Los Angeles Sheltered Data Code Book: 2017

CODE BOOK FORMAT

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| --- | --- | --- |
| Variable Name | Description | Levels: If variables have been coded numerically, you will see the number on the left followed by an equals sign followed by the definition |

AGE

|  |  |  |
| --- | --- | --- |
| Age | Age of the individual at the time of the survey. | Raw data input (in years) |
| Birth\_Year | Year the individual was born. | Raw data input |

APPLICATION ID

|  |  |  |
| --- | --- | --- |
| Application\_ID | Application ID | Raw data input |

SEX/GENDER/ORIENTATION

Note: In 2017, Sexual Orientation was only collected from transition age youth (TAY). A TAY is defined as a head of household between the ages of 16 and 24. Another important distinction is that an unaccompanied individual is considered the head of a one person household.

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| Gender | Answer to: What is your gender identity? | Male;  Female;  Transgender;  Unknown; |
| Sexual\_Orientation | Answer to: Which of the following best represents your sexual orientation? | Straight;  Gay or lesbian;  Bisexual Unsure / questioning;  Unknown |

ETHNICITY/RACE

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| --- | --- | --- |
| Ethnicity | What is the individual’s ethnicity? | European American;  African American;  Latino;  Other Ethnicity;  Unknown |
| Race\_full | What is the individual’s race | Raw data input |
| Race\_Recode | Recode of race by Economic Roundtable | European American;  African American;  Other Ethnicity;  Unknown |

VETERAN

|  |  |  |
| --- | --- | --- |
| Veteran | Answer to: Have you ever served in U.S military? | 0 = No  1 = Yes  2 = Unknown |

CHRONIC HOMELESSNESS

Note: An individual is considered chronically homeless if they have been homeless for at least a year continuously or they have had 4 episodes in the last three years that total to 1 year AND they have a disabling condition.

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| --- | --- | --- |
| Chronic\_Time | Does the individual meet the HUD requirement for time? | 0 = No  1 = Yes |
| Chronic\_Condition | Does the individual have a long-term disabling condition? | 0 = No  1 = Yes  2 = Unknown |
| Chronic | Is the individual chronically homeless? | 0 = No  1 = Yes  2 = Unknown |

LIVING WITH CHILDREN/FAMILY STRUCTURE

|  |  |  |
| --- | --- | --- |
| Adult\_With\_Child | Answer to: Are you living with your child or the child of someone you are traveling with AND is this child under 18? | 0 = No  1 = Yes  2 = Unknown |
| Family\_Structure | What is the family structure of the individual? | Adults Without Children;  Single Parent;  Two Parents;  Unaccompanied |
| Relation\_To\_HOH | What is the individual’s relationship to the head of household? | Self;  Spouse/Partner;  Child;  Other |
| Pregnant | Is the individual pregnant? | 0 = No  1 = Yes |

TIME HOMELESS/MOVEMENT IN AND OUT OF HOMELESSNESS

Note: The wording on the question connected to the Times\_Homeless\_3yrs variable is somewhat confusing and there are contradictory values between Current\_Stint\_Duration and Total\_Months\_Homeless\_3yrs.

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| --- | --- | --- |
| Current\_Stint\_Duration | Answer to: How long have you been homeless THIS TIME? | Up to 1 Month;  1-3 Months;  4-5 Months;  6-11 Months;  12+ Months |
| Times\_Homeless\_3yrs | Answer to: In the past three years, how many times have you returned to the streets, an emergency shelter, or a safe haven after being housed? (Number of times the client has been on the streets, in ES, or SH in the past three year including today) | 1 Time;  2 to 3 Times;  Less than 4-Unspecified;  4 or More Times;  Unknown |
| Total\_Months\_Homeless\_3yrs | Total number of months homeless on the street, in emergency shelter, or safe haven in the past three years? | Up to 1 Month;  1-3 Months;  4-5 Months;  6-11 Months;  12+ Months |
| SPA | The service planning area that the survey took place in. | Raw data input from interviewer |
| Census\_Tract | The census tract that the survey took place in. | Raw data input from interviewer |

LIVING SITUATION

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| --- | --- | --- |
| Prior\_Living\_Situation | Answer to: What was the situation you were living in immediately prior to project entry? | Place not meant for habitation;  Hotel or motel paid for w/o emergency shelter voucher;  Emergency shelter;  Staying or living in a family members room, apartment or house;  Rental by client, no ongoing housing subsidy;  Hospital or other residential non-psychiatric medical facility;  Substance abuse treatment facility or detox center;  Staying or living in a friends room, apartment or house;  Safe haven;  Jail, prison or juvenile detention facility;  Psychiatric hospital or other psychiatric facility;  Transitional housing;  Rental by client, with VASH subsidy;  Permanent housing for formerly homeless persons;  Rental by client, with other ongoing housing subsidy;  Rental by client, with GPD TIP subsidy;  Interim Housing;  Foster care home or foster care group home; Long term care facility or nursing home;  Owned by client, no ongoing housing subsidy;  Owned by client, with ongoing housing subsidy;  Residential project or halfway house with no homeless criteria;  Unknown |
| Prior\_Living\_Situation\_Duration | How long was the individual staying in their previous living situation? | One night or less;  Two to six nights;  One week or more, but less than one month;  1-3 months;  4-11 months;  12+ months; Unknown |

HISTORY OF PHYSICAL/SEXUAL ABUSE

|  |  |  |
| --- | --- | --- |
| Physical\_Sexual\_Abuse | Answer to: Have you been a victim of domestic violence or a victim of intimate partner violence? | 0 = No  1 = Yes  2 = Unknown |
| Flight\_From\_Violence | Answer to: Are you currently fleeing violence? | 0 = No  1 = Yes  2 = Unknown |

DISABILITIES/ILLNESS

Note: Across surveys, individuals are asked in a variety of different ways whether or not they have certain disabilities. Some years it asked whether the person is currently experiencing the effects of a certain disability or illness while other years it asked if they have had any experiences in their lifetime. I have tried to highlight these distinctions in the variable names and descriptions.

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| --- | --- | --- |
| Physical\_Disability | Answer to: Do you have a physical disability? | 0 = No  1 = Yes  2 = Unknown |
| Alcohol\_Abuse | Answer to: Do you currently have a drug problem? | 0 = No  1 = Yes  2 = Unknown |
| Drug\_Abuse | Answer to: Do you currently have an alcohol problem? | 0 = No  1 = Yes  2 = Unknown |
| Mental\_Illness | Answer to: Do you feel you currently have a mental health problem? | 0 = No  1 = Yes  2 = Unknown |
| Developmental\_Disability | Answer to: Have you ever been told you have a learning disability or developmental disability? | 0 = No  1 = Yes  2 = Unknown |
| HIV\_Positive | Individual is HIV positive | 0 = No  1 = Yes  2 = Unknown |

EMPLOYMENT STATUS

|  |  |  |
| --- | --- | --- |
| Employed | Answer to: Are you currently employed? | 0 = No  1 = Yes  2 = Unknown |
| Full\_Time | Individual works full time | 0 = No/Unknown  1 = Yes |
| Part\_Time | Individual works part time | 0 = No/Unknown  1 = Yes |
| Sporadic\_Work | Individual has sporadic work (seasonal or day labor included) | 0 = No/Unknown  1 = Yes |
| Unemployed\_Looking | Individual is unemployed, but looking for work | 0 = No/Unknown  1 = Yes |
| Unemployed\_Not\_Looking | Individual is unemployed and not looking for work | 0 = No/Unknown  1 = Yes |

CURRENT GOVERNMENT ASSISTANCE/FORMS OF INCOME

|  |  |  |
| --- | --- | --- |
| Gov\_Assist\_Unemployment | Individual is receiving unemployment payments | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_General\_Relief | Individual is receiving General Relief or Assistance | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_SSI\_SSD | Individual receives SSI or SSDI payments | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Social\_Security | Individual receives social security retirement payments | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Food\_Stamps | Individual receives food stamps | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_CalWorks | Individual receives calWORKS services | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Medicaid | Individual is enrolled in Medicaid | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Medicare | Individual is enrolled in Medicare | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Vet\_Disability\_Payment | Individual receives veteran disability payments | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Vet\_Other\_Benefit | Individual receives benefits related to being a veteran | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Vet\_Pension | Individual receives veteran pension | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Child\_Insurance | Individual receives child support or survivor benefits | 0 = No  1 = Yes  2 = Unknown |
| Gov\_Assist\_Rental | Individual receives temporary rental assistance | 0 = No  1 = Yes  2 = Unknown |
| Other\_Income\_Child\_Support | Individual receives child support | 0 = No  1 = Yes  2 = Unknown |
| Other\_Income\_Unemployment\_Pension | Individual receives unemployment pension | 0 = No  1 = Yes  2 = Unknown |
| Other\_Income\_Private\_Disability | Individual receives private disability insurance payments | 0 = No  1 = Yes  2 = Unknown |
| Other\_Income\_Worker\_Comp | Individual receives worker’s compensation | 0 = No  1 = Yes  2 = Unknown |
| Other\_Income\_Other | Individual receives unspecified other income | 0 = No  1 = Yes  2 = Unknown |

SCHOOL COMPLETED

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| --- | --- | --- |
| School\_Complete | Answer to: What is the highest level of education you have completed? | No schooling completed;  Less than 5th grade;  Grades 5-6;  Grades 7-8;  Grades 9-11;  12th grade, no diploma;  High school diploma;  GED;  Some college;  Associate's degree;  Bachelor's degree;  Graduate school;  Unknown |

LEGAL SYSTEM INVOLVEMENT

Note: The following variable are attached to questions that were only asked of transition age youth between the ages of 16 and 24.

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| --- | --- | --- |
| Foster\_Care | Answer to: Are you a current or former foster care youth? | 0 = No  1 = Yes  2 = Unknown |
| Juvenile\_Justice\_System | Answer to: Have you ever been in the juvenile justice system? | 0 = No  1 = Yes  2 = Unknown |

SHELTER INFO

|  |  |  |
| --- | --- | --- |
| Program\_Name | Name of the program the individual is enrolling in. | Raw data |
| Program\_Type | Type of program the individual is enrolling in. | Emergency Shelter;  Transtional Housing;  Safe Haven;  Unknown |

APPLICATION ID

|  |  |  |
| --- | --- | --- |
| Application\_ID | Numerical identifier for applicant | Raw Data |

WEIGHTS

There are two variables related to weights, “Weights” and “Weights\_rescale”. Because the shelter data represents a full count, not a sample, the “Weights” are just dummy weights of 1. “Weights\_rescale” is our rescaling of the “Weights” so that the weights for youth (18-24) add up to the estimated sheltered youth total and the weights for others add up to the remaining total. Thus, overall the sum of “Weights\_rescale” equals the estimated sheltered population. This is necessary since the data from sheltered people is gathered over a longer period than just a night and so would not otherwise equal the total. This facilitates data visualization and other tasks.