Research Protocol for CityHealth: Legal Support for Renters

Prepared by Center for Public Health Law Research

June 2024

RESEARCH PROTOCOL
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CityHealth: Legal Support for Renters

I. **Dates of Protocol:** July 2022; August 2022; November 2022; December 2022; November 2023; November 2024.

II. **Scope:** Compile statutes and ordinances on legal support for renters across the 75 largest cities, their respective counties, 32 states and the District of Columbia. The purpose of the CityHealth project is to collect important public health policies and determine what makes a healthy city. For a particular health policy, the goal is to display the state, county, and city law involved in shaping this policy at the city level. This dataset contains coding questions examining laws requiring legal protections and support for renters. These laws ensure all eligible tenants have access to full legal representation when faced with eviction. This is a cross-sectional dataset originally capturing effective law valid through June 1, 2024, and crediting laws passed prior to final publication with future effective dates.

III. **Primary Data Collection**

a. **Original project dates:** January 1, 2022 – December 1, 2022

b. **Data collection methods**: The team building this dataset consisted of three team members: two legal researchers ("Researchers") and one supervisor ("Supervisor") overseeing the quality control process.

c. **Databases used**: Searches conducted using Westlaw Next and HeinOnline; the laws were then collected from state-specific legislature websites. County and city laws were collected from official government websites, municode.com and amlegal.com.

d. **Search terms**: legal support for renters; right to counsel for renters; right to counsel; indigent tenants; legal representation for renters; legal representation for tenants; covered individual; covered proceedings

   i. Key word searches were supplemented by examination of the table of contents of each relevant section of the law identified.

   ii. Once all the relevant laws were identified in each jurisdiction, a master sheet was created for each jurisdiction that summarized the relevant laws within the scope at each jurisdictional level. This summary included the statutory history for each law and the effective date for that version of the law.

   iii. Research findings were compared to secondary sources, like the National Coalition for a Civil Right to Counsel, to ensure that all legal support for renters policies were captured.

e. **Information about initial returns and additional inclusion or exclusion criteria**:

      i. This dataset only captures statutes, regulations, ordinances, and final orders or policies. It does not credit guidance documents or city plans that are not binding in nature.

      ii. This dataset does not capture temporary COVID-19 emergency laws**.**

IV. Coding

a. Development of coding scheme: The Center for Public Health Law Research (CPHLR) worked with the CityHealth team and experts from the National Coalition for a Civil Right to Counsel to develop scoring criteria for this policy. Based on that scoring criteria and the accompanying definitions detailed during that process, CPHLR developed a set of coding questions to identify the information more efficiently in the state, county, and city laws for this assessment. This set of coding questions was reviewed by the CityHealth team.

b. Coding methods: The Researchers were responsible for coding all 75 cities, including the respective state and county laws for each of the cities. Both Researchers independently coded their assigned jurisdictions in the MonQcle software platform.

Following the quality control process for the coding (described below), the Supervisor used the final data results to apply the coding for each jurisdiction to the scoring criteria to determine the final medal score for each city. These medal results were compiled into a score overview spreadsheet and reviewed by the CityHealth team.
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c. Coding definitions: As delineated during the scoring criteria development process, coders relied on the following definitions:
    i. "enhanced coverage" includes representation for eviction and some proceedings functionally equivalent to eviction, such as subsidy terminations.
    ii. "limited coverage" includes representation for evictions only.
    iii. "evaluation" was coded based on any language measuring the efficacy of the policy or program, including the evaluation of program metrics, outcomes, or key indicators.
    iv. Reporting was coded based on an indication that the program or policy data is reported publicly. Simply reporting to the Mayor/Council without publication is insufficient.

d. Quality control:

    i. **Original coding review:** The Supervisor oversaw the quality of the data by downloading the data from the MonQcle into Microsoft Excel and reviewing it to find caution flags, missing citations, and errors in the coding. Issues in the coding were discussed by the Researchers in coding meetings and resolved accordingly.

    ii. **Redundant coding review:** The Supervisor assigned 100% of the original coding records containing legal support for renters laws for redundant coding. This meant that 14 jurisdictional records were independently redundantly coded by a second researcher.

        1. The Supervisor reviewed the redundant coding by downloading the data from the MonQcle into Microsoft Excel and comparing the records, variable by variable, looking for divergences. When a divergence was identified, it was discussed with the researchers.

The reason for the divergence was identified and resolved. A measure of divergence was calculated by the Researcher and the redundant record was deleted.

2. The initial rate of divergence on August 30, 2022 was 0.00%.

iii. **Final coding review:** The Supervisor did a final check of the original coding for all states and ensured that the state coding was consistent among cities within the same.

iv. **City review phase:** After the medal results were tabulated and reviewed by CityHealth, the Supervisor sent the medal results to a designated representative in each of the 75 cities to give them an opportunity to review the preliminary result and provide any notice of new or missing laws in scope or question the end results. This feedback was reviewed by both the CPHLR team and the CityHealth team prior to final publication of the final medal results.

V. 2023 Assessment

a. **Updates:** For the 2023 Assessment, the state of Minnesota passed a new law during the 2023 assessment period, with a future effective date of January 1, 2024, that established a right to counsel for a defendant In public housing subject to an eviction action and financially unable to obtain counsel. After discussion with the subject matter experts from the National Coalition for a Civil Right to Counsel, the CityHealth team adjusted the Bronze medal criteria to require that a policy at least cover all tenants within an objectively defined group, such as tenants in publicly subsidized housing, or any tenant with at least 1 child making no more than 125% of the federal poverty level. With this adjustment, St. Paul's coding with the new Minnesota law earned the city a Bronze medal, increased from no medal during the 2022 assessment. Minneapolis already earned a Bronze medal due to its city law.

St. Louis enacted a new law on July 12, 2023 that is credited during the 2023 assessment, earning the city a gold medal.

1. Each substantive amendment was redundantly coded; there were no divergences between the two coders.

There were non-substantive amendments to laws in Baltimore, Louisville, and Minneapolis. While the Louisville amendment dropped the child requirement, it maintained the 125% of the federal poverty level threshold, resulting in no medal change.

Following discussion with the subject matter expert, it was determined that Long Beach's temporary funding of a right to counsel with Los Angeles county should not be included within the scope of this datasets. New preemption laws in Texas and Florida were discussed, but it was determined that a right to counsel fell outside the scope of the preemption law, though we will be monitoring for any court decisions involving the scope of this provision.

VI. 2024 Assessment

a. **Updates:** For the 2024 assessment, 9 cities were amended, three of which (Lincoln, New York City, and Omaha) resulted in substantive coding changes. Only Omaha's substantive coding change resulted in a medal improvement from No Medal to Bronze. While the state of Nebraska added a new law that would also apply to the city of Lincoln, the provisions of this law only apply in "cities of the metropolitan class" according

to Neb. Rev. Stat. § 71-15,139. Nebraska law defines "cities of the metropolitan class" as those with a population of 400,000 inhabitants or more as of the most recent federal decennial census. Based on that census, Lincoln has a population of around 290,000 while Omaha has a population of around 480,000.

b. **Quality Control**: Four cities (Kansas City, Lincoln, New York City, and Omaha) were redundantly coded. The divergence rate was 9.8%. All divergences were discussed between the coders and reviewed by the CityHealth team and subject matter experts. These divergences were resolved accordingly.

c. **City Review Phase**: Following the completion of the research and coding, all 75 cities were contacted via one or more representatives to review the findings. All cities had two weeks to response and provide feedback or additional information. All feedback was discussed between Temple, CityHealth and the subject matter expert. If necessary, any coding changes were made.