

# CA 2024 Justice Gap Study Codebook - Household Data

Variable	Variable Label	Value	Value Label
Caseld	Case ID		
WEIGHT_FULL	Final weight = California adults age 18+ (N=6,330)		
SVY_RAKED_WGT_FULL	Final population-level weight = California adults age 18+ (N=6,330)		
WEIGHT_3PROBLEMS	Final weight for 3 problem items recorded in Reask Survey = California adults age 18+ (N=2,209)		
SVY_RAKED_WGT_3PROBLEMS	Final population-level weight for 3 problem items recorded in Reask Survey = California adults age 18+ (N=2,209)		
New_Items_Base	DATA ONLY VARIABLE: Flags cases that should be used to analyze new items	0	No
		1	Yes
PROBNUM	PROBNUM Problem number (1-86)		
BLOCK	BLOCK Survey section		
BLOCK2	Categorized variables Survey Section		
WHO_EXP	WHO_EXP Who in the household experienced the problem	1	Me
		2	Someone else in my household
		3	No one
		4	Both me and someone else in my household
		77	DON'T KNOW
		98	SKIPPED ON WEB
		99	REFUSED
		100	NOT ASKED
SAMPLE_SOURCE	SAMPLE_SOURCE	1	AmeriSpeak
		2	Off-panel
		3	ABS
DOV_HHSIZE	DATA ONLY: Total Household Size		
S1	Including yourself, how many people currently live in your household?	1	One person
		2	Two people
		3	Three people
		4	Four people
		5	Five people
		6	Six people
		7	Seven people
		8	Eight people
		9	Nine people
		10	Ten or more people
		77	DON'T KNOW
		98	SKIPPED ON WEB
		99	REFUSED
S2_COMBINED	DATA ONLY VARIABLE: Combined S2 and S2A	1	Less than or equal to \$[DOV_INDIGENT/12]
		2	Between \$[(DOV_INDIGENT+1)/12] and \$[DOV_LOWERINCOME/12]
		3	Between \$[(DOV_LOWERINCOME+1)/12] and \$[DOV_MIDDLEINCOME/12]
		4	Equal to or more than \$[DOV_HIGHINCOME/12]
		77	DON'T KNOW
		98	SKIPPED ON WEB
		99	REFUSED
	Thinking about a typical month, how much of your household's total monthly income would you say is spent on housing expenses?	1	Less than 30%
S3		2	Between 30% and 50%
		3	More than 50%
		77	DON'T KNOW
		98	SKIPPED ON WEB
		99	REFUSED
S4A	Is anyone in your household a parent or guardian of a child under the age of 18?	1	Yes
		2	No
		77	DON'T KNOW
		98	SKIPPED ON WEB
		99	REFUSED
S4B	Is anyone in your household the parent or guardian of a child under the age of 12?	1	Yes
		2	No
		77	DON'T KNOW
		98	SKIPPED ON WEB
		99	REFUSED
S5	Does anyone in your household identify as a single parent?	1	Yes
		2	No
		77	DON'T KNOW
		98	SKIPPED ON WEB
		99	REFUSED
S6	Is anyone in your household aged 65 years or older?	1	Yes
		2	No
		77	DON'T KNOW

		98 SKIPPED ON WEB 99 REFUSED
DOV_HH650V	DATA ONLY VARIABLE: DOV_HH650V Aged 65+ or has household member aged 65+	0 0 1 1
S7	At any time in the past 12 months, did anyone in your household attend school or have children attending school?	1 Yes 2 No 77 DON'T KNOW 98 SKIPPED ON WEB 99 REFUSED
S8	Has anyone in your household ever served in the military, military reserves, or national guard?	1 Yes 2 No 77 DON'T KNOW 98 SKIPPED ON WEB 99 REFUSED
S9_1_1	[Yes, me or a person I care for] [Hearing (including deafness)] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_1_2	[Yes, someone else or a person they care for] [Hearing (including deafness)] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_1_3	[No, no one/not applicable] [Hearing (including deafness)] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_1_DK	[DON'T KNOW] [Hearing (including deafness)] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_1_SKP	[SKIPPED ON WEB] [Hearing (including deafness)] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_1_REF	[REFUSED] [Hearing (including deafness)] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_2_1	[Yes, me or a person I care for] [Seeing even when wearing glasses...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_2_2	[Yes, someone else or a person they care for] [Seeing even when wearing glasses...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_2_3	[No, no one/not applicable] [Seeing even when wearing glasses...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_2_DK	[DON'T KNOW] [Seeing even when wearing glasses...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_2_SKP	[SKIPPED ON WEB] [Seeing even when wearing glasses...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_2_REF	[REFUSED] [Seeing even when wearing glasses...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No

		1 Yes
S9_3_1	[Yes, me or a person I care for] [Concentrating, remembering, or making decisions] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_3_2	[Yes, someone else or a person they care for] [Concentrating, remembering, or making decisions] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with...	0 No 1 Yes
S9_3_3	[No, no one/not applicable] [Concentrating, remembering, or making decisions] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_3_DK	[DON'T KNOW] [Concentrating, remembering, or making decisions] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_3_SKP	[SKIPPED ON WEB] [Concentrating, remembering, or making decisions] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_3_REF	[REFUSED] [Concentrating, remembering, or making decisions] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_4_1	[Yes, me or a person I care for] [Walking or climbing stairs] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_4_2	[Yes, someone else or a person they care for] [Walking or climbing stairs] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_4_3	[No, no one/not applicable] [Walking or climbing stairs] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_4_DK	[DON'T KNOW] [Walking or climbing stairs] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_4_SKP	[SKIPPED ON WEB] [Walking or climbing stairs] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_4_REF	[REFUSED] [Walking or climbing stairs] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_5_1	[Yes, me or a person I care for] [Dressing or bathing] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_5_2	[Yes, someone else or a person they care for] [Dressing or bathing] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes

S9_5_3	[No, no one/not applicable] [Dressing or bathing] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_5_DK	[DON'T KNOW] [Dressing or bathing] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_5_SKP	[SKIPPED ON WEB] [Dressing or bathing] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_5_REF	[REFUSED] [Dressing or bathing] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_6_1	[Yes, me or a person I care for] [Doing errands alone...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_6_2	[Yes, someone else or a person they care for] [Doing errands alone...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_6_3	[No, no one/not applicable] [Doing errands alone...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_6_DK	[DON'T KNOW] [Doing errands alone...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_6_SKP	[SKIPPED ON WEB] [Doing errands alone...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S9_6_REF	[REFUSED] [Doing errands alone...] ...indicate whether you or someone else in your household has serious difficulty...or is the main caregiver for someone who has serious difficulty with the activity.	0 No 1 Yes
S10	Does anyone in your household have a substance use disorder or struggle with addiction to drugs or alcohol?	1 Yes 2 No 77 DON'T KNOW 98 SKIPPED ON WEB 99 REFUSED
S11_1	[Rented] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes
S11_2	[Owned with a mortgage or loan...] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes
S11_3	[Owned free and clear (without a mortgage or loan)] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes
S11_4	[Occupied without payment of rent] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes
S11_5	[Other, please specify:] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes
S11_6	[None of the above] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes

S11_DK	[DON'T KNOW] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes
S11_SKP	[SKIPPED ON WEB] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes
S11_REF	[REFUSED] Please indicate if, in the last 12 months, anyone in your household lived in a residence that was:	0 No 1 Yes
Q2	In your opinion, is this a type of problem that a lawyer or other legal professional could help resolve?	1 Yes 2 No 77 Not Sure 98 SKIPPED ON WEB 99 REFUSED
Q4A	SEVERITY Household severity rating	1 Severely 2 Very much 3 Moderately 4 Slightly 5 Not at all 77 DON'T KNOW 98 SKIPPED ON WEB 99 REFUSED
Q4B	SEVERITY Physical severity rating	1 Severely 2 Very much 3 Moderately 4 Slightly 5 Not at all 77 DON'T KNOW 98 SKIPPED ON WEB 99 REFUSED
Q4C	SEVERITY Mental severity rating	1 Severely 2 Very much 3 Moderately 4 Slightly 5 Not at all 77 DON'T KNOW 98 SKIPPED ON WEB 99 REFUSED
Q4D	SEVERITY Monetary severity rating	1 Severely 2 Very much 3 Moderately 4 Slightly 5 Not at all 77 DON'T KNOW 98 SKIPPED ON WEB 99 REFUSED
Q4E	SEVERITY Relationship severity rating	1 Severely 2 Very much 3 Moderately 4 Slightly 5 Not at all 77 DON'T KNOW 98 SKIPPED ON WEB 99 REFUSED
Q15	How confident are you that you would be able find a lawyer or other legal professional that you could afford if you needed help on a serious civil legal problem, such as preventing an eviction, foreclosure, or the loss of custody of a child?	1 Extremely confident 2 Very confident 3 Somewhat confident 4 Not very confident 5 Not at all confident 77 Not sure 98 SKIPPED ON WEB 99 REFUSED
Q2NEW_1	[In person at a law office] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_2	[In person in a courthouse] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_3	[In person in some other business setting] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes

Q2NEW_4	[In person at a public library or county law library] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_5	[In person in my home] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_6	[Through telephone calls] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_7	[Through text messaging] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_8	[Through email] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_9	[Through an online form] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_10	[Through a live chat] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_11	[Through a real-time online meeting (e.g., Zoom call)] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_12	[Other, please specify] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_13	[It would depend on my problem] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_DK	[DON'T KNOW] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_SKP	[SKIPPED ON WEB] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q2NEW_REF	[REFUSED] The next time you think you may need legal help; how do you prefer to receive that help?	0 No 1 Yes
Q16	To what extent do you agree or disagree with the statement below? People like me are able to use the	1 Strongly agree 2 Agree 3 Neither agree nor disagree 4 Disagree 5 Strongly disagree 77 Not sure 98 SKIPPED ON WEB 99 REFUSED
Q17	To what extent do you agree or disagree with the statement below? People like me are treated fairly in	1 Strongly agree 2 Agree 3 Neither agree nor disagree 4 Disagree 5 Strongly disagree 77 Not sure 98 SKIPPED ON WEB 99 REFUSED
Q18	To what extent do you agree or disagree with the statement below? The civil legal system can help people like me solve important problems like those discussed in this survey.	1 Strongly agree 2 Agree 3 Neither agree nor disagree 4 Disagree 5 Strongly disagree 77 Not sure 98 SKIPPED ON WEB 99 REFUSED
LEP	DATA ONLY VARIABLE: Low English Proficiency	
SURV_MODE	Survey interview mode (online or phone)	1 Phone interview 2 Web Interview
SURV_LANG	Survey Interview Language	1 English 2 Spanish 3 Chinese Simplified 4 Chinese Traditional 5 Korean

Device	Device	6 Vietnamese
GENDER	Respondent gender	0 Unknown
		1 Male
		2 Female
AGE	Respondent age	
AGE4	Age - 4 Categories	1 18-29
		2 30-44
		3 45-59
		4 60+
		99 Under 18
AGE7	Age - 7 Categories	1 18-24
		2 25-34
		3 35-44
		4 45-54
		5 55-64
		6 65-74
		7 75+
		99 Under 18
RACETHNICITY	Combined Race/Ethnicity	1 White, non-Hispanic
		2 Black, non-Hispanic
		3 Other, non-Hispanic
		4 Hispanic
		5 2+, non-Hispanic
		6 Asian-Pacific Islander, non-Hispanic
EDUC5	5-level education	1 Less than HS
		2 HS graduate or equivalent
		3 Some college/ associates degree
		4 Bachelor's degree
		5 Post grad study/professional degree
MARITAL	Marital Status	1 Married
		2 Widowed
		3 Divorced
		4 Separated
		5 Never married
		6 Living with partner
EMPLOY	Current Employment Status	1 Working - as a paid employee
		2 Working - self-employed
		3 Not working - on temporary layoff from a job
		4 Not working - looking for work
		5 Not working - retired
		6 Not working - disabled
		7 Not working - other
METRO	Metropolitan area flag	0 Non-Metro Area
		1 Metro Area
MSSA	DATA ONLY VARIABLE: California Medical Service Study Areas	1 Urban
		2 Rural
		3 Frontier
HOME_TYPE	Type of building of panelists' residence	-1 Unknown
		1 A one-family house detached from any other house
		2 A one-family house attached to one or more houses
		3 A building with 2 or more apartments
		4 A mobile home or trailer
		5 Boat, RV, van, etc
PHONESERVICE	Telephone service for the household	1 Landline telephone only
		2 Have a landline, but mostly use cellphone
		3 Have cellphone, but mostly use landline
		4 Cellphone only
		5 No telephone service