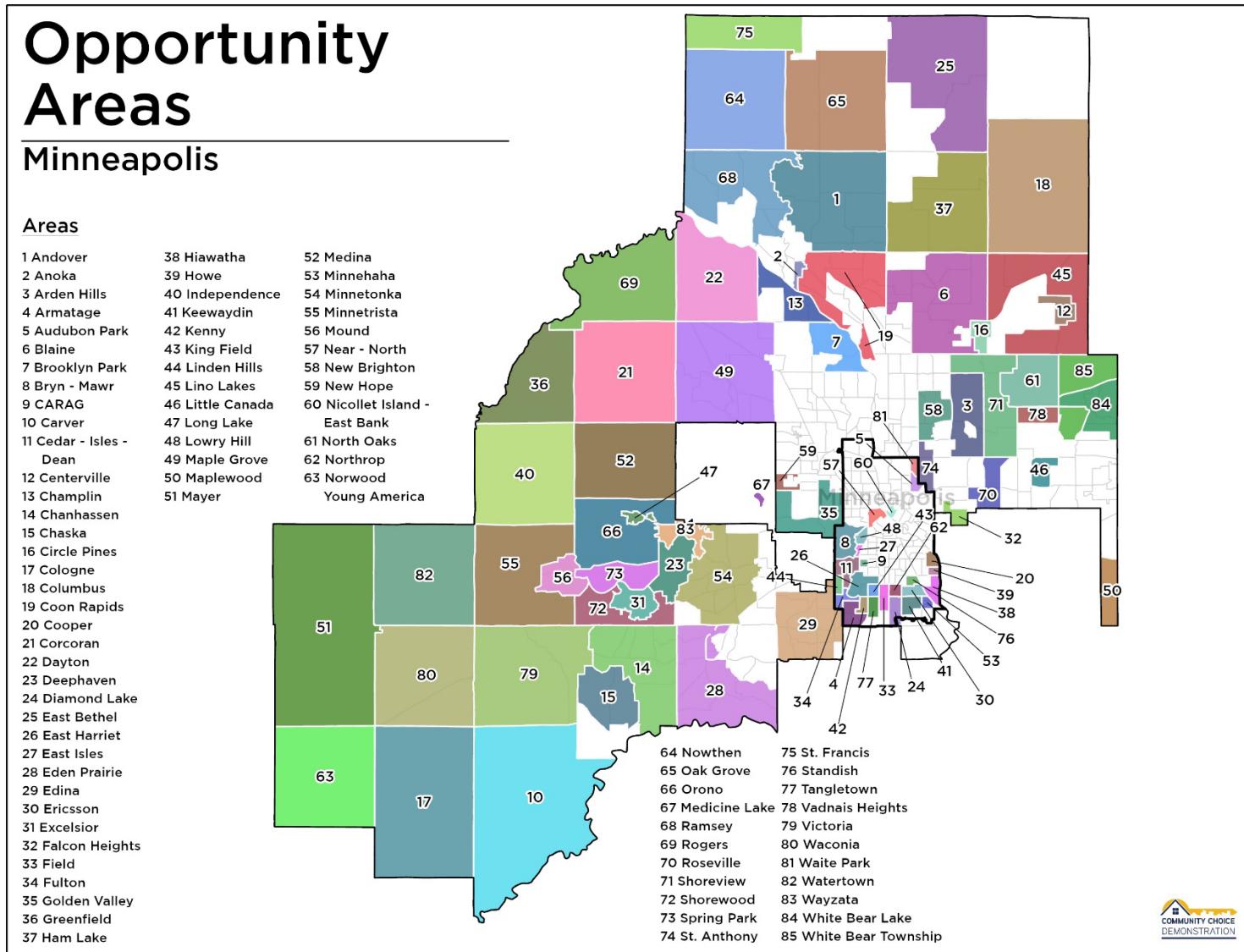
Los Angeles: East (Map 4 of 5)



Los Angeles: South (Map 5 of 5)



Minneapolis



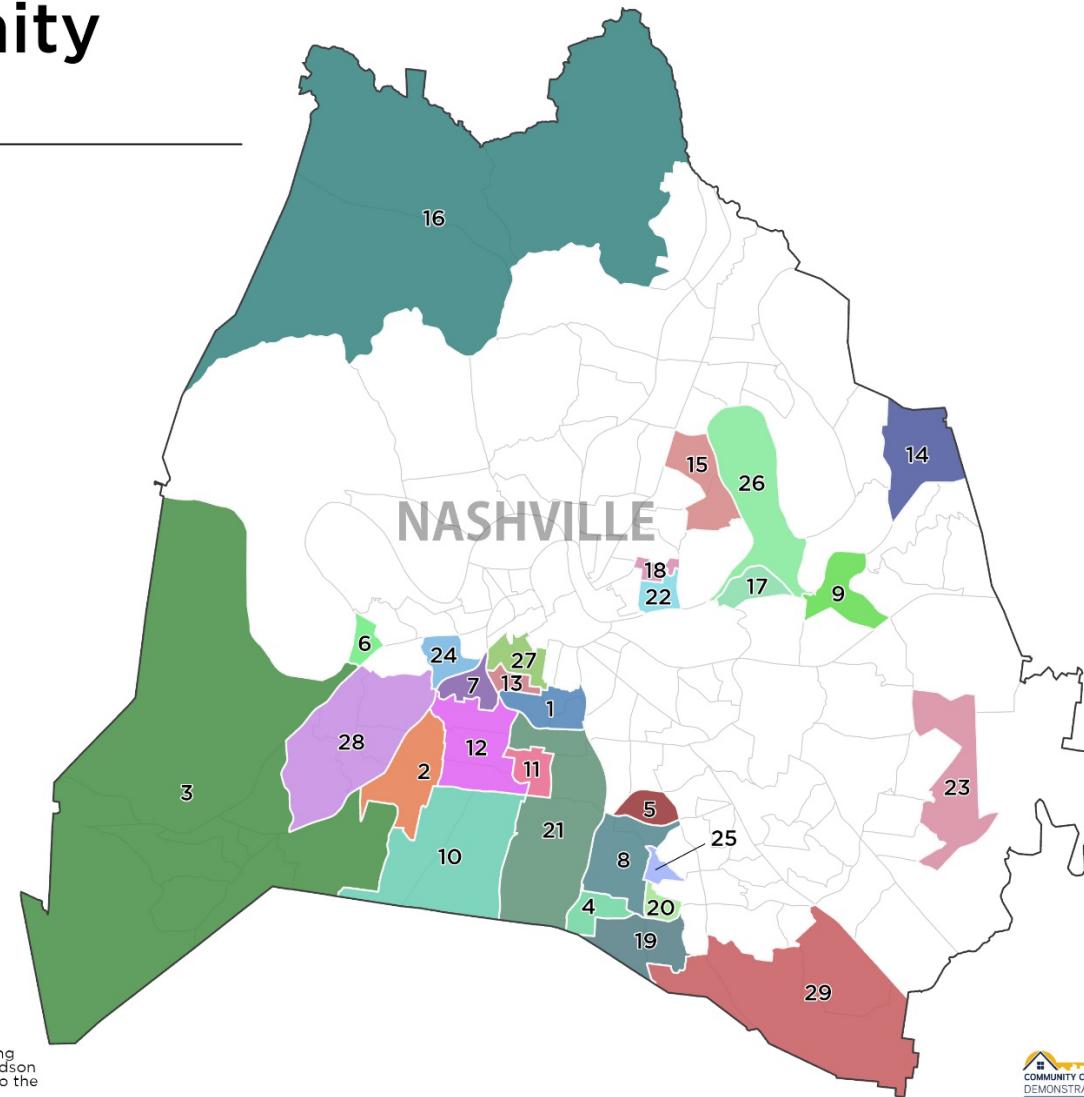
Nashville MDHA

Opportunity Areas

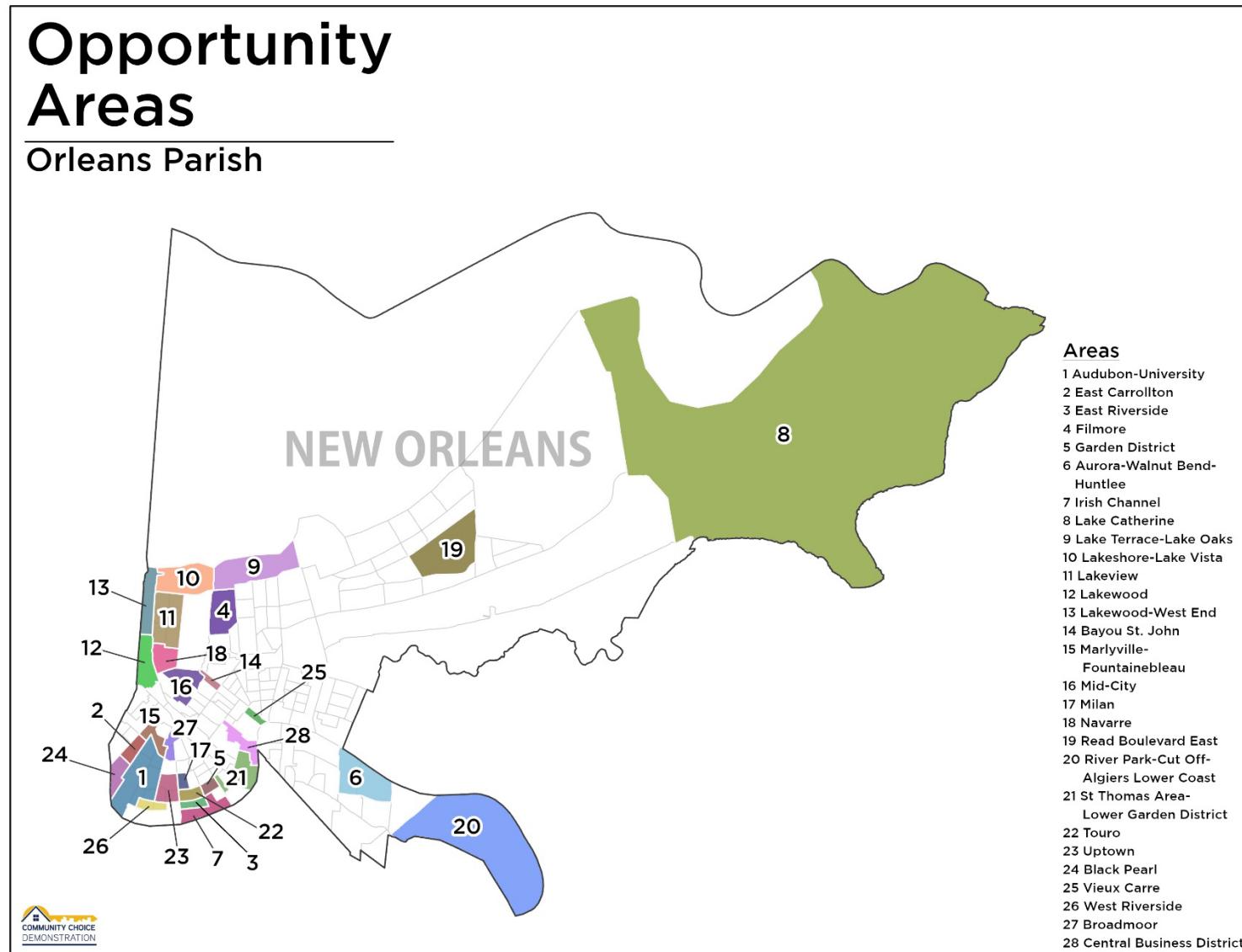
Nashville MDHA

Areas*

- 1 12 South
- 2 Belle Meade
- 3 Bellevue
- 4 Brentwood
- 5 Caldwell Hall
- 6 Charlotte Park
- 7 Cherokee Park/Whitland
- 8 Crieve Hall
- 9 Donelson
- 10 Forest Hills
- 11 Glendale Park
- 12 Green Hills
- 13 Hillsboro Village
- 14 Hopewell
- 15 Inglewood
- 16 Union Hill
- 17 Lincaya Hills
- 18 Lockeland Springs
- 19 Myrtlewood Estates
- 20 Nipper's Corner
- 21 Oak Hill
- 22 Shelby Hills
- 23 Smith Springs
- 24 Sylvan Park
- 25 Tusculum
- 26 Pennington Bend
- 27 Vanderbilt Area
- 28 West Meade
- 29 Wrenco



New Orleans: Orleans Parish



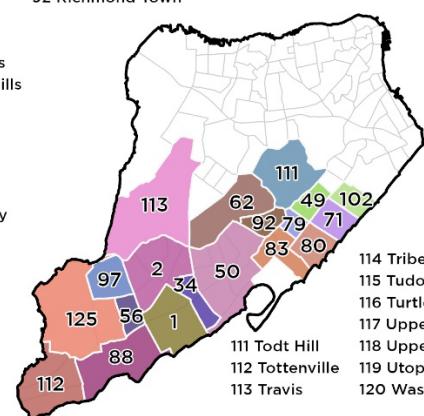
New York City

Opportunity Areas

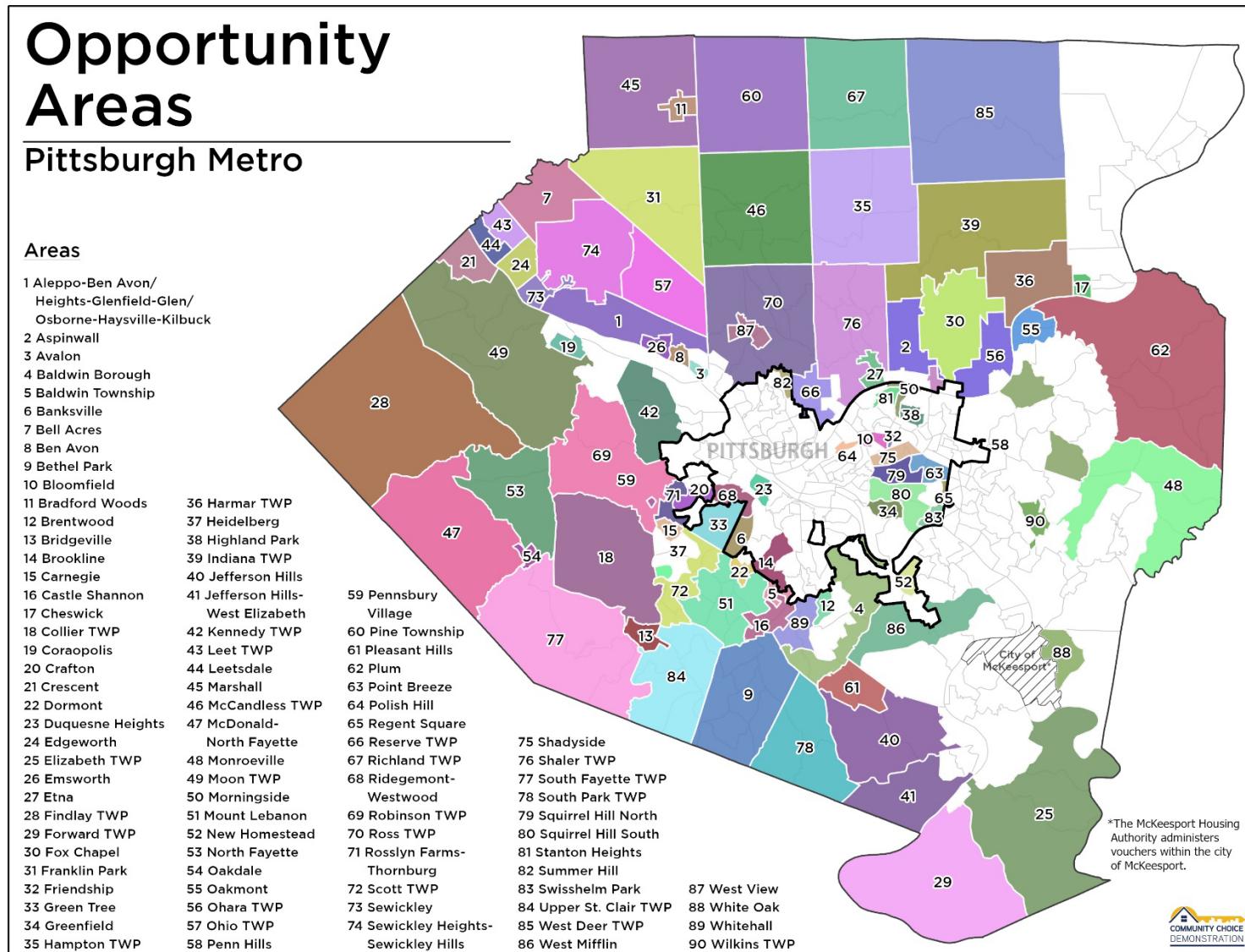
New York City

Areas

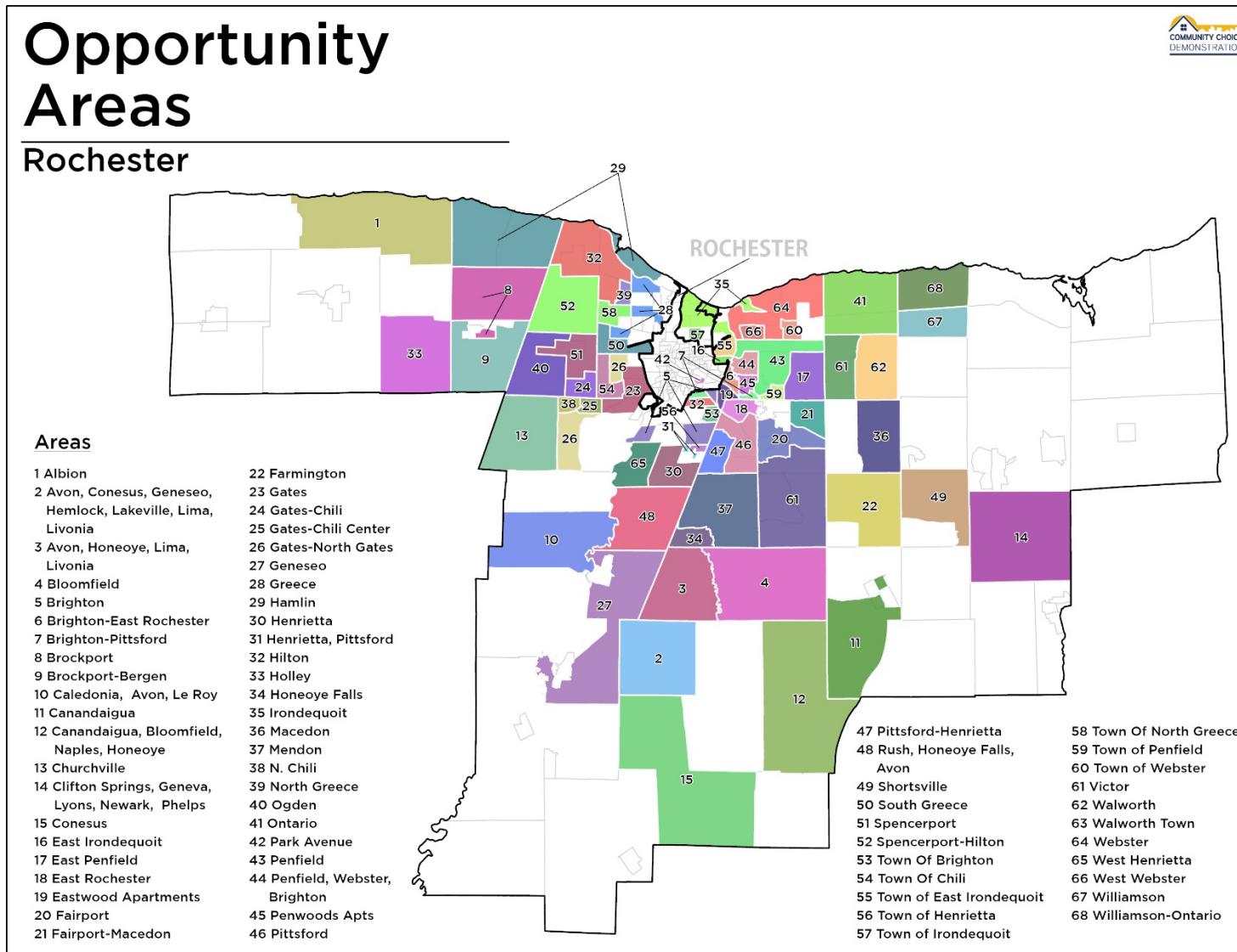
1 Annadale	37 Flatiron	73 Midtown South	93 Ridgewood
2 Arden Heights	38 Floral Park	74 Midwood	94 Riverdale
3 Astoria	39 Flushing	75 Morningside Heights	95 Rockaway Park
4 Auburndale	40 Forest Hills	76 Morris Park	96 Roosevelt Island
5 Bath Beach	41 Fort Greene	77 Murray Hill	97 Rossville
6 Battery Park City	42 Fresh Meadows	78 Neponsit	98 Schuylerville
7 Bay Ridge	43 Fulton Ferry	79 New Dorp	99 Seaside
8 Bay Terrace	44 Gerritsen Beach	80 New Dorp Beach	100 Sheepshead Bay
9 Bayside	45 Glen Oaks	81 North Riverdale	101 Soho
10 Belle Harbor	46 Glendale	82 Oakland Gardens	102 South Beach
11 Bellerose	47 Gowanus	83 Oakwood	103 Suyten Duyvil
12 Bensonhurst West	48 Gramercy	84 Park Slope	104 Steinway
13 Boerum Hill	49 Grant City	85 Pelham Gardens	105 Stuyvesant Town
14 Breezy Point	50 Great Kills	86 Pelham Parkway	106 Sunnyside
15 Brooklyn Heights	51 Greenpoint	87 Pomonok	107 Sunnyside Gardens
16 Carnegie Hill	52 Greenwich Village	88 Prince's Bay	108 Sunset Park West
17 Carroll Gardens	53 Highland Park	89 Prospect Heights	109 Sutton Place
18 City Island	54 Hillcrest	90 Queensboro Hill	110 Throgs Neck
19 Civic Center	55 Homecrest	91 Rego Park	
20 Clinton	56 Huguenot	92 Richmond Town	
21 Cobble Hill	57 Hunters Point		
22 College Point	58 Inwood		
23 Country Club	59 Jamaica Estates		
24 Douglaston	60 Kew Gardens Hills		
25 Downtown	61 Lenox Hill		
26 Dumbo	62 Lighthouse Hill		
27 Dyker Heights	63 Lincoln Square		
28 East Flushing	64 Little Italy		
29 East Harlem South	65 Little Neck		
30 East Village	66 Long Island City		
31 East Williamsburg	67 Madison		
32 Edgewater Park	68 Marine Park		
33 Elmhurst	69 Maspeth		
34 Eltingville	70 Middle Village		
35 Fieldston	71 Midland Beach		
36 Financial District	72 Midtown		



Pittsburgh Metro



Rochester



Appendix 19: Data Sources Considered in Opportunity Area Analysis

Characteristic	Source	Use	Notes
Family Poverty Rate	2015-2019 5yr ACS	Opportunity areas must be below specified threshold.	See narrative in Section 2.1 for the specific thresholds employed in the analysis.
MSA Child Opportunity Index 2.0 (COI)	Diversitydatakids.org – 2013-17 ACS, etc. COI 2.0 index data	One of three alternative bases for determining whether a tract meets minimum opportunity criteria.	The COI is a composite index that measures neighborhood resources and conditions that are important for children's development. We use the "All Child Opportunity Score, overall COI, metro normed variable in our analysis. The variable represents the percentile (based on the child population) for the score in each tract. Data downloaded on 06/21/2021
Opportunity Atlas	https://opportunityinsights.org	One of three alternative bases for determining whether a tract meets minimum opportunity criteria.	The Opportunity Atlas follows 20 million Americans from childhood to their mid-30s. The Atlas shows the average outcomes in adulthood of people who grew up in each Census Tract and were born between 1978 and 1983 and compiles social mobility data. For our analysis, we normed the scores for the metropolitan area by developing percentiles that reflect the share of rental units falling below the assigned percentile value for the "mean percentile rank in the national distribution of household income in 2014-2015" and assigning these percentiles to each census tract. Data retrieved 3/05/2021 and 3/08/2021.
HUD School Index	2019 data provided by HUD in a 10/13/2021 email	Used in two ways. One of three alternative bases for determining whether a tract meets minimum opportunity criteria. In addition, a tract must meet a minimum threshold.	Background information available here: https://www.huduser.gov/portal/periodicals/city_scpe/vol20num3/ch10.pdf Adjusted to MSA percentile by rental units.
Housing Concentration	Assisted HH W Children / Total Families	Opportunity areas must be below specified threshold.	Assisted households with children in 2020, from HUD additional data. HUD tabulated data from the same database used to generate the Picture of Subsidized Households on 9/8/2021. The tabulations allow tracts to be included in the analysis that are suppressed from the public dataset because of small sample privacy concerns Total families are from ACS 2014-2018.

APPENDIX 19: DATA SOURCES CONSIDERED IN OPPORUNITY AREA ANALYSIS

Characteristic	Source	Use	Notes
Assisted Households with Children	Provided by HUD in 9/08/2021	Input to the calculation of housing concentration	Assisted households with children in 2020. HUD tabulated data from the same database used to generate the Picture of Subsidized Households on 9/8/2021. The tabulations allow tracts to be included in the analysis that are suppressed from the public dataset because of small sample privacy concerns (demarcated as -4 in HUD Picture data).
Total Families	Provided by HUD in 9/08/2021	Input to compute housing concentration	Total families from ACS 2014-2018
Rental units below 120% of SAFMR	Rental units from 2015-2019 5yr ACS; FY2021 SAFMRs downloaded 5/27/21.	Used to evaluate overall effect of opportunity areas, judged as a whole, by itself, and as a weight to calculate summary statistics for analysis of main opportunity statistics.	FY 2021 SAFMRs downloaded from https://www.huduser.gov/portal/datasets/fmr/smallarea/index.html#2021_data
Rental Units by Rent Band by Tract	2015-2019 5yr ACS; HUD ZIP extract from 2015-2019 5yr ACS; HUD ZIP to tract crosswalk	Used to calculate rental units below 120 percent of SAFMR	We use gross rent data from both the ACS and from a special ACS extract available from HUD at the ZIP Code level because ACS data rent bin cut-offs (number of units with rent in specified ranges) top out at lower amounts than some SAFMRs. This complicates the development of estimates of rental units below 120 percent of SAFMRs. There are higher cut-offs in the ZIP Code-level bins in HUD rent data. The tract-level data are preferable when available because they cover a smaller geography.
SAFMRs	FY 2021 HUD SAFMRs downloaded 05/27/2021	Used to calculate rental units below 120 percent of SAFMR	Small Area Fair Market Rents (SAFMRs) are defined for ZIP Codes. We merged SAFMRs to census tracts using a ZIP-to-tract crosswalk provided by HUD. ⁵² We used these SAFMRs together with the gross rent data to calculate the number of units renting below SAFMR.
Housing Choice Voucher Households with children in the site	Data provided by HUD on 9/8/21 based on Picture of Subsidized Households database.	Used to assess individual tracts and develop other thresholds	HUD tabulated data from the same database used to generate the Picture of Subsidized Households on 9/8/2021. The tabulations allow tracts to be included in the analysis that are suppressed from the public dataset because of small sample privacy concerns (demarcated as -4 in HUD Picture data).

⁵² https://www2.census.gov/geo/docs/maps-data/data/rel/zcta_tract_rel_10.txt

APPENDIX 19: DATA SOURCES CONSIDERED IN OPPORUNTY AREA ANALYSIS

Characteristic	Source	Use	Notes
Share of Housing Choice Voucher Households with Children in the tract	Data provided by HUD on 9/8/21 based on Picture of Subsidized Households database.	Used to assess individual tracts and develop other thresholds	HUD tabulated data from the same database used to generate the Picture of Subsidized Households on 9/8/2021. The tabulations allow tracts to be included in the analysis that are suppressed from the public dataset because of small sample privacy concerns (-4 in HUD picture data).
Other variables (see list in far-right column)	2015-2019 5yr ACS	Used to assess individual tracts and develop other thresholds	<ul style="list-style-type: none"> • Rental Units • Families in poverty • Share of units owned/rented • Household size and composition • Average and median income

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