



Collection of Sexual Orientation and Gender Identity Data:

FY21-22 Annual Report

August 2022



SAN FRANCISCO
HUMAN SERVICES AGENCY



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Background

San Francisco SOGI Data Collection Ordinance

The San Francisco Board of Supervisors passed the Collection of Sexual Orientation and Gender Identity Data Ordinance (Chapter 104 of the Administrative Code) on July 26, 2016. The ordinance accurately stated that while the City and County of San Francisco was committed to using data to identify the needs of San Franciscans and to evaluate its programs, many social services programs did not then collect sexual orientation and gender identity (SOGI) demographic information. An absence of SOGI data made it difficult to quantify the needs and well-being of the LGBTQ+ population; Chapter 104 has institutionalized SOGI data collection and makes it possible to perform analysis to guide the City's efforts to better serve LGBTQ+ San Franciscans.

California SOGI Data Collection Legislation

Roughly a year before San Francisco passed its SOGI data collection ordinance, the State of California passed an analogous law (Assembly Bill 959). The San Francisco Human Services Agency (HSA) is also subject to this state law, given that HSA administers programs under the purview of the covered departments of AB 959.

SOGI Data Collection at HSA

HSA is a large and complex agency comprised of multiple departments. The agency serves over two hundred fifty thousand San Franciscans across dozens of programs and roughly 400 contracts. HSA has an annual budget of over a billion dollars that combines federal, state and city/county funding streams.

The impetus for the SOGI data collection ordinance was a recommendation in a 2014 report from the San Francisco LGBT Aging Task Force, supported by HSA's Department of Disability and Aging Services (DAS) and the Human Right's Commission.

HSA enthusiastically supports the City's SOGI data collection ordinance and has committed significant resources to comply with it over the past six years. The complexity of the agency and the fact that SOGI data is collected across 100 programs and contracts and is stored in 11 different computer systems has translated to a heavy implementation lift. Even so, HSA has made great strides in improving the quality and completeness of its client SOGI demographic data. HSA views the data as a valuable resource for conducting LGBTQ+ equity analyses, as well as cross-sectional analyses that incorporate other dimensions of equity, such as racial equity.

FY21-22 Annual Report

The purpose of this report is to serve as HSA's FY21-22 annual report required by the San Francisco SOGI data collection ordinance. For each covered HSA program, this report includes the following:

- Tabulation of SOGI demographic data for clients served during FY21-22
- FY21-22 efforts to promote and/or improve SOGI data collection
- Data collection challenges, including those related to the COVID-19 pandemic
- Plans/strategies to improve data coverage and quality going forward

The most recent San Francisco City Survey (from 2019), sponsored by the Office of the Controller City Services Auditor, estimated that **12% of San Franciscans identify as LGBTQ+**¹. Directly comparing this community-wide estimate from an anonymous survey with the program-specific SOGI demographic data within this report is not straightforward. HSA's programs serve different sub-populations (e.g., based on income, age, disability status, presence of a child in the household, etc.), and the proportion of persons identifying as LGBTQ+ (or open to identifying as LGBTQ+) may differ across these sub-populations and programs. Still, this 12% overall benchmark provides useful context.

Before diving into the SOGI data, this report looks at HSA's commitment to using this type of information to design and target services and craft policies and procedures to champion LGBTQ+ equity and inclusion.

HSA Efforts to Promote LGBTQ+ Inclusion

HSA has taken numerous actions to address underrepresentation of LGBTQ+ clients in social services programs and to better serve the unique needs of LGBTQ+ communities. Below is a summary of these efforts, beginning with some initiatives to mitigate the impact of the COVID-19 pandemic on LGBTQ+ persons in San Francisco.

Description	Division
Funding for mental health telecare program serving LGBTQ+ older adults and HIV long term survivors. The program provides short term counseling and therapy services to individuals over 50 years of age who self-report serious depression, anxiety, and trauma related to the COVID-19 crisis, as well as providing technology support to enhance clients' digital literacy.	DAS COVID Response
Programming and social services for transgender and gender nonconforming (TGNC) older adults and TGNC adults with disabilities through contracts with Openhouse and Curry Senior Center. The focus is	DAS

¹ <https://sfcontroller.org/sites/default/files/Documents/Auditing/City%20Survey%202019%20-%20Report.pdf>

creating social connections, building community, and addressing unmet social service needs in a culturally competent and gender affirming environment.	
Completed the 2022 Dignity Fund Community Needs Assessment in April, which will inform DAS's work in the coming years to address the needs of older adults and people with disabilities, including the specific needs of LGBTQ+ individuals within this population. Feedback from consumers, service providers, and advocates informs the research findings and related recommendations for the Department.	DAS
Contracted with the SF LGBT Center to fund the Transgender Employment Program (TEP), aimed at creating inclusive workplaces and jobs for TGNC individuals through an array of employment and legal services.	ESSS
Partnered with Openhouse to offer their LGBTQ+ Aging Cultural Humility training to DAS service providers.	DAS
Continued to fund the Alzheimer's Association's LGBT Dementia Care Project, a suite of free trainings offered to health and social services providers.	DAS
Contracted with Legal Assistance to the Elderly to support their Legal and Life Planning Program for LGBTQ+ older adults and adults with disabilities, providing tailored services for end of life planning.	DAS
Provided funding for LGBTQ Care Navigation and Peer Support Programs for seniors and adults with disabilities at risk of isolation, through the Shanti Project.	DAS
Supported the Shanti Project's program to provide animal bonding services for isolated LGBTQ+ older adults and adults with disabilities.	DAS
Launched the LGBTQ+ Community Services Program through Steppingstone to provide cultural events, support groups, workshops, and other programs specifically designed for LGBTQ+ older adults and adults with disabilities at Adult Day Health Care (ADHC) centers throughout San Francisco.	DAS
Partnered with the San Francisco Office of Financial Empowerment to provide LGBTQ+ older adults and adults with disabilities with Smart Money Coaching, to help individuals manage their finances and achieve their financial goals.	DAS
Used the Mayor's Executive Directive on Gender Inclusivity guidelines to update forms and applications, and ensured these principles are woven into the LGBTQ+ inclusivity trainings across HSA.	HSA
Expanded review and revision of forms developed by child welfare partner agencies to ensure compliance with Mayor's Executive Directive on Gender Inclusivity.	FCS
Mandated SOGI training for all Resource Families on understanding, respecting, and supporting all LGBTQ+ youth involved in the child welfare system.	FCS

Disability and Aging Services Programs

The Department of Disability and Aging Services (DAS) is charged with coordinating services for older adults, veterans, people with disabilities, and their families to maximize safety, health, and independence. DAS serves approximately 70,000 San Franciscans each year and has been at the forefront of the City's efforts to collect SOGI data and better serve the needs of the LGBTQ+ community in San Francisco.

Adult Protective Services

The San Francisco Adult Protective Services (APS) program relies on masters-level social workers to investigate allegations of abuse among elders and adults with disabilities, collaborate with criminal justice partners, and conduct short-term intensive case management to facilitate service connections and help stabilize vulnerable individuals.

Below is the SOGI demographic data from the APS case management system (LEAPS). The SOGI questions have been asked and recorded for the majority of clients served during FY21-22. Sexual orientation data was collected for 60% of APS clients, of which 15% chose a response other than "Straight/Heterosexual". Gender identity data was collected for 97% of APS clients. Roughly 1.3% of clients identified as either transgender, gender non-binary or another gender identity besides female or male.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Questioning /Unsure	Straight/ Hetero- sexual	Not listed	Decline to answer	Not Asked	No Data	Grand Total	Total with Responses (first 5 columns)
Adult Protective Services	69	409	70	4,040	154	497	806	1,907	7,952	4,742
% of Grand Total	1%	5%	1%	51%	2%	6%	10%	24%	100%	60%
% of Total with Responses	1%	9%	1%	85%	3%					100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non-binary	Trans Female	Trans Male	Not listed, please specify	Declined/ Not stated	Not Asked	No Data	Grand Total	Total with Responses (first 6 columns)
Adult Protective Services	3,880	3,714	18	55	5	22	68	19	171	7,952	7,694
% of Grand Total	49%	47%	0.2%	0.7%	0.06%	0.3%	1%	0.2%	2%	100%	97%
% of Total with Responses	50%	48%	0.2%	0.7%	0.06%	0.3%					100%

The matrix below contains a summary of the APS' activities, challenges and future plans related to SOGI data collection.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> • SOGI information for APS clients is usually collected during the intake process. When that information has not been obtained, however, either because an intake was not completed or the questions were not logged in the system for any reason, APS protective service workers (PSWs) are trained to ask clients for their SOGI information when meeting them face-to-face.
Challenges	<ul style="list-style-type: none"> • During the first half of the year, still in the pandemic, APS conducted fewer face-to-face interviews, which reduced the client interview opportunities to ask SOGI questions. • Protective Service Worker staff (PSWs) report that some older adults do not want to share this information, and anecdotally, some clients state that they did not want their sexual orientation documented. • APS investigations can be considered invasive, and some PSWs report that asking clients uncomfortable questions which may be perceived as inconsequential can hamper rapport-building.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> • Continue implementation efforts of a policy for no in-person investigations to ask clients SOGI questions over the phone. • Invite the Manager of Diversity, Equity, Inclusion and Belonging (DEIB) to re-emphasize to APS staff the value of collecting SOGI data. • Send a reminder to staff, with a job aid, indicating areas for improvement, and empower unit supervisors to educate staff and oversee this effort.

In-Home Supportive Services

The In-Home Supportive Services (IHSS) Program is a statewide entitlement program for older adults and persons with disabilities to receive care in their homes rather than in nursing homes or board-and-care facilities. All California IHSS programs utilize a statewide application form (SOC 295) and database (CMIPS II) to collect and store SOGI demographic data.

Below is the SOGI data from the IHSS case management system (CMIPS II) for clients served during the most recent fiscal year. Of IHSS clients served during FY21-22, sexual orientation and gender identity data is available for 86% and 93% of clients, respectively. Of clients reporting their sexual orientation, 97% reported being straight or heterosexual. Of clients reporting their gender identity, almost half a percent identified as transgender or a gender identity not listed.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Questioning /Unsure	Straight/ Hetero- sexual	Not listed, please specify	Declined to answer	Not Asked	No Data	Grand Total	Total with Responses (first 5 columns)
IHSS	161	498	-	23,243	67	2,099	-	1,747	27,815	23,969
% of Grand Total	0.6%	2%	0%	84%	0.2%	8%	0%	6%	100%	86%
% of Total with Responses	1%	2%	0%	97%	0.3%					100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non-binary	Trans Female	Trans Male	Not listed, please specify	Declined/ Not stated	Not Asked	No Data	Grand Total	Total with Responses (first 6 columns)
IHSS	15,388	10,333	12	82	15	10	514	-	1,461	27,815	25,840
% of Grand Total	55%	37%	0.04%	0.3%	0.05%	0.04%	2%	0%	5%	100%	93%
% of Total with Responses	60%	40%	0.05%	0.3%	0.06%	0.04%					100%

The matrix below summarizes the status of SOGI data collection within San Francisco’s IHSS Program.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> In comparison to the FY2020-2021, the IHSS SOGI collection rate increased 1% to reach about 95% of recipients in spite of the challenges during the COVID period in the FY2021-2022. IHSS unit supervisors continue to check for complete SOGI information before approving cases. The IHSS Quality Assurance (QA) unit samples cases and monitors the types of errors in assessments, including SOGI demographics
Challenges	<ul style="list-style-type: none"> SOGI errors, due to incomplete or inconsistent information inputted by staff, remain in the top ten errors discovered by our QA team, though most are corrected once caught The majority of SOGI data is collected via phone assessment during the COVID-19 pandemic. The lack of face-to-face communication increases the difficulty of asking the sensitive SOGI questions, which raises the error rate of SOGI data collection, especially for those clients with hearing disabilities.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> The program will continue to remind social workers and supervisors to double-check assessments, especially new ones, for SOGI data collection before submitting them. IHSS QA staff will provide social workers with technical assistance and training to reduce errors in assessments, including SOGI data collection.

Public Guardian, Public Conservator, and Representative Payee

The Office of the **Public Guardian** (PG) supports people whose physical and mental limitations make them unable to handle basic personal and financial needs. Public Guardian

staff are responsible for managing medical care, placement, and financial resources. The Office of the **Public Conservator** (PC) provides mental health conservatorship services for San Francisco residents who are gravely disabled (unable to provide for their food, clothing or shelter) due to serious mental illness and who have been found by the Court unable or unwilling to accept voluntary treatment. The **Representative Payee** (RP) program provides money management services in collaboration with community-based case managers. This program was developed to support high-risk, vulnerable clients who do not require a full conservatorship but require a moderate level of financial support.

Below is the data from the case management system (Panoramic) used by PG, PC, and RP. Because PG, PC, and RP clients often face incapacitation issues, it is challenging to collect SOGI data for these programs, especially since SOGI information must be self-reported, according to best practices. Of clients reporting their sexual orientation across the three programs, roughly 10% identify as gay, bisexual, questioning or another identify other than straight/heterosexual. Less than one percent of clients report a gender identify other than male or female.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Questionin g/Unsure	Straight/ Hetero- sexual	Another Sexual Orientat ion	Decline to answer	Not Asked	No Data	Grand Total	Total with Responses (first 5 columns)
Public Guardian	1	20	-	200	4	-	-	144	369	225
% of Grand Total	0%	5%	0%	54%	1%	0%	0%	39%	100%	61%
% of Total with Responses	0%	9%	0%	89%	2%					100%
Public Conservator	17	18	-	492	9	-	-	238	774	536
% of Grand Total	2%	2%	0%	64%	1%	0%	0%	31%	100%	69%
% of Total with Responses	3%	3%	0%	92%	2%					100%
Representative Payee	9	12	-	309	7	-	-	736	1,073	337
% of Grand Total	1%	1%	0.0%	29%	1%	0%	0%	69%	100%	31%
% of Total with Responses	3%	4%	0%	92%	2%					100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non- binary	Trans Female	Trans Male	Another Gender Identity	Declined / Not Stated	Not Asked	No Data	Grand Total	Total with Responses (first 6 columns)
Public Guardian	129	163	-	-	-	1	76	-	-	369	293
% of Grand Total	35%	44%	0%	0.0%	0%	0%	21%	0.0%	0%	100%	79%
% of Total with Responses	44%	56%	0%	0.0%	0%	0%					100%
Public Conservator	277	480	3	3	2	-	9	-	-	774	765
% of Grand Total	36%	62%	0.4%	0.4%	0.3%	0%	1%	0.0%	0.0%	100%	99%
% of Total with Responses	36%	63%	0.4%	0.4%	0.3%	0%					100%
Representative Payee	381	673	1	3	2	1	12	-	-	1,073	1,061
% of Grand Total	36%	63%	0.1%	0.3%	0.2%	0.1%	1.1%	0%	0%	100%	99%
% of Total with Responses	36%	63%	0.1%	0.3%	0.2%	0.1%					100%

The matrix below contains a summary of activities, challenges and future plans related to SOGI data collection within PG, PC and RP.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> PG staff completed SOGI data collection training in 2019/2020 and gathered data from clients from that point forward. The PG referral intake form requests all SOGI fields be completed. PC staff completed training in 2018/2019 and gathered data from clients from that point forward. The PC referral intake form requests all SOGI fields be completed. The RP referral form has been changed to reflect all SOGI fields.
Challenges	<ul style="list-style-type: none"> Some clients in the PG program were not asked SOGI questions, as the deputy assessed that asking would gather a nil or negative response or may cause distress. Some clients in the PC program were not asked SOGI questions, as the clinician assessed that asking would gather a nil or negative response or may cause distress. The RP program has delayed focus on the completion of SOGI fields due to personnel vacancies and COVID. RP has no direct contact with clients so gathering the information will be through non DAS agency case managers.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> PG and PC developed a quarterly report to monitor the SOGI data fields and maintain completion standards. The data collection process for SOGI is now operational.

DAS Intake

DAS Intake, which operates the DAS Benefits and Resource Hub phone helpline and drop-in service center at 2 Gough, was established in 2008 to streamline access to social services and maximize service connections. Through a single call, seniors and adults with disabilities are able to learn about available services throughout the city and also apply for several DAS services. DAS's community-based partner network of Aging and Disability Resource Centers (ADRCs) extend the Department's reach into the community, with sites located in each of the city's 11 supervisorial districts. Like the DAS Hub, ADRCs serve as one-stop shops for information and assistance about services for seniors and younger adults with disabilities.

Below is the data on information and referral contacts from the case management system (SF GetCare) used by DAS Intake and ADRC providers. DAS Intake's SOGI data is limited due to the fact that many clients decline to provide any information when calling for information that does not lead to a program intake. The percentage of clients identifying with a sexual orientation other than straight or heterosexual for both the ADRCs and DAS Intake is about 5%. The percentage of ADRC and DAS Intake clients reporting a gender identity other than male or female is 0.6% and 0.3%, respectively.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Questioning /Unsure	Straight/ Hetero- sexual	Not listed	Decline to answer	Not Asked	No Data	Grand Total	Total with Responses (first 5 columns)
Aging & Disability Resource Centers	95	402	3	11,917	-	571	1,091	114	14,193	12,417
% of Grand Total	1%	3%	0%	84%	0%	4%	8%	1%	100%	87%
% of Total with Responses	1%	3%	0%	96%	0%					100%
DAS Intake - Information & Referral	37	195	13	4,255	-	2,816	1,242	439	8,997	4,500
% of Grand Total	0.4%	2%	0.1%	47%	0%	31%	14%	5%	100%	50%
% of Total with Responses	1%	4%	0.3%	95%	0%					100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non- binary	Trans Female	Trans Male	Not listed, please specify	Declined/ Not stated	Not Asked	No Data	Grand Total	Total with Responses (first 6 columns)
Aging & Disability Resource Centers	8,393	5,492	26	46	15	-	89	128	4	14,193	13,972
% of Grand Total	59%	39%	0.2%	0.3%	0.1%	0%	1%	0.90%	0.0%	100%	98%
% of Total with Responses	60%	39%	0.2%	0.3%	0.1%	0%					100%
DAS Intake - Information & Referral	5,204	3,482	6	16	6	-	196	85	2	8,997	8,714
% of Grand Total	58%	39%	0.1%	0.2%	0.1%	0%	2%	1%	0.02%	100%	97%
% of Total with Responses	60%	40%	0.1%	0.2%	0.1%	0%					100%

The following matrix contains a summary of Integrated Intake's SOGI data collection efforts and issues.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> Staff training on SOGI data collection and an ongoing discussion with intake staff on gathering SOGI information to better serve LGBTQ+ Older Adults and Adults with Disabilities.
Challenges	<ul style="list-style-type: none"> DAS Intake staff continue to express challenges in collecting data on information and referral calls when consumers only want specific information on services and are reluctant to provide any identifying information. When presented with an opportunity for a follow-up call, intake staff make attempts to gather more demographic information, including SOGI. Language challenges with SOGI questions. Some intake staff expressed having difficulties reviewing questions with older adults in their native language.

Plans/Strategies to Improve Data Coverage and Quality Going Forward

- Supervisors will review SOGI data collection and address reasons for missing information with intake staff in monthly supervision to better understand limitations and skill building techniques to improve staff comfort level.
- DAS Intake manager will provide a quarterly report on SOGI questions and review progress and areas of improvement with intake staff & supervisors.
- Provide a refresher SOGI training for DAS Intake staff and supervisors.

Community Living Fund

The Community Living Fund (CLF) program is focused on preventing unnecessary institutionalization of older adults and adults with disabilities and helping those currently institutionalized transition back to the community if that is their preference. CLF is part of DAS' Office of Community Partnerships and services are provided via a contract with the Institute on Aging.

Below is the data from the case management system used to track CLF clients (CLF CaseCare). The Institute on Aging has excelled at collecting SOGI data, with very few clients in the "Not Asked" or "No Data" categories. Of clients responding to the sexual orientation questions, 13% designated an LGBTQ+ identity. For the gender identify question, 1.2% of clients identified as transgender, gender queer, or non-binary, and the remaining clients identified as either female or male.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Questioning /Unsure	Straight/ Hetero- sexual	Not listed, please specify	Declined to answer	Not Asked	No Data	Grand Total	Total with Responses (first 5 columns)
Community Living Fund	7	22	-	208	1	6	4	8	256	238
% of Grand Total	3%	9%	0%	81%	0%	2%	2%	3%	100%	93%
% of Total with Responses	3%	9%	0%	87%	0%					100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non- binary	Trans Female	Trans Male	Not listed, please specify	Declined/ Not stated	Not Asked	No Data	Grand Total	Total with Responses (first 6 columns)
Community Living Fund	104	146	-	1	2	-	-	-	3	256	253
% of Grand Total	41%	57%	0%	0%	0.8%	0%	0%	0%	1.2%	100%	98.8%
% of Total with Responses	41%	58%	0%	0%	0.8%	0%					100%

The matrix below contains a summary of the Community Living Fund's activities, challenges and future plans related to SOGI data collection.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> • Incorporate updates in SOGI data collection in program policy and procedures. • Continue ongoing training on SOGI data collection.
Challenges	<ul style="list-style-type: none"> • Barriers due to cultural sensitivity and/or language. • Barriers related to data collection over the phone or virtually when in-person assessment is not feasible.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> • Continue ongoing monitoring and quality assurance reviews to ensure consistent data collection. • Making multiple attempts to collect data when missed at initial assessment, including during scheduled contacts or at reassessments. • Use data to monitor success in LGBTQ+ outreach and to create new outreach strategies for this target population.

Clinical Quality & Improvement Unit

The Clinical and Quality Improvement (CQI) unit was created in 2015 to support DAS programs in addressing the needs of clients with complex healthcare and nursing needs. There are four CQI Registered Nurses (RN) and one Nurse Manager. The CQI RN provides nursing consultations and health education to assist DAS social workers in meeting the needs of their clients. During the COVID-19 pandemic, the nurses consulted with other programs regarding infection and exposure control guidelines and trainings to meet the City’s goals of protecting the most vulnerable, protecting workers, and mitigating the risks of exposure to COVID-19.

Below is the SOGI data from CQI’s web application (Devero). The distribution of data indicates that CQI’s SOGI collection rate is very high. Around 11% of clients identify with an LGBTQ+ sexual orientation. Roughly 1.3% of clients identify as transgender, gender-queer, or gender non-binary, and the remaining identify as female or male.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Questioning /Unsure	Straight/ Hetero- sexual	Not listed, please specify	Declined to answer	Not Asked	No Data	Grand Total	Total with Responses (first 5 columns)
Clinical Quality & Improvement	17	28	3	549	20	44	2	24	687	617
% of Grand Total	2%	4%	0.4%	80%	3%	6%	0%	3%	100%	90%
% of Total with Responses	3%	5%	0.5%	89%	3%					100%

GENDER IDENTITY

Program	Female	Male	Gender-queer/ Gender Non-binary	Trans Female	Trans Male	Not listed, please specify	Declined/Not stated	Not Asked	No Data	Grand Total	Total with Responses (first 6 columns)
Clinical Quality & Improvement	316	357	-	9	-	-	2	-	3	687	682
% of Grand Total	46%	52%	0%	1%	0%	0%	0%	0%	0.4%	100%	99%
% of Total with Responses	46%	52%	0%	1%	0%	0%					100%

The following matrix contains a summary of activities, challenges and plans related to SOGI data collection within CQI.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> • SOGI data collection is integrated into the CQI referral submission process. • A new and improved CQI documentation system has been approved and is under development through JUMP Technologies. • Within the new CQI documentation system, SOGI data collection will be a requirement during the referral submission process.
Challenges	<ul style="list-style-type: none"> • During the first year of the COVID-19 pandemic, CQI pivoted to conducting IHSS initial nursing assessments over the phone. During FY21-22, in-person assessments started to resume. However, SOGI data collection remains a challenge whenever CQI nurses are unable to assess the client in person.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> • Actively collect data from clients and referents when data is missing on CQI referral forms. • Implement quarterly audits of SOGI data in the database. • Implement standardized SOGI policy and procedures across programs.

Office of Community Partnerships

The Office of Community Partnerships (OCP) facilitates the provision of almost all DAS-funded community-based services, including those supported by Dignity Fund and Older Americans Act funding. The Dignity Fund was passed by voters in 2016, guaranteeing funding to enhance supportive services to help older adults (60+ years old) and adults with disabilities (18 – 59 years old) age with dignity in their own homes and communities.

Below is the SOGI data pulled from CA GetCare, the system used to support OCP, including Dignity Fund initiatives. The data represents an unduplicated count of clients across all of the individual programs. Overall, around 7% of clients identify with a sexual orientation other than straight or heterosexual. About half a percent of all clients identify as transgender or gender non-binary. The SOGI data for the individual OCP programs can be found on the following two pages.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Questioning /Unsure	Straight/ Hetero- sexual	Not listed, please specify	Declined to answer	Not Asked	No Data	Grand Total	Total with Responses (first 5 columns)
Office of Community Partnerships	404	1,261	80	31,098	164	3,556	200	2,384	39,147	33,007
% of Grand Total	1%	3%	0.2%	79%	0.4%	9%	0.5%	6%	100%	84%
% of Total with Responses	1%	4%	0.2%	94%	0.5%					100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non- binary	Trans Female	Trans Male	Not listed, please specify	Declined/ Not stated	Not Asked	No Data	Grand Total	Total with Responses (first 6 columns)
Office of Community Partnerships	22,033	15,366	27	132	51	4	315	1	1,218	39,147	37,613
% of Grand Total	56%	39%	0.1%	0.3%	0.1%	0.01%	1%	0%	3%	100%	96%
% of Total with Responses	59%	41%	0.1%	0.4%	0.1%	0.01%					100%

SEXUAL ORIENTATION

Program	Bisexual	Gay/Lesbian/ Same-Gender Loving	Questioning / Unsure	Straight/ Hetero- sexual	Not listed, please specify	Declined to answer	Not Asked	No Data	Grand Total
Adult Day Programs	1	6	-	146	-	6	2	4	165
Case Management	21	108	5	988	7	52	26	55	1,261
Community Ambassador	-	-	-	-	-	1	-	3	4
Community Connector	3	9	-	179	1	34	2	97	325
Community Liaisons	-	-	-	4	-	-	-	-	4
Community Service Program Pilot	10	54	1	454	5	153	4	138	819
Community Services	116	455	16	11,800	43	935	50	778	14,193
Congregate Meals	35	102	8	2,085	9	340	6	60	2,645
Employment Services	5	17	1	65	2	20	1	68	179
Empowerment Programs	3	12	-	120	2	26	2	154	319
Family Caregiver Support Program (FCSP)	6	15	-	526	2	47	4	56	656
FCSP (Grandparent)	-	-	-	25	-	-	-	11	36
Financial Literacy	2	11	2	12	6	3	-	1	37
Food Assistance	18	24	4	2,998	26	510	1	66	3,646
Home-Delivered Groceries	38	120	10	3,404	23	331	58	181	4,165
Home-Delivered Meals	202	501	38	17,808	76	1,796	82	450	20,953
Health Promotion (Physical Fitness)	7	34	-	480	-	38	1	4	564
Housing Subsidy	14	49	6	336	1	22	2	16	446
Intergenerational Programs	10	92	4	532	3	55	2	56	754
LGBT Care Navigation	23	138	5	131	13	20	-	86	416
Mental Health Support Services	4	11	3	24	-	4	-	17	63
Money Management	2	6	-	124	-	14	-	10	156
Naturalization	1	-	-	39	-	2	-	2	44
Neighborhood Choir	3	13	-	156	-	16	-	30	218
Neighborhood-Based Pilot	2	12	1	520	-	55	2	64	656
Nutrition & Supportive Services	17	44	3	462	4	24	3	4	561
Nutrition Counseling	23	148	8	1,580	6	57	10	37	1,869
Nutrition Education	2	8	4	856	1	87	3	7	968
Respite Care	3	3	-	172	-	16	-	11	205
Senior Companion	-	1	-	11	-	-	-	1	13
SF Connected	30	46	4	1,495	6	270	6	289	2,145
Short-Term Home Care	1	14	-	163	-	11	2	21	212
Technology at Home	1	13	-	70	-	2	2	1	89
Transgender and Gender Non-Conforming Supports	9	22	1	32	4	2	-	6	76
Transportation (Taxi Vouchers)	1	1	-	27	1	3	-	7	40
Veterans Service Connect	5	19	2	242	3	54	4	18	347
Village Programs	6	45	1	619	3	101	2	165	942
Volunteer Visitor	1	8	1	61	-	6	1	18	96
Unduplicated Client Count	407	1,305	83	31,561	170	3,627	203	2,554	39,908

GENDER IDENTITY

Program	Male	Female	Genderqueer/ Gender Non- binary	Trans Female	Trans Male	Not listed, please specify	Declined/ Not stated	Not Asked	No Data	Grand Total
Adult Day Programs	53	109	-	1	-	-	-	-	2	165
Case Management	586	656	4	10	2	-	1	-	3	1,261
Community Ambassador	1	-	-	-	-	-	-	-	3	4
Community Connector	54	160	-	-	1	-	20	-	90	325
Community Liaisons	1	3	-	-	-	-	-	-	-	4
Community Service Program Pilot	157	472	2	3	-	-	75	-	110	819
Community Services	5,131	8,615	13	42	17	1	51	-	323	14,193
Congregate Meals	1,350	1,220	7	4	10	-	23	-	31	2,645
Employment Services	52	73	1	-	-	-	3	-	50	179
Empowerment Programs	95	117	-	-	1	1	3	-	102	319
Family Caregiver Support Program (FCSP)	157	458	-	2	-	-	4	-	35	656
FCSP (Grandparent)	2	27	-	-	-	-	-	-	7	36
Financial Literacy	11	15	5	4	1	-	-	-	1	37
Food Assistance	1,061	2,539	-	3	4	-	7	-	33	3,646
Home-Delivered Groceries	1,418	2,656	5	12	4	1	8	1	60	4,165
Home-Delivered Meals	9,342	11,235	9	56	23	2	124	-	162	20,953
Health Promotion (Physical Fitness)	97	465	1	-	1	-	-	-	-	564
Housing Subsidy	212	214	1	7	1	-	1	-	10	446
Intergenerational Programs	255	474	-	5	1	-	2	-	17	754
LGBT Care Navigation	172	152	2	19	6	-	-	-	65	416
Mental Health Support Services	20	31	2	-	-	-	6	-	4	63
Money Management	102	45	-	2	-	-	-	-	7	156
Naturalization	13	30	-	-	-	-	-	-	1	44
Neighborhood Choir	30	165	1	-	-	-	1	-	21	218
Neighborhood-Based Pilot	140	471	-	-	-	-	8	-	37	656
Nutrition & Supportive Services	334	216	1	9	1	-	-	-	-	561
Nutrition Counseling	1,015	838	-	14	2	-	-	-	-	1,869
Nutrition Education	315	650	-	1	-	-	2	-	-	968
Respite Care	39	161	-	-	-	-	3	-	2	205
Senior Companion	7	6	-	-	-	-	-	-	-	13
SF Connected	607	1,314	2	2	1	-	43	-	177	2,145
Short-Term Home Care	75	126	-	-	-	-	-	-	11	212
Technology at Home	36	52	-	1	-	-	-	-	-	89
Transgender and Gender Non- Conforming Supports	6	11	4	47	3	-	1	-	4	76
Transportation (Taxi Vouchers)	12	23	-	-	-	-	-	-	5	40
Veterans Service Connect	316	15	1	2	3	-	-	-	10	347
Village Programs	212	645	-	-	-	-	9	-	76	942
Volunteer Visitor	29	59	-	-	-	-	1	-	7	96
Unduplicated Client Count	15,630	22,402	34	150	53	4	323	1	1,313	39,908

The following matrix contains a summary of efforts and challenges related to SOGI data collection across OCP programs.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> Data collection of SOGI information is a routine part of demographic information collection upon intake in community programs. SOGI data collection is part of staff induction trainings upon hire.
Challenges	<ul style="list-style-type: none"> All demographic data collection points have been challenging as the COVID-19 pandemic continues. Face-to-face opportunities to meet with clients and collect SOGI data have been limited or non-existent. As restrictions and limitations ease, and client comfort levels improve, in-person opportunities will increase.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> Community partners are encouraged to review demographic data collection, including SOGI, to ensure compliance and provide training or re-training to staff as indicated. Program analysts review semi-annual SOGI reports for compliance and provide technical assistance as indicated. SOGI data was a factor in examining equity and service gaps in recently completed Community Needs Assessment. The California Department of Aging recently granted a request to allow DAS to use discretion in collection of the “sex at birth” question. Office of Community Partnerships will move to implement removing this question from the demographic information collection. OCP Director will issue a memo to community partners explaining this change. Standardized intake forms will be updated. OCP is currently in process of a database update with the software provider, and will work with them to either disable or remove “sex at birth” question. This request from OCP is reflective of the current best practice to eliminate this question from the SOGI demographic data collection.

County Veterans Services Office

The County Veterans Service Office (CVSO) is a locally-funded unit that assists veterans and their families in obtaining benefits and services accrued through military service. To help connect veterans to service benefits, the CVSO works cooperatively with other organizations serving veterans such as the U.S. Department of Veterans Affairs (USDVA) benefits, California Department of Veterans Affairs, USDVA Medical Facilities, the California Employment Development Department, county and state mental health departments, and the county Social Service Department.

Below is the SOGI data from VetPro Panoramic (the system used to track CVSO clients). The CVSO has done a good job of collecting the gender-related SOGI data, and while it is missing sexual orientation data for 45% of its clients, that is 10 percentage points more than the prior

year. The matrix below the data describes some of the challenges the CVSO faces related to SOGI data collection.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Questioning /Unsure	Straight/ Hetero- sexual	Not listed, please specify	Declined to answer	Not Asked	No Data	Grand Total	Total with Responses (first 5 columns)
County Veterans Services Office	6	26	4	1,277	4	22	68	983	2,390	1,317
% of Grand Total	0.3%	1%	0%	53%	0.2%	1%	3%	41%	100%	55%
% of Total with Responses	0.5%	2%	0%	97%	0.3%					100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non-binary	Trans Female	Trans Male	Not listed, please specify	Declined/ Not stated	Not Asked	No Data	Grand Total	Total with Responses (first 6 columns)
County Veterans Services Office	161	1,741	-	2	1	4	4	150	327	2,390	1,909
% of Grand Total	7%	73%	0%	0.1%	0%	0.17%	0.2%	6%	14%	100%	80%
% of Total with Responses	8%	91%	0%	0.1%	0.1%	0.2%					100%

The following matrix contains a summary of efforts and challenges related to SOGI data collection within the CVSO.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> All CVSO personnel, including veterans service representatives and administrative clerks are trained to collect SOGI information from clients. Staff are mandated to collect information from veterans during in-person and phone interviews. CVSO efforts to build capacity and training have resulted in significant increases in data collection rates.
Challenges	<ul style="list-style-type: none"> CVSO veteran representatives often see repeat clients for whom demographic data has already been collected prior to the development of SOGI data fields. CVSO staff do not always have the opportunity to collect or update self-reported SOGI information, as not all client services are in-person or over the phone. For example, some records are shared by USDVA as read-only, preventing CVSO staff from updating or modifying the SOGI information. Verification forms from other benefits programs seeking to verify VA benefits often do not provide demographic data. Veteran clients sometimes express fear/frustration/confusion/anger in response to SOGI data collection efforts, despite staff assurances regarding the purpose of SOGI data collection and clients' ongoing access to benefits. Many clients regard these questions as offensive. Technical challenges in extracting existing SOGI data from the database vendor for reporting and aggregate analysis.

Plans/Strategies to Improve Data Coverage and Quality Going Forward

- Interim SOGI monitoring for data completion and quality assurance.
- Encourage staff to take annual SOGI training. Send twice yearly reminders to staff of importance of collecting SOGI information at earliest opportunity to directly engage with clients. Build on strategies to equip staff to politely and efficiently solicit SOGI information.
- Work with Veterans Affairs Commission to educate veterans on the relevance of SOGI data.
- Work with VA Medical Center to record SOGI data.
- Work with Swords to Plowshares to record Prop 63 SOGI data.
- Work with California Association of CVSOs to educate veterans on the relevance of SOGI data collection.
- Ongoing training and monitoring of staff to ensure compliance with SOGI data collection standards, especially to address persistent challenges in client relations with respect to SOGI.

BFS Economic Support & Self-Sufficiency Programs

HSA's Department of Human Services was renamed the Department of Benefits and Family Support (BFS) last fiscal year. BFS' Economic Support & Self-Sufficiency (ESSS) Division operates the core social services programs of county welfare departments: CalWORKs (cash aid and employment services for families), CalFresh (food assistance), Medi-Cal (Medicaid health insurance), and CAAP (cash aid and employment services for single adults). Together these programs serve over 240,000 San Franciscans annually. ESSS uses the CalWIN case management information system to administer these programs. CalWIN is jointly funded and managed by a consortium of 18 California counties, so San Francisco cannot add or change fields on their own. Because of the California SOGI data collection law, CalWIN added SOGI fields in 2018. There is no option to indicate whether a client declined to answer the SOGI questions versus not being asked. The California Department of Social Services (CDSS) developed a form/questionnaire for collecting SOGI data in 2019. However, there are many pathways for applying for these public benefits and in some cases there is no verbal interaction with a case/social worker. Similarly, some clients are not required to interview with county staff as part of the renewal process to continue receiving benefits. These factors mean that some new and pre-existing clients are not directly asked the SOGI questions, which has resulted in overall lower data coverage across the ESSS programs. The programs endeavor to gather SOGI information for the majority of clients and continue to look for ways of increasing SOGI demographic data coverage over time.

CalWORKs

CalWORKs provides temporary financial support, as well as job training, education, child care, and counseling, to pregnant women and eligible families with children under age 19. The CalWORKs program uses a state SOGI demographic questionnaire (CW2223) designed by CDSS. CDSS directs county welfare departments to provide their optional SOGI questionnaire to adults present during the intake interview. Copies of the optional questionnaire are also included in the annual renewal packets.

The data below is for all adults aided on CalWORKs during FY21-22. Around half of all adult clients have provided SOGI demographic information. Only 4% of clients who responded report a sexual orientation other than straight or heterosexual. Looking at the gender identity data, about six-tenths of a percent of CalWORKs clients have identified as gender non-binary or another gender identity other than male or female.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Straight/ Hetero- sexual	Another Sexual Orientation	Unknown	No Data	Grand Total	Total with Responses (first 4 columns)
CalWORKs	42	17	1,590	5	57	1,596	3,307	1,654
% of Grand Total	1%	0.5%	48%	0.2%	2%	48%	100%	50%
% of Total with Responses	3%	1%	96%	0.3%				100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non- binary	Trans Female	Trans Male	Another Gender Identity	No Data	Grand Total	Total with Responses (first 6 columns)
CalWORKs	1,519	251	8	-	-	2	1,527	3,307	1,780
% of Grand Total	46%	8%	0.2%	0%	0%	0%	46%	100%	54%
% of Total with Responses	85%	14%	0.45%	0%	0%	0.11%			100%

The matrix below describes efforts of the CalWORKs program to collect SOGI demographic data.

FY21-22 Efforts to Promote/Improve SOGI Data Collection

- CalWORKs continues to provide SOGI training during induction & in-service trainings.
- The CW2223 State SOGI form is included in all intake and annual renewal packets.

Challenges	<ul style="list-style-type: none"> • Eligibility workers are required to gather a huge amount of sensitive data as part of CalWORKs eligibility determination. Therefore, it is to be expected that many clients get fatigued from answering so many questions and decline to fill out the optional SOGI questionnaire. • Since the pandemic, CalWORKs has been able to conduct intake interviews by phone rather than mandating face-to-face, adding yet another layer of complexity to the already lengthy interview process and likely causing more clients to decline answering optional SOGI questions. • Some clients express discomfort answering the SOGI questions, and stated that asking about sexual orientation and gender identify is too personal and/or an inappropriate question.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> • Discuss SOGI data collection at section and unit meetings as well as online virtual meetings with Staff. • Require supervisors to review SOGI data collection protocols quarterly with their staff to hear challenges faced by staff directly so they can offer guidance.

SF BenefitsNet: CalFresh and Medi-Cal

Low-income individuals and families use CalFresh to purchase food at many retail food outlets, grocery stores, and farmers' markets. Medi-Cal provides free or low-cost health insurance for eligible individuals and comes with a range of health benefits and services. The CalFresh and Medi-Cal programs are jointly administered under a division called SF BenefitsNet (SFBN). These programs are overseen by two separate agencies at the state level; both parent agencies require counties to collect SOGI data, but prescribe different tools and methods. CalFresh is required to use the same state SOGI demographics questionnaire as CalWORKs (CW2223). This optional questionnaire is given to all adults present at the Intake interview and included in renewal packets. When supporting clients applying for Medi-Cal, our eligibility staff asks adults the SOGI questions (in-person or over the phone). However, most Medi-Cal eligibility determinations do not require an interview or in-person intake with HSA staff. Therefore, there is limited opportunity to collect SOGI data.

The data below is for all adults aided on CalFresh and Medi-Cal during FY21-22. Roughly 36% of CalFresh adult client records contain SOGI demographic data, while around 24% of adult Medi-Cal client records contain SOGI data. Medi-Cal will likely continue to have a lower coverage rate than CalFresh, due in part to the paper mail-in applications and automatic renewal processes described in the previous paragraph. Around 9% of CalFresh clients and 8% of Medi-Cal clients who responded to the sexual orientation question, indicated an LGBTQ+ identity. Approximately 1% of both CalFresh and Medi-Cal clients providing gender identity information identified as non-binary, transgender or another gender identity besides female or male.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Straight / Hetero- sexual	Not listed, please specify	Unknown	No Data	Grand Total	Total with Responses (first 4 columns)
CalFresh	670	1,498	22,537	122	1,864	46,293	72,984	24,827
% of Grand Total	1%	2%	31%	0.2%	3%	63%	100%	34%
% of Total with Responses	3%	6%	91%	0.5%				100%
Medi-Cal	849	1,813	34,210	146	2,338	130,176	169,532	37,018
% of Grand Total	0.5%	1%	20%	0.1%	1%	77%	100%	22%
% of Total with Responses	2%	5%	92%	0.4%				100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non-binary	Trans Female	Trans Male	Not listed, please specify	No Data	Grand Total	Total with Responses (first 6 columns)
CalFresh	13,681	13,949	143	102	31	26	45,052	72,984	27,932
% of Grand Total	19%	19%	0.2%	0.1%	0.04%	0.04%	62%	100%	38%
% of Total with Responses	49%	50%	0.5%	0.4%	0.1%	0.1%			100%
Medi-Cal	21,242	19,395	171	135	50	45	124,494	165,532	41,038
% of Grand Total	13%	12%	0.1%	0.1%	0.03%	0.03%	75%	100%	25%
% of Total with Responses	76%	69%	0.6%	0.5%	0.2%	0.2%			147%

The matrix summarizes the efforts, challenges and strategies related to SOGI data collection within SFBN.

FY21-22 Efforts to Promote/Improve SOGI Data Collection

- Issue periodic SOGI reminders via the weekly supervisor forum meetings, and in bi-weekly newsletters. Supervisors convey this information to eligibility staff via unit meetings.
- Medi-Cal and CalFresh intake packets include SOGI CW 2223 form. Intake packets are issued to all Medi-Cal and CalFresh applicants.
- Medi-Cal (cases not automatically renewed) and CalFresh renewal packets now include SOGI CalWORKs 2223 form. CalFresh renewal packets are mailed to all households due for a renewal.
- Covered California online application portal now includes SOGI questions.
- MyBenefitsCalWIN online benefits portal now includes SOGI questions.

<p>Challenges</p>	<ul style="list-style-type: none"> • California Department of Healthcare Services has not modified the state Medi-Cal paper application to include SOGI questions. • California Department of Social Services has not modified the state CalFresh paper applications to include SOGI questions. • In person/phone applications are usually made by one adult household member, which means other adults are not asked to provide voluntary SOGI information. • In alignment with Medi-Cal policy, a significant percentage of Medi-Cal renewals are done following an automated path, with no client contact, and thus no opportunity to collect SOGI information. Additionally, due to the COVID-19 pandemic, Medi-Cal renewals continue to be in suspended status. • Due to the COVID-19 Pandemic, the CalFresh interview requirement was waived for most households on applications and renewals, and as a result, a significant percentage were processed without a telephone or face-to-face contact. • There is no CalWIN functionality that allows the EW to record when an applicant/recipient declines to provide information. • GetCalFresh.org, a widely used online CalFresh application site, limits gender identity options to male or female. • With new telephonic recording technology clients are advised when calling our service center that the full conversation is recorded; clients may be more hesitant to provide information if there is a voice recording of their answers.
<p>Plans/Strategies to Improve Data Coverage and Quality Going Forward</p>	<ul style="list-style-type: none"> • Continue to provide periodic SOGI reminders via supervisor forum meetings, and bi-weekly newsletters. • Request SOGI training from Human Resources Learning and Organizational Development unit and require staff attendance. • Conduct a SOGI refresher training for all staff, and develop an on-demand SOGI training video. • Implement new call service center business process to require eligibility workers to attempt to obtain SOGI information whenever a client contacts the county and SOGI information is blank. • Add eligibility worker compliance to the collection of SOGI information as a standard component to quality assurance case reviews and phone call reviews.

County Adult Assistance Program

The County Adult Assistance Program (CAAP) provide cash assistance to low-income adults without dependent children, adults that cannot work, and refugees. CAAP clients are required to also apply for both CalFresh and Medi-Cal, so their SOGI demographic data is generally collected by the SFBN program procedures (described in previous section of this

report). CAAP eligibility workers have been trained to update the SOGI demographic fields during the application or renewal process.

Below is the SOGI data for all CAAP clients active during FY21-22. Around two-thirds of CAAP client records contain SOGI demographic data. Of clients with SOGI data, around 11% identified with an LGBTQ+ sexual orientation and about 1.4% reported their gender identity as non-binary, transgender, or another gender identity other than male or female.

SEXUAL ORIENTATION

Program	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Straight/ Hetero- sexual	Another Sexual Orientation	Unknown	No Data	Grand Total	Total with Responses (first 4 columns)
CAAP	182	334	4,190	21	415	3,059	8,201	4,727
% of Grand Total	2%	4%	51%	0.3%	5%	37%	100%	58%
% of Total with Responses	4%	7%	89%	0%				100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non-binary	Trans Female	Trans Male	Another Gender Identity	No Data	Grand Total	Total with Responses (first 6 columns)
CAAP	1,652	3,724	25	33	8	8	2,751	8,201	5,450
% of Grand Total	20%	45%	0.3%	0.4%	0.1%	0.1%	34%	100%	66%
% of Total with Responses	30%	68%	0.5%	0.6%	0.1%	0.1%			100%

The information below describes the CAAP program's experience with SOGI data collection.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> Updated flyers and forms to reflect gender neutral pronouns. Updated all induction material to gender neutral pronouns. Actively changing pronouns in online staff manual to be gender neutral. Periodically remind staff to actively encourage applicants/recipients to provide SOGI information when updating the demographics window in CalWIN if the SOGI information is blank. Some staff were able to attend a SOGI training offered by the Department of Homelessness and Supportive Housing (HSH).
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Challenges	<ul style="list-style-type: none"> • Updated flyers and forms to reflect gender neutral pronouns is ongoing and done as forms are updated. • Actively changing pronouns used in online manual to gender neutral is labor intensive and also done as other updates are made. • Achieving consistency to complete SOGI information when demographics are updated given that fields are optional. • Not all staff were able to attend a SOGI training offered by the HSH.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> • Complete updates to flyers and forms to reflect gender neutral pronouns. • Complete the updates on pronouns used in online manual to gender neutral. • Continue keeping induction materials updated as they are created. • Continue to remind staff to actively encourage applicants/recipients to give us the information when updating the demographics window in CalWIN if the SOGI window is blank. • Have all staff trained in SOGI being offered by HSH, the LGBT Center, or similar departments. • Provide refresher SOGI training upon request and when staff input inconsistent or incorrect information into CalWIN. • New hires will be required to take SOGI training and adding SOGI training into our Induction curriculum.

BFS Family and Children Services

HSA's Department of Benefits and Family Support (BFS) also houses San Francisco's child welfare programs within its Family and Children Services (FCS) Division. FCS, which uses the acronym SOGIE to signify "Sexual Orientation, Gender Identity, and Expression," protects children from abuse and neglect and finds permanency for children through reunification, legal guardianship, or adoptions. FCS conducts investigations and provides case management for families and for children living at home and in foster care. FCS uses a statewide computer system called the Child Welfare Services Case Management System (CWS/CMS). SOGIE fields were added to CWS/CMS in 2018. Guidance from the State on how to collect SOGIE data were issued in 2019. FCS also uses a structured decision making tool called the Family Strengths and Needs Assessment, which includes collection of SOGIE information.

San Francisco FCS has a policy related to SOGIE data collection that states:

Protective Service Workers shall engage with youth ages 10-21 about SOGIE information, so long as they are developmentally and cognitively capable of

understanding and discussing gender, in an age-appropriate discussion of their preferred gender expression and the gender with which they identify.

The tables below contain the SOGIE demographic data for youth 10 years old and older collected by FCS for three populations. The first population is all referrals that were investigated during FY21-22 (1,072 youth in this group). The second population is all cases open anytime during FY21-22 (710 youth in this group). The third population is youth who were assessed using the Family Strength and Needs Assessment during FY21-22 (181 unduplicated youth assessed). The data shows about 15% to 17% of youth across these populations identify with an LGBTQ+ sexual orientation, out of those that provided information on their sexual orientation (excluding youth who were assessed using the Family Strength and Needs Assessment because that population was so small that its results are likely skewed). Between 3% and 6% of youth across the three populations identified as non-binary, transgender, unsure, or another gender identity other than male or female

SEXUAL ORIENTATION

Program	Asexual	Bisexual	Gay/ Lesbian/ Same- Gender Loving	Pan- sexual	Straight /Hetero- sexual	Not listed	Declined to Answer	Not Asked	Unable to Deter- mine	Grand Total	Total with Responses (first 6 columns)
Youth Referred	7	8	11	5	173	4	6	-	858	1,072	208
% of Grand Total	0.7%	0.7%	1%	0.5%	16%	0.4%	0.6%	0%	80%	100%	19%
% of Total with Responses	3.4%	4%	5%	2%	83%	2%					100%
Youth with Opened Child Welfare Case	1	12	6	4	142	2	5	-	538	710	167
% of Grand Total	0.1%	2%	1%	0.6%	20%	0%	1%	0%	76%	100%	24%
% of Total with Responses	0.6%	7%	4%	2%	85%	1%					100%
Youth Assessed using Family Strength and Needs	0	3	4	-	23	6	-	145	-	181	36
% of Grand Total	0%	2%	2%	0%	13%	3%	0%	80%	0%	100%	20%
% of Total with Responses	0%	8%	11%	0%	64%	17%					100%

GENDER IDENTITY

Program	Female	Male	Gender- queer/ Gender Non-binary	Trans- gender	Not listed, please specify	Unsure	Declined to Answer	Not Asked	Grand Total	Total with Responses (first 6 columns)
Youth Referred	151	117	9	6	0	0	1	787	1,071	283
% of Grand Total	14%	11%	0.8%	0.6%	0%	0%	0.1%	73%	100%	26%
% of Total with Responses	53%	41%	3%	2%	0%	0%				100%
Youth with Opened Child Welfare Case	107	73	6	0	0	0	2	522	710	186
% of Grand Total	15%	10%	0.8%	0%	0%	0%	0.3%	74%	100%	26%
% of Total with Responses	58%	39%	3%	0%	0%	0%				100%
Youth Assessed using Family Strength and Needs Assessment	92	69	6	4	0	0	0	10	181	171
% of Grand Total	51%	38%	3%	2%	0%	0%	0%	6%	100%	94%
% of Total with Responses	54%	40%	4%	2%	0%	0%				100%

The matrix below summarizes the status of SOGIE data collection within the FCS Program

<p>FY21-22 Efforts to Promote/Improve SOGIE Data Collection</p>	<ul style="list-style-type: none"> • Through a contract with Bay Area Academy FCS offered a training titled <i>Sexual Orientation, Gender Identity, and Expression in Child Welfare</i>. Participants learned what SOGIE is and the importance of collecting SOGIE information to better understand the lives, experiences, and possible unique challenges of people within this community. • Offered staff training on LGBTQ+ topics including: <ul style="list-style-type: none"> ○ <i>Supporting Mental and Physical Health and Safety for LGBTQ Youth in the Child Welfare System during COVID-19</i> (via A Better Way). ○ <i>Name and Gender Changes and LGBTQ Based Discrimination</i> (via Fred Finch). ○ <i>Supporting LGBTQQI Youth and Young Adults</i> (via SF City College). • Updated policy related to SOGIE data collection in February 2022 and shared that information via policy newsletter.
<p>Challenges</p>	<ul style="list-style-type: none"> • None known.
<p>Plans/Strategies to Improve Data Coverage and Quality Going Forward</p>	<ul style="list-style-type: none"> • Continue to work with providers to collect data from service recipients regarding SOGIE and design services to meet needs related to SOGI. • Include services to assist parents understanding the importance of SOGIE for youth and how to show their acceptance for their child's sexual orientation and gender expression. • Include SOGIE as a topic in the standard pre-service training for resource parents.

Contractor-Operated Programs

HSA currently has around 400 contracts with numerous community-based organizations. Many contractors collect demographic data and are therefore subject to San Francisco's SOGI data collection ordinance. Some community partners input client-level data through an HSA program's dedicated case management system, in which case the data is reflected in a preceding program-specific section of this report. The remaining contractors use HSA's contract management system, called CARBON, to submit aggregate SOGI data. This system was modified to flag whether contractors are required to report aggregate SOGI data in CARBON, which allows for compliance tracking and sending targeted reminders.

The aggregate SOGI data submitted by contractors for FY21-22 can be found within the **Appendix** of this report. Twenty-nine community partners submitted SOGI data this year (down from thirty-three last fiscal year, and 37 the year before, for reasons directly linked to the COVID-19 pandemic). The matrix below summarizes the status of SOGI data collection

among HSA’s contractor-operated programs, including the negative impact of the pandemic on SOGI data collection and reporting, as well as plans to increase the submission rate going forward.

FY21-22 Efforts to Promote/Improve SOGI Data Collection	<ul style="list-style-type: none"> • HSA Program Monitors continue to check in with vendors at annual monitoring visits to confirm they are collecting SOGI data. • Contract Monitoring & Performance Analyst attended internal staff meetings to discuss SOGI data collection throughout the fiscal year. • Contract Monitoring & Performance Analyst provided SOGI training to new HSA Program Monitors.
Challenges	<ul style="list-style-type: none"> • Requests from vendors that we remove the question about sex at birth to align with other city departments.
Plans/Strategies to Improve Data Coverage and Quality Going Forward	<ul style="list-style-type: none"> • To assist programs in monitoring of mid-year SOGI data collection, Contract Monitoring & Performance Analyst will run an annual report and distribute to program monitors by January 31st, 2023. This will be another tool to alert programs of vendors that may have issues with reporting. • Effective FY22-23, the question about sex at birth will no longer be required and will be removed from the CARBON reporting form.

Conclusion

LGBTQ+ persons face disproportionately higher rates of poverty, suicide, homelessness, isolation, substance abuse, and violence. Reliable SOGI demographic data is essential to inform the design and delivery of programs to improve the well-being of LGBTQ+ populations. HSA continually strives to welcome and affirm all of San Francisco’s diverse communities in order to connect them to our agency’s web of vital services and benefits; SOGI data collection is part of this broader strategy. Collecting SOGI demographics is no less important during this extended pandemic, given that COVID-19 has exacerbated the disparities and inequity experienced by marginalized communities, including LGBTQ+ persons. HSA commends the Office of Transgender Initiatives’ longstanding leadership in regard to the annual SOGI reports and Board of Supervisor hearings, which raise awareness and accountability, and facilitate cross-department information sharing.

Thank you for your time and attention in reviewing this report. HSA welcomes any follow-up questions or feedback.

SOGI Contact at HSA:

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Policy & Planning Unit

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APPENDIX: SOGI Data from HSA Contract Management System (CARBON)

HSA Contractor SOGI Report Fiscal Year: 2021-2022				Sexual Orientation															
				Straight/ Heterosexual		Bisexual		Gay/Lesbian		Questioning/ Unsure		Not Listed		Decline to Answer		Not asked		Incomplete	
Program Area	Vendor/Agency	Contract	# of Clients Served	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
CalFresh	BAY AREA LEGAL AID	HDAP & SSI Advocacy 21-23	912	499	55%	22	2%	40	4%	3	0%	12	1%	29	3%	191	21%	116	13%
CalFresh	SAN FRANCISCO FOOD BANK	CalFresh and Medi-Cal Promotion 18-24	4,955	2,466	50%	14	0%	11	0%	8	0%	3	0%	734	15%	519	10%	1,200	24%
CalFresh	SAN FRANCISCO FOOD BANK	DHS - IFA / PFA Renewal 17-22	4,980	1,803	36%	23	0%	22	0%	9	0%	85	2%	296	6%	31	1%	2,711	54%
DAS	MERCY HOUSING CALIFORNIA	1760 Bush Street (RAD Phase II Seniors) FY19-24	109	101	93%	-	0%	8	7%	-	0%	-	0%	-	0%	-	0%	-	0%
DAS	UNIVERSITY OF CALIFORNIA, SAN FRANCISCO	Community Grocery Access	4,540	3,453	76%	49	1%	58	1%	7	0%	16	0%	957	21%	-	0%	-	0%
FCS	ALTERNATIVE FAMILY SERVICES	Foster Parent Training, Events & Supportive Services FY 19-24	575	137	24%	20	3%	14	2%	3	1%	39	7%	32	6%	-	0%	330	57%
FCS	FAMILY BUILDERS BY ADOPTION	Adoption and Permanency Services	203	124	61%	5	2%	14	7%	4	2%	55	27%	1	0%	-	0%	-	0%
FCS	FAMILY SUPPORT SVCS	Respite Care and Training & Recruitment Program for RFA Approved Families	44	34	77%	-	0%	3	7%	-	0%	1	2%	6	14%	-	0%	-	0%
FCS	FAMILY SUPPORT SVCS	SafeCare Parenting Education FY19-22	31	26	84%	4	13%	1	3%	-	0%	-	0%	-	0%	-	0%	-	0%
FCS	FIRST PLACE FOR YOUTH	Independent Living Skills Program for Foster Youth	360	200	56%	25	7%	10	3%	-	0%	4	1%	7	2%	100	28%	14	4%
FCS	HOMELESS PRENATAL PROGRAM	Homeless Prenatal Program-Bringing Families Home FY18-23	44	26	59%	1	2%	-	0%	-	0%	2	5%	2	5%	-	0%	13	30%
FCS	SAFE & SOUND	Mandated Reporter Training, Intervention Services, CSEC & System Improvements FY19-23	104	27	26%	2	2%	2	2%	-	0%	-	0%	73	70%	-	0%	-	0%
FCS	UNITY CARE GROUP	Housing Services for TAY 21-23	54	12	22%	3	6%	-	0%	-	0%	-	0%	-	0%	39	72%	-	0%

**HSA Contractor SOGI Report
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				Sexual Orientation															
Program Area	Vendor/Agency	Contract	# of Clients Served	Straight/ Heterosexual		Bisexual		Gay/Lesbian		Questioning/ Unsure		Not Listed		Decline to Answer		Not asked		Incomplete	
				#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
ESSS	ABODE SERVICES	CalWORKS Housing Locator, Housing Connector, and Case Management Services FY22-23	453	194	43%	7	2%	-	0%	2	0%	106	23%	131	29%	13	3%	-	0%
ESSS	ARRIBA JUNTOS	Community Jobs Program(CJP) -	167	148	89%	7	4%	2	1%	-	0%	1	1%	9	5%	-	0%	-	0%
ESSS	ARRIBA JUNTOS	Employment Services to Formerly and Currently At-Risk Homeless Individuals FY21-23	42	39	93%	0	0%	0	0%	0	0%	0	0%	2	5%	0	0%	1	2%
ESSS	ARRIBA JUNTOS	Transitional Empl Support Svc (TESS) for PSTFY21-24	72	62	86%	2	3%	7	10%	-	0%	-	0%	1	1%	-	0%	-	0%
ESSS	ARRIBA JUNTOS	Vocational Immersion VIP/VESL FY21-23	220	194	88%	13	6%	1	0%	-	0%	1	0%	11	5%	-	0%	-	0%
ESSS	ARRIBA JUNTOS	WTW - Transitional Empl for Re-Engagement FY21-23	301	130	43%	16	5%	119	40%	14	5%	1	0%	9	3%	1	0%	11	4%
ESSS	ARRIBA JUNTOS	Youth Employment Services II	40	34	85%	3	8%	2	5%	1	3%	-	0%	-	0%	-	0%	-	0%
ESSS	BAY AREA LEGAL AID	Individualized Legal Support Services (ILSS) 21-23	1,775	970	55%	57	3%	75	4%	4	0%	26	1%	68	4%	352	20%	223	13%
ESSS	CATHOLIC CHARITIES	CalWORKS Housing Locator, Housing Connector, and Case Management Services FY20-22	42	42	100%	-	0%	-	0%	-	0%	-	0%	-	0%	-	0%	-	0%
ESSS	EPISCOPAL COMMUNITY SVCS OF S F INC	Employment Services to Formerly and Currently At-Risk Homeless Individuals FY21-23	43	36	84%	2	5%	3	7%	-	0%	1	2%	1	2%	-	0%	-	0%
ESSS	FIVE KEYS SCHOOLS AND PROGRAMS	Academic Assessment Services For WTW Participants 19-24	39	23	59%	-	0%	-	0%	-	0%	-	0%	-	0%	-	0%	16	41%
ESSS	LA CASA DE LAS MADRES	Domestic Violence Services to CalWORKs 17-22	160	108	68%	7	4%	2	1%	-	0%	2	1%	1	1%	-	0%	40	25%
ESSS	SAN FRANCISCO CLEAN CITY COALITION	Transitional Employment in Urban Maintenance FY19-22	18	6	33%	-	0%	-	0%	1	6%	-	0%	2	11%	9	50%	-	0%
ESSS	YOUNG COMMUNITY DEVELOPERS	Community Jobs Program (CJP) for Justice Involved for Tay FY21-24	48	48	100%	-	0%	-	0%	-	0%	-	0%	-	0%	-	0%	-	0%
ESSS	YOUNG COMMUNITY DEVELOPERS	Community Jobs Program (CJP) Non CalWORKs FY21-24	78	71	91%	2	3%	-	0%	-	0%	-	0%	5	6%	-	0%	-	0%
ESSS	YOUNG COMMUNITY DEVELOPERS	Transitional Empl Support Svc (TESS) for PST FY21-24	88	75	85%	1	1%	2	2%	-	0%	1	1%	9	10%	-	0%	-	0%

**HSA Contractor SOGI Report
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				Gender Identity															
Program Area	Vendor/Agency	Contract	# of Clients Served	Male		Female		Trans Male		Trans Female		Genderqueer/ Gender Non-binary		Not Listed		Decline to Answer		Not Asked	
				#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
CalFresh	BAY AREA LEGAL AID	HDAP & SSI Advocacy 21-23	912	353	39%	508	56%	2	0%	12	1%	10	1%	3	0%	13	1%	11	1%
CalFresh	SAN FRANCISCO FOOD BANK	CalFresh and Medi-Cal Promotion 18-24	4,955	1,382	28%	1,950	39%	1	0%	1	0%	11	0%	6	0%	85	2%	1,519	31%
CalFresh	SAN FRANCISCO FOOD BANK	DHS - IFA / PFA Renewal 17-22	4,980	1,315	26%	3,325	67%	4	0%	2	0%	8	0%	14	0%	4	0%	308	6%
DAS	MERCY HOUSING CALIFORNIA	1760 Bush Street (RAD Phase II Seniors) FY19-24	109	57	52%	44	40%	3	3%	5	5%	-	0%	-	0%	-	0%	-	0%
DAS	UNIVERSITY OF CALIFORNIA, SAN FRANCISCO	Community Grocery Access	4,540	1,207	27%	3,069	68%	1	0%	2	0%	5	0%	4	0%	252	6%	-	0%
FCS	ALTERNATIVE FAMILY SERVICES	Foster Parent Training, Events & Supportive Services FY 19-24	575	70	12%	230	40%	-	0%	-	0%	4	1%	2	0%	29	5%	240	42%
FCS	FAMILY BUILDERS BY ADOPTION	Adoption and Permanency Services	203	81	40%	113	56%	1	0%	1	0%	4	2%	3	1%	0	0%	0	0%
FCS	FAMILY SUPPORT SVCS	Respite Care and Training & Recruitment Program for RFA Approved Families	44	4	9%	39	89%	0	0%	0	0%	0	0%	1	2%	0	0%	0	0%
FCS	FAMILY SUPPORT SVCS	SafeCare Parenting Education FY19-22	31	7	23%	23	74%	1	3%	0	0%	0	0%	0	0%	0	0%	0	0%
FCS	FIRST PLACE FOR YOUTH	Independent Living Skills Program for Foster Youth	360	154	43%	189	53%	2	1%	2	1%	8	2%	0	0%	5	1%	0	0%
FCS	HOMELESS PRENATAL PROGRAM	Homeless Prenatal Program-Bringing Families Home FY18-23	44	8	18%	36	82%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
FCS	SAFE & SOUND	Mandated Reporter Training, Intervention Services, CSEC & System Improvements FY19-23	104	8	8%	83	80%	0	0%	0	0%	0	0%	0	0%	13	13%	0	0%
FCS	UNITY CARE GROUP	Housing Services for TAY 21-23	54	6	11%	9	17%	0	0%	0	0%	0	0%	0	0%	0	0%	39	72%

**HSA Contractor SOGI Report
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				Gender Identity															
Program Area	Vendor/Agency	Contract	# of Clients Served	Male		Female		Trans Male		Trans Female		Genderqueer/ Gender Non-binary		Not Listed		Decline to Answer		Not Asked	
				#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
ESSS	ABODE SERVICES	CalWORKS Housing Locator, Housing Connector, and Case Management Services FY22-23	453	175	39%	278	61%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
ESSS	ARRIBA JUNTOS	Community Jobs Program(CJP) -	167	27	16%	139	83%	0	0%	0	0%	0	0%	0	0%	1	1%	0	0%
ESSS	ARRIBA JUNTOS	Employment Services to Formerly and Currently At-Risk Homeless Individuals FY21-23	42	2	5%	38	90%	0	0%	2	5%	0	0%	0	0%	0	0%	0	0%
ESSS	ARRIBA JUNTOS	Transitional Empl Support Svc (TESS) for PSTFY21-24	72	38	53%	34	47%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
ESSS	ARRIBA JUNTOS	Vocational Immersion VIP/VESL FY21-23	220	58	26%	161	73%	0	0%	1	0%	0	0%	0	0%	0	0%	0	0%
ESSS	ARRIBA JUNTOS	WTW - Transitional Empl for Re-Engagement FY21-23	301	88	29%	212	70%	0	0%	0	0%	1	0%	0	0%	0	0%	0	0%
ESSS	ARRIBA JUNTOS	Youth Employment Services II	40	18	45%	22	55%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
ESSS	BAY AREA LEGAL AID	Individualized Legal Support Services (ILSS) 21-23	1,775	697	39%	974	55%	5	0%	23	1%	23	1%	7	0%	28	2%	18	1%
ESSS	CATHOLIC CHARITIES	CalWORKS Housing Locator, Housing Connector, and Case Management Services FY20-22	42	0	0%	42	100%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
ESSS	EPISCOPAL COMMUNITY SVCS OF S F INC	Employment Services to Formerly and Currently At-Risk Homeless Individuals FY21-23	43	22	51%	19	44%	0	0%	2	5%	0	0%	0	0%	0	0%	0	0%
ESSS	FIVE KEYS SCHOOLS AND PROGRAMS	Academic Assessment Services For WTW Participants 19-24	39	1	3%	22	56%	0	0%	0	0%	0	0%	0	0%	0	0%	16	41%
ESSS	LA CASA DE LAS MADRES	Domestic Violence Services to CalWORKs 17-22	160	1	1%	153	96%	0	0%	0	0%	0	0%	0	0%	6	4%	0	0%
ESSS	SAN FRANCISCO CLEAN CITY COALITION	Transitional Employment in Urban Maintenance FY19-22	18	12	67%	6	33%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
ESSS	YOUNG COMMUNITY DEVELOPERS	Community Jobs Program (CJP) for Justice Involved for Tay FY21-24	48	36	75%	12	25%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
ESSS	YOUNG COMMUNITY DEVELOPERS	Community Jobs Program (CJP) Non CalWORKs FY21-24	78	49	63%	27	35%	0	0%	0	0%	0	0%	0	0%	2	3%	0	0%
ESSS	YOUNG COMMUNITY DEVELOPERS	Transitional Empl Support Svc (TESS) for PST FY21-24	88	53	60%	34	39%	0	0%	0	0%	0	0%	0	0%	1	1%	0	0%