

Supporting Partnerships for Anti-Racist Communities (SPARC)
San Francisco, CA

Initial Findings from Quantitative and Qualitative Research

This document was prepared by the Center for Social Innovation (C4) in Needham, MA for The Department of Homelessness and Supportive Housing in San Francisco, CA

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Why SPARC? Why San Francisco?

In August 2016, Mayor Edwin M. Lee launched the Department of Homelessness and Supportive Housing (HSH) to fundamentally change the way San Francisco addresses homelessness. HSH's vision is to make homelessness a rare, brief, and one-time event. The aim is a significant, sustained reduction in homelessness in San Francisco.

Since its launch HSH has emphasized racial equity in its work to address homelessness recognizing that racism is a cause of homelessness and that to truly make a positive impact in the lives of people experiencing homelessness race and racism must be discussed and addressed on an interpersonal and structural level.

The Center for Social Innovation (C4) launched Supporting Partnerships for Anti-Racist Communities (SPARC) in 2016 in response to overwhelming evidence that people of color were dramatically overrepresented in the nation's homeless population—across the country and regardless of jurisdiction. Since then, SPARC has worked in six communities, using mixed methods research and structured dialogue to understand how people are experiencing systemic racism in relation to homelessness, and to leverage that knowledge toward systems transformation.

Beginning in October 2016, C4 partnered with The City of San Francisco's Department of Homelessness and Supportive Housing and nonprofit service providers in San Francisco to collect qualitative and quantitative data to examine the racial dimensions of homelessness in the area. This report presents preliminary findings from these data and a discussion of the findings. Participation in SPARC is one way that HSH has prioritized racial equity in its work and works to build culture equity into the department from the beginning.

In October of 2017 HSH released its five year strategic framework that outlines the goals and strategies that San Francisco will use to reduce homelessness. Benchmarks to measure equity will be included in the implementation of the department's strategic framework.

HSH is not only committed to creating and maintaining a focus on racial equity because it is the ethically right thing for a department to do, but also because it will be key to achieving systems change within the homelessness response system and making homelessness brief, rare, and one time.





Glossary of Terms

Racism - A system of advantage/oppression based on race. Racism is exercised by the dominant racial group (Whites) over non-dominant racial groups. Racism is more than just prejudice.

Structural Racism - A system by which public policies, institutional practices, cultural representations, and other norms work to perpetuate racial inequality. It is racial bias among institutions and across society. It involves the cumulative effects of history, culture, and ideology, and it systematically privileges White people and disadvantages people of color.

Inequities - Differences in outcomes between population groups that are rooted in unfairness or injustice.

Equity - A situation where all groups have access to the resources and opportunities necessary to eliminate gaps and improve the quality of their lives.

Racial Equity - "Closing the gaps" so that race does not predict one's success, while also improving outcomes for all. Equity is distinct from equality in that it aspires to achieve fair outcomes and considers history and implicit bias, rather than simply providing "equal opportunity" for everyone. Racial equity is not just the absence of overt racial discrimination; it is also the presence of deliberate policies and practices that provide everyone with the support they need to improve the quality of their lives." ¹

Antiracism - "An action- oriented, educational and political strategy for institutional and systemic change that addresses the issues of racism and the interlocking systems of social oppression (sexism, classism, heterosexism, ableism)."²

² Maguire, Angus. "Illustrating Equality vs. Equity." Interaction Institute for Social Change, 13 Jan. 2016, interactioninstitute.org/illustrating-equality-vs-equity/





¹George J. Sefa Dei, *Power, Knowledge and Antiracism Education*, ed. George Sefa Dei and Agnes Calliste (Halifax: Fernwood, 2000), 13.

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1. Executive Summary

Beginning in October 2016, the Center for Social Innovation (C4) partnered with The City and County of San Francisco Department of Homelessness and Supportive Housing (HSH) and other service providers to amplify the issue of racial inequity and homelessness. This partnership included convening a town hall meeting, hosting a provider training, facilitating a planning session of community leaders, and collecting local data.

Given the disproportionate impact of homelessness on people of color, it is essential to center race in conversations, programs, and policies designed to end homelessness. San Francisco, and all communities, must work to change the systems that lead to people of color being disproportionately pushed into homelessness. Simultaneous to the larger systems change efforts that must occur to prevent people of color from becoming homeless, the Homelessness Response System must implement policies, practices, and programs to respond in a race conscious and equitable manner.

In the San Francisco planning session of community leaders, stakeholders from homeless service organizations identified three "Structural Change Objectives" for our work to address racial inequity in our system, including:

- 1. **Capacity building** within organizations rooted in communities of color and professional development specifically for people of color in the field.
- 2. **Improving equity in funding** across nonprofit organizations, with a special focus on ensuring that organizations rooted in communities of color are at the table for funding and policy decision making.
- 3. **Equitable housing placement and retention,** ensuring that people of color are proportionately served in the housing administered by HSH and that they remain stably housed at proportionate rates.

As part of the effort to better understand the intersection of racism and homelessness in San Francisco, C4 worked with HSH to collect qualitative and quantitative data that would elucidate the racial dimensions of homelessness in the area. Data collection included:

- 1. Homeless Management Information System (HMIS) data from fiscal years 2011 to 2016.³
- 2. Aggregate data from The San Francisco Department of Public Health (SFDPH) Coordinated Care Management System (CCMS) for FY14/15.⁴
- 3. An online demographic survey of homeless service providers.
- 4. Qualitative research, including 29 individual interviews with people of color experiencing homelessness and 3 focus groups of providers, stakeholders, and consumers.

⁴ CCMS includes integrated medical, psychological, and social information about high-risk, complex, and vulnerable populations served by SFDPH





³ HMIS includes client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. HMIS data in San Francisco is limited by historical issues with implementation, and in 2017 HSH launched the Online Navigation and Entry (ONE) System.

This report presents preliminary findings from this research. In the Discussion, we present promising directions for potential systems change and further research, and in the Recommendations, we outline potential short term and long-term action steps for programs, HSH, and the City. We also explore the links between the data and the three objectives identified by the San Francisco community leaders.

1.1 Summary of Preliminary Quantitative Findings

- Our analyses of HMIS data from the San Francisco Continuum of Care 2011-2016 found that:
 - O Though the Black population in San Francisco constitutes only 5.5% of the general population, this group is overrepresented among those living below the poverty line (both the 100% and 50% poverty line groups, 13.1% and 13.8%, respectively) and among people experiencing homelessness (HMIS, 40.1%). On the other hand, Whites constitute 48.7% of the general population but are underrepresented in both poverty groups (35.4% and 38.1%, respectively) and slightly underrepresented among the homeless population (HMIS, 44.2%).
 - Length of time experiencing homelessness before program entry was similar across racial groups.
 - O Clients identifying as Black were more likely than clients of other races to enter programs from subsidized housing or correctional facilities.
 - The rate of Black clients exiting into permanent housing with subsidy was similar to the rate of Black clients overall.
 - Race and ethnicity were not significant predictors of exiting into housing with a subsidy and or into housing without a subsidy.
 - o Black clients were overrepresented among people exiting programs into correctional facilities.
- The San Francisco Department of Public Health (SFDPH) Coordinated Care Management System (CCMS) data for FY1415 indicated that:
 - O A greater percent of Black individuals (53.5%) and individuals identified as Asian/Pacific Islander, Native American, Multiracial, or Other (52.5%) utilized shelter, in comparison to White (41.7%) and Latinx⁵ (45.4%) rates of shelter utilization.
 - o 45.2% of Black individuals were first noted in the system as homeless over 10 years ago, while 29.8% of White, 36.8% of Latinx, and 19.9% of individuals from Asian/Pacific Islander, Native American, Multiracial, or Other races had experienced continual or intermittent homelessness for 10 years or more.
 - o Black individuals had a span of continual or intermittent homelessness averaging 8.64 years, while White and Latinx individuals averaged 6.56 and 6.32 years respectively.

⁵ Latinx is a gender neutral term used in lieu of Latino or Latina.





1.2 Summary of Preliminary Qualitative Findings

- **Pathways into homelessness** for people of color are often characterized by:
 - Network impoverishment. There is no extra money anywhere in a respondent's social network.
 - o Family destabilization. Families faced significant psychosocial stressors associated with poverty, substance use and mental illness, child welfare involvement, criminal justice involvement, and trauma.
 - o Behavioral health issues: Instability and trauma correlate with substance use issues.
 - o *Violence*. People frequently had histories of violence connected to their pathways into homelessness, including intimate partner violence (IPV) and community violence.
- Barriers to exiting homelessness for people of color are almost entirely systemic and can be broadly classified as:
 - Affordable housing. Many respondents stated that rent was prohibitively expensive in San Francisco. However, they choose to remain in the city because of community connections and employment opportunities.
 - o *Economic mobility.* Respondents do not have difficulty finding jobs, but struggle to secure jobs with adequate wages.
 - o *Criminal justice system involvement.* Criminal records, which disproportionately affect people of color, continue to substantially limit housing and employment options.

1.3 Provider Survey

To support the City with its structural change objective of supporting staff of color in homeless service agencies, we also conducted research on staff needs. Through an online survey we collected data on the background of providers working in homelessness response programs and their self-reported desires for professional development. In addition, we sought to understand how people perceive the issue of race in service settings through semi-structured focus groups and interviews. Our analyses of an anonymous online survey of homeless service providers found:

- Many respondents of color did not feel that they have the adequate support to advance in their careers. They indicate a number of unmet needs which hinder their ability to advance, such as adequate grantwriting and fundraising skills.
- Only 19% of Executive Directors and 43.3% of Administrators identified as staff of color.

The entirety of our provider needs analysis can be found in the Appendix (San Francisco Homeless Service Providers Diversity & Inclusion – Mixed Methods Findings).





1.4 Recommendations

Based on these data, preliminary recommendations include:

- 1. Continue to focus on designing an equitable Coordinated Entry system. Coordinated Entry organizes the Homelessness Response System with common, assessment, a centralized data system, and a standardized prioritization method. Continual review of data from this process for disparities by race can help assess whether housing interventions are being sufficiently provided to people of color experiencing homelessness.
- 2. **Incorporate racial equity into grantmaking and contracting**. Through grants and contracts, compel programs to report how their work will address issues of racial equity, the demographics of their staff at all levels, and internal mechanisms for advancement of staff of color. Evaluate programs on their responsiveness to racial disparities.
- 3. Include racial equity data analysis and benchmarks into the strategic implementation plan. As San Francisco sets overarching goals to improve the homelessness response system, it should analyze decisions through an internal racial equity tool. It should also measure impact by race and ethnicity through a results based accountability framework.
- 4. Support organizational development within agencies serving communities of color. HSH can support agencies by providing resources towards internal equity and inclusion goals, for both client outcomes and employee growth. To specifically support agencies rooted in communities and neighborhoods of color, barriers to resources should be examined and addressed.
- 5. **Encourage anti-racist program delivery and promote ongoing anti-racism training.** All staff working in the homeless services sector should receive ongoing training on understanding racism and the intersections of racism and homelessness. Training should include concrete approaches to incorporating anti-racism into one's own work.
- 6. **Collaborate to increase affordable housing availability.** Ending homelessness for people of color requires access to safe, decent, and affordable housing. The level of homelessness in the City suggests a need to look closely at housing policy, the rate of new housing production, and the subsidy amounts available to people to use within units now available.
- 7. Innovative flexible upstream interventions. The City should continue efforts to improve its upstream services and homelessness prevention efforts. Prevention includes targeted eviction prevention for people at risk of homelessness and working with connected systems—criminal justice, child welfare, and public health systems— to reduce the number of people exiting into homelessness from those systems.





2. Preliminary Quantitative Research

For the preliminary analysis of San Francisco's Homeless Management Information System (HMIS) data, the SPARC team identified an initial set of research questions:

- 1. How does the race of people experiencing homelessness compare to those in poverty and the general population?
- 2. How does the race of people experiencing homelessness relate to the number of homeless occurrences in the three-year period prior to program entry?
- 3. How does the race of people experiencing homelessness relate to the number of months an individual has experienced homelessness over the three-year period prior to program entry?
- 4. How does the race of people experiencing homelessness relate to "prior living situation" at program entry?
- 5. How does the race of people experiencing homelessness relate to "destination" at program exit?

Our team also looked at whether or not race or ethnicity were substantial predictors of exiting programs into homelessness, housing without subsidy, or housing with subsidy.

A note about data: Given San Francisco's historic challenges with homelessness data, HSH has launched the Online Navigation and Entry (ONE) System, a single data system for all homeless programs and services. Previously, the City and its contractors used 15 different data systems; consistent information on the overall system was not available and clients had to continuously repeat their information as they moved from program to program. The ONE System will be used by HSH staff, nonprofit contractors, and City partners for coordinated assessment and prioritization, to share data across programs and improve service delivery, and for tracking all resources and results. It is the backbone of the performance measurement and accountability process. Given that ONE will not be fully operational until the end of 2018, SPARC used the best data available – HMIS, PIT, and CCMS. ONE was launched in 2017 and will be fully implemented by the end of 2018.

2.1 Preliminary Quantitative Research Findings

Characteristics of people in San Francisco Continuum of Care for fiscal years 2011-2016



The following analyses used HMIS data from the San Francisco Continuum of Care for fiscal years 2011-2016 which included 23,205 clients (Table 1). 6

| Table 1. | |
|---|-----------------|
| Characteristics of people in San Francisco Continuum of Care for fiscal y | rears 2011-2016 |
| Race | |
| Black | 8,515 (40.1%) |
| White | 10,247 (48.3%) |
| American Indian or Alaska Native (AI/AN) | 1,164 (5.5%) |
| Asian | 1,122 (5.3%) |
| Native Hawaiian or Other Pacific Islander (NHOPI) | 169 (0.8%) |
| Total N = 21217 | |
| Ethnicity | |
| Non-Hispanic/Non-Latinx | 19,696 (85.0%) |
| Hispanic/Latinx | 3,470 (15.0%) |
| Total N = 23166 | |
| Gender | |
| Female | 6,600 (29.1%) |
| Male | 16,024 (70.5%) |
| Transgender male to female | 34 (0.1%) |
| Transgender female to male | 57 (0.3%) |
| Age | |
| Years (Mean, SD) | 40.4 (16.8) |
| Veterans Status | |
| Yes | 1,277 (11.6%) |
| No | 9,711 (88.4%) |
| | |

The study sample was 70.5% male. The average age for this sample was 40 years (M = 40.4, SD = 16.8) ranging from birth to 90 years. A majority of participants (48.3%) were White, followed by 40.1% Black, 5.5% American Indian or Alaska Native, 5.3% Asian, and 0.8% Native Hawaiian or Other Pacific Islander. Fifteen percent of clients were identified as Hispanic/Latinx. Approximately 12% of the individuals (11.6%) were veterans and 26.7% had a disability.

How do the racial demographics of people experiencing homelessness compare to those in poverty and the general San Francisco population?

⁶ As in most studies based on administrative data sets, there were missing values for different variables and for different participants. Missing data were handled by using listwise deletion approach under missing at random (MAR) assumptions. In other words, missing data are unrelated to the outcome variable. Therefore, cases with missing values were subsequently dropped from the analysis. Additional notes on how missing data was treated for each research question are included in those sections.





We looked at 2016 HMIS data and compared it to American Community Survey (ACS) general population data, poverty data, and the 2017 Point-in-Time (PIT) homeless counts (Table 2a). Though the Black population in San Francisco constitutes only 5.5% of the population, this group is overrepresented among people living in poverty and among people experiencing homelessness. Compared to 5.5% of the general population, 13.1% of those in poverty, and 13.8% of those in deep poverty, Black people make of 40.1% of the population experiencing homelessness. Compared to just .3% of the general population, and .6% of those in poverty and those in deep poverty, American Indian and Alaska Native people make of 4.6% of the population experiencing homelessness. On the other hand, Whites constitute 48.7% of the general population but are underrepresented in the population experiencing poverty (36.4%) and deep poverty (38.1%) and slightly underrepresented among the homeless population (HMIS, 46.7%). Individuals identifying as Hispanic/Latinx (of any race) have somewhat proportionate representation across poverty but are slightly underrepresented in HMIS and overrepresented in the Point-in-Time count. Individuals identifying as two or more races represent only 4.6% of the general population but 22% of the homeless Point-in-Time count. Asians make up 35.6% of the poverty population but only 4% of the PIT count and 6.8% of those documented in HMIS.



Table 2a.

Race of people experiencing homelessness, in HMIS programs, in poverty, and in the general population in San Francisco.

| Race | Percent of total | Percent | Percent of | Total de- | 2017 |
|------------------------|------------------------|---------------------------|-------------------|------------|--------------|
| | population 2015 | population in | population in | duplicated | Homelessness |
| | (5 year | poverty 2015 ^b | deep poverty | Percent, | PIT^d |
| | estimate) ^a | | 2015 ^c | HMIS 2016 | |
| White | 48.7% | 36.4% | 38.1% | 46.7% | 35% |
| Black | 5.5% | 13.1% | 13.8% | 41.5% | 34% |
| American Indian or | 0.3% | 0.6% | 0.6% | 4.6% | 3% |
| Alaska Native | | | | | |
| Asian | 34.0% | 35.6% | 33.0% | 6.8% | 4% |
| Native Hawaiian or | 0.4% | 0.9% | 0.9% | 0.3% | 2% |
| Other Pacific Islander | | | | | |
| Two or more * | 4.6% | 5.3% | 5.7% | | 22% |
| Hispanic or Latinx (of | 15.2% | 18.0% | 15.9% | 11.4% | 22% |
| any race) | | | | | |

^{*}Two or more races category not collected in HMIS

Table 2b displays comparable data for the nation. Black people make up a smaller percentage of the population in poverty in San Francisco than they do nationally. However, their proportion of the population experiencing homelessness is similar at about 40%. This comparison also highlights the larger population of Asian Americans living in San Francisco.





^a ACS 5yr 2015 Population estimate

^b ACS 5yr 2015 – population below poverty threshold

^c ACS 5yr 2015 – population below 50% of the poverty threshold

^d 2017 Point-in-Time homelessness count

Table 2b.

Race of people experiencing homelessness, in HMIS programs, in poverty, and in the general population the United States.

| Race | Percent of total population 2015 (5 year estimate) ^a | Percent of population in poverty 2015 ^b | Percent of population in deep poverty 2015 ^c | 2016 National HMIS ^d | 2016 National PIT ^e |
|---|---|--|---|---------------------------------------|--------------------------------------|
| White | 73.79% | 60.46% | 59.69% | 48.59% | 48.30% |
| Black | 12.39% | 21.58% | 23.50% | 42.57% | 39.10% |
| American Indian or Alaska Native | 0.80% | 1.47% | 1.60% | 2.50% | 2.80% |
| Asian | 5.16% | 4.19% | 4.55% | 0.78% | 1.00% |
| Native Hawaiian or Other Pacific Islander | 0.17% | 0.23% | 0.24% | 1.05% | 1.60% |
| Two or more | 2.96% | 3.81% | 3.92% | 4.55% | 7.20% |
| Hispanic or Latinx (of any race) | 17.22% | 26.99% | 24.31% | 16.85% | 22.10% |

^a ACS 5yr 2015 Population estimate

How do racial demographics of people experiencing homelessness relate to the number of homeless occurrences in the three-year period prior to program entry?

For the purposes of this report, "program" is used to refer to a specific "project" in HMIS systems. HMIS records were de-duplicated, so that individual's most recent contact with the system could be examined. Thus, "program entry" is defined by the most recent program (in HMIS data, "project") entry in our samples for each individual. "Program exit" is defined by last exit in the sample for each individual where an exit location was identified. Table 3 shows the racial breakdown of the number of homeless occurrences experienced by clients in the three-year period prior to program entry. Racial breakdown in each category were generally proportional to the general HMIS population.

Table 3.

Number of Times Homeless in the Past Three Years by Race and Ethnicity (n=1,316)





^b ACS 5yr 2015 – population below poverty threshold

^c ACS 5yr 2015 – population below 50% of the poverty threshold

d 2016 AHAR Part 2

e 2016 AHAR Part 1, National Point-in-Time homelessness count

| | Black | White | American Indian or Aaska Native | Asian | Native Hawaiian or Other Pacific Islander | Hispanic or Latinx | Total |
|-----------|-------|-------|---------------------------------------|-------|---|-----------------------|-------|
| 1 time | 36.2% | 51.0% | 5.3% | 5.6% | 1.9% | 25.8% | 47.4% |
| 2 times | 44.4% | 44.4% | 6.5% | 3.6% | 1.2% | 25.4% | 12.8% |
| 3 times | 42.0% | 46.2% | 1.7% | 8.4% | 1.7% | 16.5% | 9.0% |
| 4 or more | 40.3% | 48.0% | 6.9% | 2.7% | 2.0% | 21.0% | 30.7% |

How do racial demographics of people experiencing homelessness relate to the number of months an individual has experienced homelessness over the three-year period prior to program entry?

Table 4 shows the racial breakdown by number of months of homelessness in the three years prior to program entry. Experience of homelessness across racial groups was proportionate compared to the general HMIS population. White were slightly overrepresented in the "this is the first month" category, but in total that group only represented 3.4% of the population.

| Table 4. | | | | | | | | |
|--|-------|-------|---|-------|---|--|-------|--|
| Number of Months Homeless in Past Three Years by Race, % (n=1,240) | | | | | | | | |
| | Black | White | American Indian or Alaska Native | Asian | Native Hawaiian or Other Pacific Islander | Hispanic or Latinx (of any race) | Total | |
| 1 (this is the first month) | 25.6% | 60.5% | 4.7% | 9.3% | 0.0% | 25.6% | 3.4% | |
| 2-12 months | 41.0% | 43.8% | 0.1% | 0.1% | 0.0% | 21.4% | 30.2% | |
| More than 12 months | 40.2% | 49.3% | 5.5% | 3.5% | 1.4% | 24.3% | 66.5% | |

How do racial demographics of people experiencing homelessness relate to "prior living situation" at program entry?

We sought to understand the locations of clients prior to program entry and at final program exit (as of FY 2016). As noted above, for the purposes of this report, "program entry" is defined by the most recent program (in HMIS data, "project") entry in our samples for each individual. A single consistent project entry point was selected in order to compare entries across client records. Our analyses are limited to the most recent time-point in the data set for every individual, but future work should examine the





number of homeless service instances by race (i.e., the number of project entries over three year period) and patterns in people's pathways. Entry and exit Locations are grouped into categories as shown in Appendix 2.

Table 5 shows the prior residence type of clients at program entry by racial category. The most common residence prior to program entry was "Other" at 57.0%. A closer examination of this data element in the HMIS system is needed to understand data entry habits or guidelines related to this data point. Otherwise, the most common living situation prior to program entry was homelessness, at 21.8%. Across this group, rates were generally proportional to the HMIS client sample in terms of racial breakdown.

| Table 5. | | | | | | | | | |
|---|-------|-------|-------|-------|-------|-----------------------|--------|--|--|
| Residence Prior to Program Entry by Race (N = 13,178) | | | | | | | | | |
| | Black | White | AI/AN | Asian | NHOPI | Hispanic or Latinx | Totals | | |
| Homeless | 39.9% | 48.6% | 5.1% | 4.7% | 1.8% | 23.0% | 21.8% | | |
| Permanent Housing/ Renting with subsidy | 47.5% | 37.4% | 4.0% | 7.0% | 4.0 % | 18.2% | 0.8% | | |
| Permanent Housing/ Renting without subsidy | 40.7% | 51.6% | 2.9 % | 4.9% | 0.1% | 12.9% | 6.2% | | |
| Institutional care | 37.3% | 50.5% | 6.4% | 4.1% | 1.7% | 18.0% | 3.9% | | |
| Correctional facility | 52.5% | 37.0% | 4.0% | 4.0% | 3.0% | 15.8% | 0.8% | | |
| Doubled Up | 40.3% | 43.4% | 7.9% | 7.0% | 1.5% | 22.8% | 5.0% | | |
| Transitional setting | 40.3% | 48.9% | 6.2% | 3.0% | 1.7% | 14.8% | 4.5% | | |
| Other | 40.1% | 50.3% | 4.5% | 5.1% | 0.0% | 13.0% | 57.0% | | |

How do racial demographics of people experiencing homelessness relate to "destination" at program exit?

"Program exit" is defined by last exit in the sample for each individual where an exit location was identified. The data is grouped in the same way as project entry location, with the exception of two additional options under "Doubled up" available to respondents at exit ((Staying or living with friends (temporary); Staying or living with family (temporary)). As shown in Table 6, Hispanic/Latinx clients are overrepresented in each residence category at program exit. The most common exit locations were permanent housing without a subsidy (26.5%), doubled up (22.4%), and permanent housing with a subsidy (22.2%). Almost seven percent (6.8%) of clients exited into homelessness. Rates were generally proportional to the HMIS client sample in terms of racial breakdown.





Table 6. Residence at Program Exit (N = 2,116) Hispanic Black White AI/AN NHOPI Totals Asian or Latinx Homeless 40.6% 43.4% 9.8% 3.5% 2.8% 20.7% 6.8% Permanent Housing/Renting 43.2% 42.3% 7.0% 6.0% 1.5% 24.6% 22.2% with subsidy Permanent 5.7% Housing/Renting 34.4% 47.8% 6.2% 5.9% 27.1% 26.5% without subsidy Institutional care 46.8% 2.1% 0.0% 19.6% 47.9% 3.2% 4.4% Correctional facility 1.6% 54.5% 39.4% 3.0% 0.0% 3.0% 17.1% 44.2% Doubled Up 39.4% 9.3% 4.8% 2.3% 25.6% 22.4% Transitional setting 26.0% 32.4% 47.3% 13.5% 4.1% 2.7% 3.5%

2.2 Predictors for Exit Destination

43.6%

47.7%

Other

Predictors for Exiting into Homelessness

To examine the effect of race and ethnicity on exiting into homelessness, multivariate logistic regression was conducted including only race and ethnicity. Using White as a reference group, race and ethnicity were not predictors of homelessness at exit among clients in the HMIS system (seen in Table 7).

3.4%

3.0%

2.3%

20.3%

12.6%

| Table 7. Race and Ethnicity as Predictors of Homelessness at Exit Among Clients in HMIS System (N= 2,111) | | | | | | |
|---|--------------------------------------|------|------|--------------|--|--|
| | Logistic Regression Model Parameters | | | | | |
| | B Wald $\chi^2(1)$ OR 95% CI | | | | | |
| Race*** | | | | | | |
| Black | - 0.04 | 0.03 | 0.97 | [0.65, 1.43] | | |
| American Indian or Alaskan Native | 0.50 | 2.54 | 1.65 | [0.89, 3.06] | | |
| Asian | - 0.39 | 0.66 | 0.68 | [0.26, 1.74] | | |
| Native Hawaiian | - 0.19 | 0.12 | 0.83 | [0.29, 2.37] | | |
| Hispanic | - 0.34 | 2.06 | 0.71 | [0.45, 1.13] | | |

Note. OR = odds ratio; CI = confidence interval.

Predictors for Exiting into Permanent Housing/Renting without Subsidy





^{*}p < .05, **p < .01.

^{***} White is reference group.

To examine the effect of race and ethnicity on exiting into permanent housing or renting without a subsidy, multivariate logistic regression was conducted including only race and ethnicity. Using White as a reference group, most race and ethnicity categories were not predictors of exiting into permanent housing or renting without a subsidy among clients in the HMIS system. Only Native Hawaiian and Other Pacific racial category was statistically significantly (p<.o1) associated with exit into permanent housing or renting without a subsidy. Specifically, compared to White clients, Native Hawaiian were almost 3 times more likely to exit into permanent housing or renting without a subsidy (OR = 2.68, p < .o1). This data is displayed in Table 8.



| Table 8. | | | | | | |
|---|-------------------------------------|---------|------|--------------|--|--|
| Race and Ethnicity as Predictors for Exiting into Permanent Housing/ Renting Without Subsidy (N= 2,178) | | | | | | |
| Logistic Regression Model Parameters | | | | | | |
| | B Wald χ ² (1) OR 95% CI | | | | | |
| Race*** | | | | | | |
| Black | - 0.21 | 3.15 | 0.81 | [0.64, 1.02] | | |
| American Indian or Alaskan Native | - 0.35 | 2.61 | 0.71 | [0.46, 1.08] | | |
| Asian | 0.36 | 2.61 | 1.44 | [0.93, 2.23] | | |
| Native Hawaiian | 0.98 | 14.50** | 2.68 | [1.61, 4.44] | | |
| Hispanic | 0.19 | 2.18 | 1.21 | [0.94, 1.55] | | |

Note. OR = odds ratio; CI = confidence interval.

Predictors for Exiting into Permanent Housing/Renting with Subsidy

To examine the effect of race and ethnicity on exiting into permanent housing or renting with a subsidy, multivariate logistic regression was conducted including only race and ethnicity. Using White as a reference group, race and ethnicity were not predictors of exiting into permanent housing or renting with a subsidy at exit among clients in the HMIS system (shown in Table 9). In the SPARC San Francisco community planning session, leaders had hypothesized that Black clients may be underrepresented in placements into permanent supportive housing. The data does not support this hypothesis, but further investigation into rates specific to "permanent supportive housing for formerly homeless persons" will shed further light on this question.





^{*}p < .05, **p < .01.

^{***} White is reference group

| Table 9. | | | | | | |
|--|--------------------------------------|------|------|--------------|--|--|
| Race and Ethnicity as Predictors for Exiting into Permanent Housing/ Renting With Subsidy (N= 2,178) | | | | | | |
| | Logistic Regression Model Parameters | | | | | |
| | B Wald χ ² (1) OR 95% CI | | | | | |
| Race*** | | | | | | |
| Black | 0.22 | 3.35 | 1.25 | [0.98, 1.59] | | |
| American Indian or Alaskan Native | 0.09 | 0.19 | 1.10 | [0.72, 1.68] | | |
| Asian | 0.39 | 2.72 | 1.48 | [0.93, 2.38] | | |
| Native Hawaiian | - 0.78 | 3.63 | 0.46 | [0.21, 1.02] | | |
| Hispanic | 0.10 | 0.53 | 1.11 | [0.84, 1.45] | | |
| | | | · · | | | |

Note. OR = odds ratio; CI = confidence interval.

2.3 CCMS Data

The San Francisco Department of Public Health (SFDPH) Coordinated Care Management System (CCMS) provided the SPARC team with aggregate data for FY14/15. The Coordinated Care Management System (CCMS) is a composite database of integrated medical, psychological, and social information about high-risk, complex, and vulnerable populations served by SFDPH. Source databases are located throughout the county in a variety of medical, mental health, substance abuse, housing, human service, and criminal justice sites. For the purposes of supplementing the HMIS data examined in this report, we looked at CCMS data for FY14/15 as an additional source of data of the racial demographics of people experiencing homelessness in San Francisco. There were 9,975 people identified as homeless through CCMS data systems for FY14/15. The table below shows the percentage of people in each racial/ethnic group (as categorized by CCMS).





^{*}p < .05, **p < .01.

^{***} White is reference group

| Table 10. | | |
|--|-------|------------------|
| CCMS Race/Ethnicity (N=9,975) | Count | Percent of total |
| Black | 3,337 | 33.5% |
| Asian / Pacific Islander | 417 | 1.4% |
| Latinx | 1,189 | 11.9% |
| Native American (AIAN-Indigena-First Nation) | 124 | 1.2% |
| White | 3,633 | 36.4% |
| Mixed Ethnicity | 67 | 0.7% |
| Other | 183 | 1.8% |
| No data | 1,025 | 10.3% |

DPH also provided aggregate data on homelessness history, age, and gender by race. Data is presented separately for White, Black, and Latinx records. Individuals identified as Asian/Pacific Islander, Native American, Multiracial ("Mixed ethnicity"), and Other are combined under the heading "All Other." These data can be found in the Appendix (Table 1).

In our initial analysis, various results emerged. For individuals identified as homeless in CCMS for FY14/15:

- A greater percent of Black individuals (53.5%) and "All other" (52.5%) individuals utilized shelter, in comparison to White (41.7%) and Latinx (45.4%) rates of shelter utilization.
- Compared to all other races, a larger percentage of Black individuals had been homeless for over 10 years. 45.2% of Black individuals had a span of continual or intermittent homelessness of over 10 years, while 29.8% of White, 36.8% of Latinx, and 19.9% of individuals from "All Other" races had experienced continual or intermittent homelessness for 10 years or more.
- Black individuals had a span of continual or intermittent homelessness averaging 8.64 years, compared to White individuals at 6.56 years, and Latinx individuals at 6.32 years.





3. Preliminary Findings from Qualitative Data

3.1 Summary

As of July 2017, the SPARC team has launched research in 5 communities in addition to San Francisco: Tacoma/Pierce County, WA; Dallas, TX; Atlanta, GA; Columbus, OH; and Syracuse, NY. Across the country, the team has collected 148 oral histories and conducted 18 focus groups.

In San Francisco, the SPARC team collected 29 oral histories during one week in February of 2017. These interviews were conducted entirely with people of color who were currently experiencing homelessness. Nine of the interviews were conducted in Spanish. All respondents were recruited at sites of service delivery in San Francisco, although several respondents were unsheltered at the time of their interview. During the same week, the SPARC team also facilitated 3 focus groups—one for people of color experiencing homelessness, one for direct service providers of color, and one for community leaders in the housing and homeless services systems as well as adjacent systems.

In reviewing the oral history interview data, our approach was to allow themes and concepts to emerge organically from the transcripts rather than approach the data with any set hypothesis. This method is referred to as a Grounded Theory approach.⁷ A team of four reviewers went through each oral history transcript and developed thematic codes. The team used NVIVO software to code the transcripts and run analyses.⁸ The majority of our analyses draws on the interviews, but we also include the focus groups to add additional depth to these findings.

This initial report focuses on the findings related to **pathways into homelessness** and **barriers to exiting homelessness**. We have focused on these areas in order to identify potential interventions. Preliminary findings from these areas of analysis are:

- 1. Pathways into homelessness were often relational in nature and involved:
 - a. Network impoverishment: It is not just that respondents were experiencing poverty—everyone they know was experiencing poverty, too.
 - b. Family destabilization: Strains on social support were often deep, damaging, and exacerbated by systems involvement.
 - c. Mental and behavioral health: Descriptions of instability and trauma coincided with descriptions of mental health and substance use issues.
 - d. Violence: Narratives of violence, particularly intimate partner violence, are common in the narratives of people who come to experience homelessness—particularly women.
- 2. Barriers to exiting homelessness were often systemic and included:

⁸ QSR International. (2012). NVivo qualitative data analysis software. Retrieved from http://www.gsrinternational.com/product





⁷ Charmaz, K., & Belgrave, L. (2012). Qualitative interviewing and grounded theory analysis. The SAGE handbook of interview research: The complexity of the craft, 2, 347-365.

- a. Economic immobility: People find it difficult to secure employment that pays a housing wage.⁹
- b. Lack of affordable housing: People cannot afford the increasing rent but have reasons they need or want to stay in San Francisco.
- c. Criminal justice involvement: A record limits housing and employment options.

We also found specific vulnerabilities for mothers, people who were formerly incarcerated or in the foster care system, people with mental health conditions, and people who had immigrated from another country. The sections below document these findings through excerpts from the oral histories and focus groups.

3.2 Pathways into Homelessness

The most significant feature of respondents' discussions of their pathways into homelessness is that their narratives demonstrated a striking social dimension. People did not come to experience homelessness solely through a lack of capital—they came to experience homelessness through fragile social networks. The fragility of these networks contains two main, interacting, weak points: lack of capital and lack of emotional support. The following quote from an interview respondent typifies how lack of capital can strain social support:

Interviewer: Okay so you came to San Francisco because you have family here. Was it to get away from Mom and Dad? To find a new life?

Respondent: Yeah. I mean to try to get up off of my feet, but then like I said, um, my sister was here, and I wasn't aware that she couldn't help me out.

Interviewer: Your sister couldn't help you. The older one that left and got married?

Respondent: Yes.

Interviewer: Sister was here. Respondent: But also doubled up.

The respondent was in contact with a sister but was unable to stay with her because she was doubled up. The respondent goes on to explain that the sister was renting out one room of a three-bedroom house for herself, her husband, and her kids.

From the other point of view, one Spanish-speaking respondent discussed how they were not able to offer support to their family.

Respondent: When I just arrived here, we rented an apartment among the family and so it is also difficult to share; it's not good...with family it is completely complicated so we end up like saying in the end, "you

⁹ "Housing wage" is the hourly wage a full-time worker must earn to afford a modest apartment while spending no more than 30% of his or her income on rent and utilities. It is based on HUD's Fair Market Rent (FMR), which is an estimate of what a family moving today can expect to pay for a modest rental home in the area. In San Francisco, the housing wage is \$58.04, compared to the national average of \$21.21. For more information, see the National Low Income Housing Coalition's report, *Out of Reach 2017* (http://nlihc.org/oor).





know what, each one to their own stuff." Family doesn't work, there are always problems here and there, one gives the rent late, another one is like, "you didn't clean the bathroom." It's just that you this and the other or when they finish your things in the refrigerator and you just bought the stuff. And you say "Hey, he didn't ask me for permission and took it from me." You can't cook because everyone is sitting and you are going to eat in front of them. Then you have to cook for everyone; but where does the money come from? And I'm a person who can't see someone sitting there and I not offer him something. My husband ended up saying, "Listen, we're going to be without a penny if you keep making food for those who come in. So, we have to pull out." So we pulled away.

These comments demonstrate a key function of the fragility of these networks. The respondent is clear that living with family is possible only if everyone is able to contribute to household costs and maintenance This in an important pattern in the data: people are not unwilling to double up, to take people in or to live in another person's home—but they do not have the resources to accommodate the additional consumption of resources (e.g. food and household goods), and that in turn strains relationships. These findings reflect the well-documented racial wealth gap nationwide; in our analyses, our team has begun to refer to the qualitative experience as network impoverishment. There is no extra money anywhere in the respondent's network so, as a result, there is no flexibility in community-level safety nets. In other words: it is not just that our respondents are experiencing poverty—everyone they know is experiencing poverty, as well.

Within an impoverished social network, family may be present but seen as an unreliable support because members are dealing with their own instability. For example, one respondent described how their mother's instability was a factor that lead to their experience of homelessness:

Interviewer: So, what are the sort of main factors that led to your experiencing homelessness? Like, what happened?

 $Respondent: Um, I \ chose \ to \ lose \ my \ place... \ It \ was \ the \ only \ way \ I \ can \ get \ my \ mom \ to \ get \ out \ of \ my$

house...So, I gave it up, I let them evict me out.

Interviewer: Why did you need to get your mom out of your place?

 $Respondent: She \ basically \ took \ over \ my \ kids \ as \ well \ as \ doing \ drugs, \ selling \ drugs \ out \ of \ my \ house. \ After \ I$

told her to stop she wouldn't stop, and she was just acting like that was her place.

Interviewer: Where is your mom now?

Respondent: On the streets somewhere doing the same thing she does all the time, getting high.

Interviewer: Can you tell me more about your relationship with your mom?

Respondent: There wasn't really one.

Interviewer: So, how did she wind up moving in?

Respondent: She got kicked out of her girlfriend's house and then asked me if she can spend one night there. I told her there ain't no space for her so she can't to move in, and she is like, "Oh no, I just want one

night." One night led to months, months led to years.

Another respondent discussed how he could not stay with his brother due to his brother's ongoing substance use disorder, and he could not stay with his sister due to longstanding interpersonal issues related to money:





Interviewer: You knew as soon as you left your wife's apartment that getting a tent was what you wanted to do next, or [did you have somewhere else to go]?

Respondent: Yeah, I mean I knew it's what I was going to do next, because I really didn't have nowhere to go. You know, I got a brother's house that he wouldn't mind me living there, but he's in addiction. I don't want to be around addiction. You know, me and my sister don't get along at all, you know. She took my landlord inheritance when I was locked up. \$10,000, so I ain't spoke to her since.

It is important to note that strains on social support can be deep and damaging. Family disintegration was a prominent theme in respondent histories. The presence of mental health and/or substance use disorders in someone's network often triggered homelessness, in addition to individuals blaming their own drug use for why they became homeless. These three brief excerpts from separate interviews highlight this trend:

#1

Interviewer: And what were the pressures happening at home with your mom? Respondent: She was just, like, up all night and, like, partying and, like, drinking and, like, running in and out, and then it's just, like, I have school in the morning and after school, like, I have to go to work and then I have to come home, like, and do my homework and then go to sleep, but I'm not getting any sleep because she's running in and out and she's partying and being loud and I'm telling her, like, "Oh, like, I have school in the morning, like, can you keep it down?" "No, I'm grown, I can do this." Like, "I'm your mom; you don't tell me what to do." And I'm just like, "oh, okay." So, I left.

#2

Respondent: I was with an aunt after my mom passed away and then I ended up moving with my godmom. My godmom ended up moving to Oklahoma and she left the house and she gave her house, her Section 8 to someone else. So I was living with someone else in this house. And so it was -- it was a friend of hers she was, you know, a nice lady but she did drugs so it just became very uncomfortable.

#3

Interviewer: Okay, you said that you were, you said you spent a lot time in group homes and foster care and shelters. Is that because -- so you obviously weren't staying with your mom, and you mentioned you don't really have a relationship with her what about your dad?...Why weren't you able to stay with him when you were growing up?

Respondent: Oh no he was doing drugs and stuff. But he would still find ways to be able to see me. I stayed with his mom for bit and then from there I went to my mom's mom, and we stayed with her until she couldn't take care of us no more.

When interpreting these data, it is important to remember the role housing and financial stabilization plays in preventing and addressing the challenges of substance use disorder. People with disabling medical and mental health conditions often rely on public safety nets for support when their own social networks are not reliable. Two Black women (one interview, one focus group member) reported falling through the cracks of these systems:

#1





Respondent: I was at the [Redacted program name]. It's like a program for mental health, because I'm bipolar and I have post-traumatic stress, but then they're supposed to help you find housing, like going to a co-op...But then at the last day, they didn't do the co-op because they said that my bipolar symptoms were too high. So then they discharged me to the street. So at 7:00 at night time, and then I end up having to leave all my stuff there and then go out on the street.

#2

Respondent: I feel - I feel like my - like me being schizophrenic, it played a big part. And I think I've been manipulated a lot. Because of I can't really well think the way I should. And I forget a lot of things. Instead of people helping me, you know like I've been evicted because I don't - I forgot to pay my rent. You know and I do everything in my power to you know remember everything I'm supposed to do. And I forget.

This theme of mental health or substance use issues driving program disengagement or expulsion was corroborated by respondents in the provider focus group:

Respondent: I can tell you name after name of how many folks we've seen, that the Department of Public Health in the city dumps because they feel they're being-they are not in compliance they're not compliant, they're not following what the health team says...

Additionally, for the women of color we interviewed, intimate partner and relationship violence often characterized the stories of social support collapse. Boyfriends, husbands, and fathers were abusive and cited as reasons for their experience of homelessness.

#1

Interviewer: Okay. [You were doubled up] With parents 11 years. Mhm. What made you sort of move on

or move out and become homeless? How did that happen? Respondent: Um, I had a domestic issue with my father. Yeah. Interviewer: So that precipitated him saying you should leave?

Respondent: Yes.

Interviewer: Or you decided to leave?

Respondent: Yes.

Interviewer: Which way - was it your decision or his decision?

Respondent: Um, both, 'cause like I actually called the police to, you know, help me out and they said it's

his home and for me to just do what I have to do. So I just left.

#2

Respondent: No, well the thing is, like I said, I was in an abusive relationship from day one of marriage, since 1998. I lived with him for my child's sake. I was alone here and I was caged basically. Then I was quote "no good for anything," even though I had a good education from India. And then I slowly started, I'm a very friendly person but I was not allowed to have friends. So that's one of the reasons that we uprooted so many times, so moved. So my husband is, I want to say he's a good guy, but my case manager says otherwise and they say, "no he's not and don't say that." So you know, big story short and I had to move out but basically I did not know how to get out of that situation.





The experiences of recent immigrants can also be partially understood through the lens of network impoverishment and fleeing violence. Of our interviews conducted in English, six participants were immigrants (from Senegal, the Philippines, India, Algeria, Nicaragua, and Somalia), and every interview conducted in Spanish was with a participant who had immigrated (from Honduras, Mexico, Columbia, Guatemala, and Nicaragua). People who left Latin American countries were often escaping community violence perpetrated by gangs, and experienced homelessness in the U.S. because there were no family or friends, or the family or friends they had here were not consistently able to support them.

Respondent: It's sad because, when I arrived here, at this country, I came with my son, so I came looking for political refuge because when I came, the situation [in my home country] is very difficult because of the gangs charging taxes from us, and we probably don't have enough.

Interviewer: They charge taxes?

Respondent: Taxes from us, and it's something that we probably don't have. And if we don't have it then they try to take away the little that we do make, or they take us out of our homes, or they kill a relative so that you see that – so that we see that they don't play...That's when a person decides to look for a better life.

As the team continues to analyze the data, questions include what capacity, if any, do individuals in them have to respond to the levels of stress they're being exposed to. Due to multigenerational trauma and poverty, respondents and their families may have limited access to resources or emotional capacity to respond to highly stressful situations without engaging in suboptimal coping strategies. When considering how to engage in family stabilization it is important to think about how to engage people in systems of support that don't create further structural barriers or difficulty, such as an open case with child protective services or encouraging doubling up with connections whose substance use may create an unhealthy and unsustainable living situation.

3.3 Barriers to Exiting Homelessness

Factors that lead to homelessness and barriers to exit may be similar depending on the point in time. In our analysis, we distinguished these factors based on how people answered our questions (e.g., What led you here? vs. What has not been helpful as you try to get housing?). The burden of a criminal record (in particular a felony status), lack of economic mobility, and lack of affordable housing in the city appear to be the most significant hurdles for people of color who are experiencing homelessness in San Francisco.

Involvement in the criminal justice system, a system that has inequitably targeted Black, Latinx/Hispanic, Native, and other historically marginalized communities, posed a barrier for people trying to exit homelessness. The following excerpt from a respondent who identified as a Black man highlights the burden of a criminal record on obtaining employment and housing:

Interviewer: What about since having a record? Was it harder to get a job?





Respondent: That's –of course it's harder to get a job, because they set a lot, a lot of rules and regulations where you commit a crime certain jobs you can't get. And that's some of them good high paying jobs, professional jobs. Where people don't want trust you around money, very expensive properties and stuff like that...we even work in the penitentiary and the factories, even fight fires and stuff. You know what I'm saying.

Interviewer: Yeah.

Respondent: And then you come out, you're not trusted now. You can't even be no fireman, you can't work in no factory. Wait a minute, I did all this work for 13 cents an hour in the pen. You know, doing mattress factories, furniture factories, all of these state buildings that got furniture, we put them together. You do laundry, laundry for mental hospital, for other institutions, and you know, license plates and press license plates and detergent plants. All this stuff that they call you qualified and train you to do, and you get out here they won't hire us.

Interviewer: Right.

Respondent: For the real money.

Interviewer: Right.

Respondent: So and then they scare the public they believe that everybody that comes out of prison shouldn't be able to get a job. You don't have no good credit. You know what I'm saying, so it's not that you have bad credit, it's just you never established no credit. You know, so I mean people will try to get in housing and stuff like that. They not just doing a background check on you, they doing a credit check on you...so it's a whole combination of why we not getting housing.

At the time of the interview, the respondent expressed motivation to find a job and an apartment (in that order). He was more recently homeless than most people we interviewed, and described his process:

Respondent: I don't really know. I'm just hoping for the best. All I know is I'm not giving up. I'm putting in applications. My resumes are out. I'm doing part time work with pop up restaurants. Doing gardening work...So I'm trying to find a full-time position, 40 hours a week job, and then I could pay that \$1300 - \$1400 for a little studio or something that they need. That's what I'm doing. I know how to get out of this, it's just that it's slow. You know, so I'm going through the progress.

However, another participant explained how he was accessing programs for assistance because he is hoping to avoid going back to jail, but he was more discouraged. He had been homeless and in and out of jail for fifteen years:

Respondent: But, you know, it—you know, it can be a very discouraging period, you know. But you know, I'm getting little help. I don't want to go to jail no more—I know that, you know, because I definitely won't get no help while I'm in jail. They may—They got little in jail—They got, I guess, the little things that they say, "Get this assistance, that assistance." You know, you—it's hard; it's hard to absorb correctly the information that can help you, you know?

Later on, when he discussed wanting a job, he said:

Respondent: I got 2 GEDs, a high school diploma, college transcript and technical certificates. And I'm still homeless because even with all that, it's still hard to get placed into a job. And at this point, a job is a





job. And me, I would clean your windows eight hours a day if you pay me minimum wage or whatever. You know, pay me a quarterly, you know? Because I want to live—I want the American dream, too...Forgive me for my past crime. Let me move on, man.

Respondents are aware of the way their criminal records or past methods of survival impede their housing and employment goals.

Regardless of a criminal record, there were many histories of economic immobility and underemployment reported in our interviews. Respondents had extensive job histories but none of them paid adequately or provided full time hours. The following man's work history typifies the stories of underemployment and inability to advance economically:

Respondent: I'm homeless. I did have a house out in Fairfield, I shared with my sister, but there's no work here in Fairfield. The rent here is so high, it made me to be homeless because I can't afford \$3500 a month. Most people can't unless you're college educated. I'm not college educated. Back in the '70s and the '80s, we had a lot of factory jobs where you could pay the rent. I remember I was paying \$400 a month for rent and car note and other stuff too. I can't afford the rent. A lot of people are homeless now, especially black people are homeless now because the rent's so high...My main thing is there's no consistent work out here. And jobs are here, it's just it doesn't pay well.

Interviewer: What is it that makes you lose a job, do you know? Is it because it's temporary work, it's seasonal?

Respondent: Most of my jobs are with temp agencies.

Interviewer: You don't get the job to hire?

Respondent: Right, it's casual, it's on call jobs. As they say it's on call. They don't want to give you 40 hours a week a lot of times. The jobs don't pay -- it's not staying up with the rent pretty much. There's other things besides rent, you've got to eat, car notes if you have a car. The job industry is changing. It's all high tech now. Like I said, I didn't get that education.

These narratives reflect the persistence of employment discrimination and education inequity in the United States. For example, one 2017 study found no change since 1989 in the levels of hiring discrimination against Black people. Research continues to document racial inequities in the quality of education that students of color receive, reporting disparities in school discipline, in higher education placement and outcomes, and in the economic mobility that a college degree grants.

Latinx participants shared similar narratives. The following excerpt is from an interview conducted in Spanish with a man from Honduras who immigrated eight months before:

¹³ Chetty, R., Hendren, N., Jones, M. R., & Porter, S. R. (2018). *Race and economic opportunity in the United States: An intergenerational perspective*. Equal of Opportunity Project: http://www.equality-of-opportunity.org





¹⁰ Quillian, L., Pager, D., Hexel, O., & Midtbøen, A. H. (2017). Meta-analysis of field experiments shows no change in racial discrimination in hiring over time. *Proceedings of the National Academy of Sciences*, 114(41), 10870-10875.

¹¹ Skiba, R. J., Michael, R. S., Nardo, A. C., & Peterson, R. L. (2002). The color of discipline: Sources of racial and gender disproportionality in school punishment. *The urban review*, 34(4), 317-342.

¹² Ross, M. (2015). Back to school a mixed picture for U.S. young adults. Washington, D.C,: The Brookings Institution.

Interviewer: What are the factors that have led you to this situation of being homeless? Respondent: Well, on one part it's employment. Employment, and also, the rent that is now increasing, because, it's something that we can't pay. \$1,300 for a room; it's too expensive. And maybe we need to try and help our families get ahead, and maybe with the little we have with our jobs, and the little we earn, we can't pay \$1,300. We might earn \$800.00 in two weeks, or \$600.00. You can't pay that monthly. That's why it doesn't feel – it feels really bad. Like I said, that's why I'm trying to learn English, so that I can guide myself better, and do jobs that I'm probably able to do.

The Spanish-speaking participant hoped to get a better job once he learned English. Language was often described as a barrier by those we interviewed in Spanish, but their inability to secure full time jobs paying enough to afford San Francisco rent was not very different from the stories told by native English speakers. The below quote highlights the experience of a 22-year old Black woman from the Bay area:

Interviewer: So you mention that you were working, what do you -- what have you done for work? Respondent: I would do little jobs because I didn't have a lot of experience. I have GED but I mean my diploma but I -- I just did little jobs like I had worked at St. Anthony's at their clothing store. I would get a job at the center through the shelter where I was living at and just to get a little funds there. And I worked at -- I ended up, you know, bettering myself and working at Macy's seasonal, so yeah.

Many respondents were currently employed part-time while making use of homelessness response services. Reports like these suggest revisiting core components of job readiness:

- 1. If the issue is not employment but employment with an adequate wage then perhaps the curricula need to be targeted towards enhancing people's skills for career-oriented industries that are in demand (e.g., software development, nursing, and CDL licensed drivers).
- 2. With regard to job readiness in general, it is worth considering whether or not those program dollars could be better spent merely supplementing the wages of underemployed people experiencing homelessness. This would require much finer program analysis.

Most respondents had significant work history and did not seem to have difficulty securing employment—they had difficulty securing employment with a living wage. It is also worth noting that a few respondents cited that they felt racial discrimination most acutely when searching for jobs and housing. Respondents repeatedly made it clear that while sometimes in the world of service provision racialized bias seemed nuanced or difficult to track, it was more apparent in housing and employment. The quote below from a Black man in our focus group exemplifies this experience:

Respondent: Um me, personally, I've ran into a lot of problems where a lot of the different programs will cater to a certain race and a certain type of person. And although I would qualify for those programs, I'll go in there and I'll sit down and I go through all the - that I need to go through, just to be told at the end well you don't qualify because you don't fit into this demographic...But it's like you know the guy that was in front of me, he qualified for it. And we have the exact same situation. Me and him just sat there and talked for an hour and a half, and we have the exact same situation. How can the person that came in





behind me, how can they qualify? ...And they do it not just in - in different programs but also with housing, jobs I've ran into that big problem, whereas you know I will have all the qualifications, they just won't hire me. Because I don't fit the image that they want.

Interviewer: What is the image? Yeah, we'll come back. What's that image?

Respondent: The clean-cut, fair skinned image as opposed to dark skinned, rough image.

Women of color also explicitly expressed feeling discriminated against as women of color with children.

Interviewer: And have you tried to find another apartment?

Respondent: Well, not near here because you see that they are very expensive; rents around here are very expensive. My partner has always wanted us to go searching further; but the truth is that I have never paid him much attention due to the conveniences here.

Interviewer: And do you believe that racism affects the experiences of people who are trying to find a home?

Respondent: Suddenly I think so. Yes racism, the fear of I don't know if they will accept me with so many children. I already feel they're so many – three – but here it isn't – sometimes even a puppy is more accepted than children. Not everyone likes children to be out there playing, running...

Mothers were most often housed when living with a partner, depending on the income of their partners to make ends meet. Among the single women we interviewed, leaving a partner was often a precipitating factor for homelessness. It is clear that it is almost impossible for single low-income mothers to pay market rent in San Francisco. However, when the participant considered moving outside of the city, it is not attractive "due to the conveniences" inside the city.

The final key barrier to exiting homelessness was the lack of affordable housing in the Bay Area. This was both a barrier to exit and a factor precipitating homelessness. While rent increases strain individuals and families and have led to homelessness in the city, people are not readily willing to move far from San Francisco. The woman above discussed the "conveniences" of the city, but for many people it is more than that. Resources and family members are in the city. The following two excerpts exemplify this trend:

#1

Respondent: Here without rent control it pushes the homeless -- well it makes it harder for the homeless to even try to rent anything here you know, and if we do, it don't guarantee you that the next following month is going to be the same. They can jack the rent up on you in a heartbeat and there is nothing you can do about it, and so that's one of the downfalls to being in the city. A lot of them will leave the city and live on the outskirts Oakland or something like that. At the same time they consider this all the Bay Area but it's so different. You can't live in Oakland and have medical out here or vice-versa, it's the innercity city thing and it's like it restricts a lot of the movement.

Interviewer: So there are benefits of being in the city?

Respondent: Medically, medically being in the city is the best thing if you have got medical here. There is no other medical outside of it that can match it.

#2





Respondent: Yeah, I'm going on Craigslist and looking up there for low-income housing.

Interviewer: And what that's been like?

Respondent: Struggle. Some of them are too far away, some I don't even know how to get to.

Interviewer: So, what would be the ideal housing?

Respondent: A nice little studio out here where I can still be around my kids.

One respondent highlighted the frustration she felt when she tried to communicate to her providers at a transitional housing program that she needed to stay in the city.

Respondent: So I went to divorce with my ex-husband and so part of the custody is that I cannot leave the city. I have the custody of the child. We have shared joint legal and physical custody, but one of the court's agreement is that I have to stay in the city...but the thing is that I told that to [Program Name] since the beginning when I entered into the program, and they knew that I cannot leave the city...I have alimony and child support, it used to be \$1348 a month but it has been reduced to a \$1000 a month, and I have the subsidy for having done the [Program Name] subsidy program, and they allow me to rent to up to \$1600 a month. I had it since I was at [Program Name] like six months during I was at [Program Name] but they never helped me with that. I was trying to apply at the Mayor Office of Housing, looking at Craigslist, One Home Bay Area, go Section 8, everywhere by myself. They kept telling, "oh you know there is no housing in the city, you have to move, you have to move there is no housing in the city." That's the only thing they know to say.

These questions of employment access and housing stock are intimately tied to larger questions regarding gentrification and access to desirable neighborhoods. These issues are especially important in the case of people with prior criminal justice system involvement, living with substance use disorders, or families with children. The ability to live in desirable neighborhoods related to the ability to avoid violence, exposure to drugs, and quality educational opportunities. As we look to create opportunities for people to exit homelessness it will be critical to continue to link these strategies with larger efforts to break cycles of intergenerational poverty and create and/or maintain mixed-income neighborhoods with quality housing stock.





4. Discussion: Promising Directions

The sections above report SPARC's initial quantitative and qualitative findings on the experiences of homelessness of people of color in San Francisco. The qualitative themes emerged from the data independent of the Structural Change Objectives selected by San Francisco's SPARC working group. As mentioned in the executive summary, San Francisco chose to focus on three areas of structural change:

- 1. Opportunity and capacity building for employees of color, with the goal of equitable representation in leadership.
- 2. Equitable funding distribution, specifically focused on programs and geographic areas that serve the most people of color.
- 3. Equitable placement into housing for people of color (i.e., the demographics of people placed into housing should reflect the demographics of people using homeless services).

The research summarized in this report helps guide this work and suggests additional areas for short and long-term action. For example, respondents discussed differing levels of satisfaction and comfort receiving services at existing programs. Rather than working on equalizing access to well-resourced programs, our data supports the importance of increasing resources and capacity in programs that already primarily serve people of color (and are often the service settings where respondents felt most comfortable). Additionally, while the initial HMIS analyses showed a similar rate of people of color entering housing with subsidy as were experiencing homelessness, the limitations of the data set (e.g., high rate of missing data and inconsistency in data collection across programs) are substantial enough that we recommend that the city continue advancing efforts to track housing outcomes by race at the program level and with new consolidated data. The stories we heard repeatedly demonstrated that the network impoverishment of communities make homelessness seem inevitable. In this context, how can communities strengthen and stabilize these networks? What are the necessary investments to build assets in communities of color? How does San Francisco return economic mobility to some of its most disenfranchised citizens? How should that work flow through an anti-racist lens to ensure that it is strengths-focused and empowerment-based rather than paternalistic? How do systems interact to effectively serve people with medical and mental illness?

As we continue to explore the data from this initiative, we are aware that a number of research questions deserve additional attention. In the next section, we discuss the implications of our findings and highlight potential areas of future research on race and homelessness. In the final section, we identify a concrete list of recommendations.

4.1 Economic Mobility for Communities of Color

Economic mobility is key to ending homelessness but remains elusive in many communities. As was detailed in the qualitative section of this report, respondents often had a rich job history but had a great deal of difficulty securing employment that would pay a living or housing wage. Barring a significant shift in federal or state policies regarding minimum wage, it is unlikely that our current workforce





development approach will be sufficient to end homelessness. Simply put, if someone comes to experience homelessness while working for minimum wage, transitioning to a different minimum wage job will not make a substantial difference in their life.

The SPARC team has begun to examine in greater detail what respondents had to say about their employment history and employment search. One area requiring more in depth analysis is employment discrimination. Unsurprisingly, respondents have repeatedly reported experiencing interpersonal racism over the course of their job searches. They have also discussed the role of structural racism in preventing them from attaining career-track jobs, reporting, for example, inequitable access to education or skill development (including vocational training).

As we continue to investigate concrete and immediate steps that we could take in order to drive change in our communities, the SPARC team has begun to look more closely at the way communities spend workforce development dollars. A potential direction to take workforce development would be to reduce the size of cohorts moving through programs and intensify the skills being acquired. For example, rather than moving 150 people through a soft skills development program it might be more beneficial to move 20 people through a UX design code academy that is connected to a job placement possibility at several design or technology firms.

Additionally, as mentioned above, it will be important to think about what economic stabilization looks like. Our findings point to upstream intervention sites that are community-based and focused on stabilizing fragile networks through necessary infusions of capital—either through targeted subsidies, flexible emergency funding, or policies that better facilitate pooling income.

Finally, we should consider how soft skill development programs are frequently constructed around behavioral norms for professional conduct that have been established and advanced by White people. What does it mean to engage a 17-year-old Black person in a program that essentially tells them that their way of interacting the world is the wrong way?

These kinds of questions are important to consider in the construction of workforce development programs but also with regard to the ways in which we consider advancing staff of color on our teams. As we examine why certain staff members do or do not advance an important consideration must be whether or not they are being passed over because they are not cultural matches with senior leadership. As one respondent stated, "Senior managers want to know that the people around them will think like them and respond to situations the same way that they would. Sometimes it seems like they don't choose Black staff or staff of color to advance because they don't think we're enough like them culturally."

As we continue to break down the ways in which interpersonal and structural racism exacerbate each other, it could be helpful for programs to engage in honest dialogue about how personal bias might be enabled by structural factors. In the case of supporting people of color in their job search, it might mean understanding a person's context and giving second chances, rather than saying, "They've had three





weeks to get an interview and they still haven't." In regards to staff of color, it might mean re-working job descriptions rather than saying, "I'm not promoting them because they don't have a B.A.—not because they're Black."

4.2 Upstream and Downstream Stabilization

Our qualitative data suggest that destabilizing factors often occur well before people come to experience homelessness. Upstream stabilization may be best achieved through the development of short-term flexible subsidies. People do not always need large amounts of money, or even money that is dedicated specifically towards housing or utilities. Many respondents expressed having initial difficulty with a non-rent related financial burden. Common examples have been car repairs or food. However, without the money to pay for these non-housing areas, a crisis can rapidly develop. Respondents who cannot pay for their car repairs may be unable to get to work and subsequently lose their jobs, or those who cannot afford food for the whole household may kick adolescents or emerging adults out of the house in order to free up resources for the very young or very old.

Stabilizing these households who are on the precipice requires immediate infusions of capital. However, these subsidies have to be uniquely flexible to cover a wide range of one-time needs. This would represent a new way of thinking about subsidy spending—discretionary spending pots that could live at agencies and be accessed as needed by community members in crisis.

Such thinking may be new for homelessness response programs, but spending models of this kind have existed for many years in the faith community. It's not uncommon for churches to step into exactly the void that's being described. Unfortunately, network impoverishment affects faith communities as well. As resources become scarce in the broader community, there is less ability to 'take up the collection plate' in order to the needs of someone in crisis. In order to address the hemorrhaging of people of color into the population experiencing homelessness it will be necessary to replenish (or establish) these kinds of community level safety-nets.

As an example, San Francisco is considering expanding flexible housing assistance. As HSH develops its new coordinated homeless response systems, the department plans to expand the focus on prevention, "Problem Solving," and rapid rehousing assistance for multiple subpopulations. Short-term interventions of this kind can prevent or end homelessness quickly and connect people to other systems and resources, such as employment, health care, child care, and a range of services to support greater stability. "Problem Solving" can provide light support to those who can avoid homelessness or leave quickly through the use of their own resources and skills.

Downstream stabilization focuses on securing families or individuals in housing units that they move into after exiting the homelessness response system. In these cases, two things need to be evaluated:

1. Do our policy prohibitions against doubling up make sense?





2. What supports, including financial payments, would be necessary in order to facilitate successful family reunification (for people of all ages)?

With regard to doubling-up, we need to begin to ask whether or not (middle class, White) norms of how housing needs to function make sense for all. Communities of color that have a history of living intergenerationally or with other close family or friends may protect against homelessness. Frequently, respondents would discuss being moved into housing on a time limited subsidy knowing that they would not be able to afford the housing once the subsidy ended. We believe this situation to be one of the key drivers of the rapid cycling phenomenon seen within family homelessness. The young women of color typically heading these households are not able to secure an income that will offset the loss of the subsidy, so they rapidly come to experience homelessness again. However, if subsidies were adjusted to be shallower, but longer, and families exiting the shelter were encouraged to pool their subsidies and live together, this may provide enough time to stabilize and locate employment. As these options are explored, it will be important to advocate against the "cliff effect," or policies that cut or lessen benefits as incomes increase, so that despite new income families end up further behind.

In addition to economic stabilization, encouraging living together allows for new networks of social support to be entrenched. Moving in this direction may help encourage supportive relationships within communities that are very frequently missing large numbers of people due to the continued predatory involvement of the criminal justice system.

This method could also assist with stabilizing youth, who could potentially return home but had not (and had no plans to) because they had been thrown out for being unable to contribute to household expenses. If subsidies allowed them to assist with rent payments or food in a meaningful way, it may be possible to negotiate their return to a stable living situation. San Francisco is beginning work in this area. The City was recently awarded a two-year demonstration grant from the U.S. Department of Housing and Urban Development (HUD), known as the HUD Youth Homelessness Demonstration Program (YHDP), to plan for a systemic approach to meet the needs of homeless youth. This grant will provide resources to analyze the current system, identify gaps, and develop a detailed plan with articulated vision and goals. It will also allow for the creation of new program models that are more flexible and innovative. 14

Finally, many respondents also expressed that family reunification was not possible for a variety of reasons, not all economic. Frequently these reasons involved significant social stress that may have

¹⁴ Along with its partners, HSH is developing a Coordinated Community Plan to Prevent and End Youth Homelessness. The plan includes the design for a youth Coordinated Entry process and shared approach to assessment and targeting. Community members, including youth, have called for youth-centered crisis intervention and response services, along with emergency resources for people living outside. Welcoming services available to youth who may need a few hours of respite and connection to resources has been identified as a gap in the current system. Community members have specifically asked for a drop-in center in neighborhoods where youth typically congregate. Strengthening the system will also include more flexibility in program models and allowing youth to change housing programs as their needs change. Potential examples include host home models, engaging networks of extended families and supportive adults, waiving the time limits for rental assistance, extending aftercare and supportive services after rental assistance ends, providing ways for youth to exit from youth-targeted housing assistance into the adult system, and providing youth-targeted mobile case management and support services.





begun with money, but these problems are not solved simply by subsidizing the return; the mistrust and anger that developed was real and often overwhelmed any desire to return to a stable living situation. In order to successfully facilitate reunification (and stabilize people downstream, e.g. after they'd been re-housed) it will be important to provide ongoing services in the form of family therapy and other counseling in order to help heal social ruptures. While people are often able to mend these bridges on their own, the support to do so is often lacking. In order to re-house people (especially youth) we must treat their grievances not as temper tantrums but as real obstacles standing between them and a home.

4.3 Hispanic/Latinx

Existing literature frequently refers to the "Latino paradox" with regard to the idea that the Hispanic/Latinx population in the U.S. shares risk factors for homelessness with the Black population, but they are underrepresented, not overrepresented, among people experiencing homelessness. Despite this discussion in the literature, we have increasing reason to suspect that these theories are based on inaccurate reporting and weak methodology for counting people experiencing homelessness. Emerging from our research is the finding that in communities that have more intentional outreach to Hispanic/Latinx communities, numbers tend to trend upwards towards overrepresentation.

This idea was supported by our San Francisco quantitative data, which noted that while Hispanic/Latinx individuals were 15.2% of the general population, they were only 11.4% of the individuals counted within the HMIS system. However, the 2016 San Francisco PIT count data found 21.2% of the total population encountered through the count was identified as Hispanic/Latinx. This may suggest that a large number of individuals are avoiding service engagement. While reasons for this are still poorly understood, one driving factor may be that some Hispanic/Latinx individuals are traveling in 'mixed-doc' groups. This refers to the varying immigration status of the members of the family/group. Some members may be documented, but the entire group avoids service connection for fear of engagement by ICE or other law enforcement agencies. Unfortunately, in our current political climate, that avoidance is likely to intensify.

Our preliminary research suggests the need to focus our attention in meaningful and immediate ways on reaching out to Lantinx communities. This will require deliberate cultivation of Spanish-speaking outreach teams made up of members of the communities that they hope to engage. Ideally, these teams would have preexisting relationships that they can leverage to build trust. Additionally, programs might begin to take steps to segregate documentation and immigration status from other components of a client's file and hold it on a "need-to-know" basis, similarly to how HIV/AIDS information is managed under HIPPA. While this policy change would not have a legally enforceable edge, it would be a step towards building trust with clients regarding whether or not their immigration status will be shared with other staff—and to what extent the circulation of that information puts them at potential risk. Moreover, we might begin to more carefully identify what services we actually require immigration or citizenship information in order to activate. A number of services that may currently





request this information may in fact not actually require that it to report to funders or screen individuals in or out of services.

By limiting requests for information regarding documentation status to only those services that absolutely require it and putting strict firewalls around that information, we may begin to have better engagement with Hispanic/Latinx communities experiencing homelessness. With better engagement will come a more accurate understanding of rates of homelessness, characteristics, and needs.

4.4 Trans* People of Color

Our current understanding of the needs of trans* (used here to refer to all trans, gender-expansive, gender-fluid, or non-binary individuals) people experiencing homelessness is similarly limited. While the SPARC team has been lucky enough to engage a number of trans* youth and some trans* adults in our research, we are very far from being able to characterize patterns in trans* experiences of homelessness. While we expect that social rejection and stigma play a role in pathways into homelessness, we do not yet have enough information to suggest appropriate structural interventions.

One obstacle in the way of researching trans* experiences of homelessness is inconsistent administrative data. While there's a great deal of anecdotal evidence around trans* people experiencing homelessness at greater rates, there's still a dearth of data on trans* individuals in service systems. Because of this, we are left with an inaccurate understanding of how many trans* individuals are in need of service, and we are not able to estimate rates of disproportionality across race and gender identity. We advise programs to work diligently to capture sexual orientation and gender identity/expression (SOGIE) data so that policy decisions can be more informed.

Finally, it is important to track requests that trans* clients are making of systems. While the SPARC team will continue to analyze the available data, we believe that the best resource available to programs and systems leaders are the voices of people who are currently utilizing services. By creating a way to track (and document responses to) requests or complaints that come from trans* clients, systems can use the knowledge that's already there while waiting for better research to emerge.





5. Recommendations

Given the disproportionate impact of homelessness on people of color, it is essential to center race in conversations, programs and policies designed to end homelessness. San Francisco, and all communities, must work to change the systems that lead to people of color being disproportionately pushed into homelessness. Simultaneous to the larger systems change efforts that must occur to prevent people of color from becoming homeless, the Homelessness Response System must implement policies, practices and programs to respond in a race conscious and equitable manner.

Beyond the Homelessness Response System, the social and political systems that push people of color into homelessness must be changed. The high rates of incarceration of people of color impacts homelessness, the failure of the child welfare system leads to homelessness, the inequities in our education and economic systems contribute homelessness, and institutional and interpersonal racism in our housing systems directly result in homelessness. A racial equity lens must be taken to all of these systems to help slow in the inflow of people of color into the Homelessness Response System.

It will take the entire community of San Francisco and beyond to make the systems changes needed to prevent the humoring of people of color into homelessness. While many of the needed changes are beyond the scope of the Homelessness Response System, there are many policy and practice reforms that HSH and their partner providers can take today to address the relationship between racism and homelessness.

- 1. Continue to focus on designing a racially equitable Coordinated Entry system. The central part of HSH's systems change work is the creation of a Coordinated Entry system for all populations experiencing homelessness. Coordinated Entry organizes the Homelessness Response System with a common, population specific assessment, a centralized data system, a "by name" database of clients, and a prioritization method. This directs clients to the appropriate resources and allows for data-driven decision making and performance-based accountability. The Coordinated Entry process is organized to serve three subpopulations: adults, families with children, and youth. The process is comprised of four parts: Access, Assessment, Prioritization, and Referral. Continual review of data from this process for racial disparities can assess whether housing interventions are sufficiently provided to people of color who come into contact with the system. Coordinated Entry can be a tool to go beyond ensuring that racial discrimination and disproportional access in not occurring within the system – it can be used to affirmatively house people of color. Racism is a well-documented vulnerability for homelessness and could be considered in San Francisco's Coordinated Entry prioritization tools. Coordinated Entry is at the root of San Francisco's systems change efforts, and racial equity should be at the root of Coordinated Entry.
- 2. **Incorporate racial equity into grantmaking and contracting.** HSH should consider how to infuse a race explicit lens into its contracting, requiring that programs report how their work will address issues of racial equity. Specifically, it is useful to develop criteria in which racial equity is part of the evaluative process for scoring RFPs (proposals). HSH should also evaluate the racial





- diversity of executive teams, management teams, and supporting staff. They should compel programs to report on their internal mechanisms created to support professional and financial advancement positions for staff of color. HSH should encourage agencies to periodically conduct internal program and policy reviews that examine disparities in outcomes based on race. Finally, HSH should pair these additional requirements with increased funding.
- 3. Include racial equity data analysis and benchmarks into the strategic implementation plan. As San Francisco sets goals around program development, expanding housing capacity, and making more housing placements, HSH should be measuring impact by race and ethnicity. It will be vital to look at how race and ethnicity relate to returns to homelessness. Additionally, HSH should use a formal racial equity tool in organizational decision making; all major organizational decisions, whether explicitly about race or not, should be analyzed through an internal racial equity tool that will highlight potential negative consequences to communities of color. As HSH develops its data dashboards to track progress toward its goals, racial impacts should be included in the dashboards to ensure that disparities are not evaluated as an afterthought.
- 4. Support organizational development within agencies serving communities of color. The City should continue to work towards equitable funding across nonprofit organizations, with a special focus on ensuring that organizations rooted in communities of color are adequately resourced. Many agencies that provide human services are at a critical point of self-examination. As we continue to unpack the impact of systemic inequity on the populations we serve, the time has also come to investigate the organizational practices, structures, and cultures of service settings that unconsciously perpetuate inequity for those same communities. This includes examining recruitment, hiring, and professional development practices, and whether they sufficiently attract and support employees of color. Despite agencies' best intentions to promote equity and justice, many have a long way to go before their internal practices, staff and leadership teams, resource allocation, facilities, and strategic planning reflect and advance these goals. However, promising practices exist and can be leveraged and tailored to organizations that are ready to do the work. HSH can support agencies by providing resources to do this work and by disseminating tools and strategies.
- 5. Encourage anti-racist program delivery and promote ongoing anti-racism training. SPARC's findings suggest that programs that are strengths-focused, empowerment-based, and trauma-informed, rather than paternalistic, will best serve people of color experiencing homelessness. Programs will need to look internally to answer questions about whether or not they are in advertently replicating systems of disenfranchisement. Performing internal systems audits and looking at program output data by race and ethnicity for disproportionality can help target the work. These philosophies might also play a key role in inter and intra-agency equity plans. Additionally, HSH staff and nonprofit staff will benefit from continuous training on the intersection of race and homelessness, on bias, and on strategies to confront racism within their work. Executive management should be encouraged to participate in trainings as well, and specific trainings for managers should include approaches to anti-racism supervision. Building off of Recommendation 4 (Support Organizational Development), HSH can host inter-agency trainings and support trainings for individual agencies. While organizational development





- focuses on structural change to organizations, training can focus on interpersonal skills—both for working with clients and for working with our colleagues.
- 6. Collaborate to increase affordable housing availability. As the community discusses how best to address homelessness through a racial equity lens it will be necessary to discuss how people experiencing homelessness could be moved into desirable units and neighborhoods by working with landlords and developers to address certain communities' ongoing discomfort with low-income housing. While the availability of housing was outside of the bounds of this report, we cannot ignore that as long as San Franciscans experiencing homelessness remain dedicated to living in the San Francisco community, they may remain homeless. This suggests a need to look more deeply at both the rate of production of housing units and subsidy amounts to stabilize people within units now available. San Francisco has approximately 1,300 permanent supportive housing units in the development pipeline over the next 5 years. While substantial, this is not enough to meet its goals of reducing chronic homelessness by 50% over the next 5 years.
- 7. **Explore innovative upstream interventions**. Homelessness is not inevitable. The data in this report suggests that it may be possible to stabilize people well before they become homeless by identifying pathways and providing support early. Preventing homelessness is a key component of achieving HSH's goals, and the City is making efforts to improve its upstream services and homelessness prevention efforts. HSH should continue focusing on areas where it can have the biggest impact, including targeted eviction prevention for people at risk of homelessness. Prevention also means working with the criminal justice, child welfare, and public health systems to reduce the number of people exiting into homelessness from programs and institutions within those systems. Finally, HSH must continue working to reduce the number of people in its housing programs that return to homelessness.
- 8. Investigate flexible assistance. Many financial crises start as non-rent related. For many of our research participants, initial needs were for food, car repair, utilities or bills. This suggests that for some people, flexible subsidies could be used to avert crises that spiral into homelessness. As noted in the section above, HSH has begun work to provide more flexible assistance by offering "Problem Solving" support to people entering the homelessness response system. Short-term interventions of this kind can prevent or end homelessness quickly and connect people to other systems and resources, such as employment, health care, child care, and a range of services to support greater stability. It may offer a range of one-time assistance, including eviction prevention, legal services, relocation programs, family reunification, mediation, move-in assistance, and flexible grants to address issues related to housing and employment. Already, San Francisco is exploring the use of a Flexible Housing Subsidy Pool to provide flexible housing assistance and subsidies to people experiencing homelessness. This approach would connect them to housing in the private market with flexible financial assistance, while targeting the more intensive supportive housing to the most vulnerable individuals.







6. Conclusion

We recognize that equity based work should not be confined to specific initiatives, but rather should be the lens through which all of the work flows. As communities develop equity approaches, they do not happen in isolation, limited to one program or one response. Instead, racial equity models need to be widely spread across systems and sectors.

We look forward to working with community leaders across the cities engaged in SPARC to continue to develop and hone the skills of equity implementation. Our hope continues to be that we will someday be a nation that does not strive towards equity but has realized the vision of having these values sit at the core of what we do.





7. Appendix

7.1 San Francisco Homeless Service Providers Diversity & Inclusion - Mixed Methods Findings

Every day, our nation puts the complex problem of solving homelessness into the hands of individual providers doing the work. Successfully recruiting, hiring, training, and supporting the homeless service workforce is key to ending homelessness. ¹⁵ Because the goal of SPARC is to fight homelessness by improving outcomes for people of color, an important question is: What are the characteristics of a workforce that best serves people of color? Advancing racial equity in programs may mean ensuring that people working in agencies, from the front desk to the boardroom, reflect the race and ethnicity of the people they serve. Through an online survey, SPARC and our San Francisco partners set out to learn more about the background of providers working in homelessness response programs and their self-reported desires for professional development. In addition, we sought to better understand how people perceive the issue of race in service settings through semi-structured focus groups and interviews.

We follow the survey results with a look at our qualitative data to answer two key questions: How do programs recruit more staff of color, and how do they support them? How do clients feel provider race and ethnicity affect them?

Online Survey of Providers

Methods

To learn more about the race and ethnicity of people working in housing and homeless service programs in San Francisco, C4 and the Department of Homelessness and Supportive Housing administered an online survey. The survey was sent through e-mail and was open to respondents for approximately one month. Participation was voluntary, and we received 544 responses. Results of the survey are described below and suggest a preliminary picture of how the race and ethnicity of agency staff relate to their background, positions, and needs. The complete dataset will be made available to our San Francisco partners. The summary of the survey results are followed by a few quotes from qualitative interview and focus group participants that shed additional light on the subject of provider race and ethnicity.

Results

In the sample of San Francisco providers surveyed who reported racial identity (n=514), 52.92% identified as White, 19.84% identified as Black, 13.42% identified as more than one race, 11.09%

¹⁵ Mullen, J., & Leginski, W. (2010). Building the capacity of the homeless service workforce. *Open Health Services and Policy Journal*, 3, 101–110.





identified as Asian, 1.56% identified as Native Hawaiian or Other Pacific Islander (NHOPI) and 1.17% identified as American Indian or Alaskan Native (AI/AN). In a separate question on ethnicity, 17.20% identified as Hispanic or Latinx. Results and patterns found for NH/PI and AN/AI groups are limited based on the small sample size, but including these voices are important for a comprehensive discussion about provider race and ethnicity.

| Table 11. | | |
|--|---------|-----------|
| Demographics of workforce survey respondents (n=514) | | |
| Race | Percent | Frequency |
| American Indian or Alaskan Native | 1.17% | 6 |
| Asian | 11.09% | 57 |
| Native Hawaiian or Other Pacific Islander | 1.56% | 8 |
| Black | 19.84% | 102 |
| White | 52.92% | 272 |
| More than one race | 13.42% | 69 |
| Ethnicity | | |
| Hispanic or Latinx | 17.20% | 91 |
| Non-Hispanic or Latinx | 82.8% | 438 |

About two thirds (64.13%) identified as female, 32.34% as male, less than 1% identified as other, transgender or genderqueer. On average providers are about 42 years old and range from 22 to 74. Two thirds (66.23%) identified as straight or heterosexual, while 33.77% identified as lesbian, gay, bisexual, or other.

Respondents worked in emergency shelter, transitional housing, permanent housing, outreach, drop-in centers, advocacy organizations, as well as other specialized services. These programs were categorized as mostly nonprofit (89.61%), as opposed to government agency (7.79%) or other (2.6%). Respondents worked with individuals (71.38%), families (46.47%), unaccompanied youth (13.94%), and veterans (37.38%) (respondents could serve more than one population).

In the survey sample, 81% of Executive Directors and 56.7% of Administrators (all categories except Executive Directors) were White. Black respondents had lower rates of a bachelor's degree: 18.18% of Black staff, 36.03% of White staff, 39.29% of Asian staff, and 37.68% of Multiracial staff had a BA. However, Black staff reported rates of "some graduate school," master's degrees, and doctoral degrees that were similar to other racial groups. Approximately 40% of Hispanic/Latinx staff had less than a BA, and about 60% had a BA or above.

Twenty-eight percent of respondents reported having previous experience with homelessness. The table below shows just the percentages of having experienced homelessness within each racial/ethnic group. Al/AN providers were a small subgroup of the respondent sample, but it is still notable that every person who identified as Al/AN had experienced homelessness. Black, multiracial, and Hispanic/Latinx providers (respectively) also had high rates of lived experience.





| Table 12. | | | | | | | | | | |
|--------------------------------------|--------|--------|--------|--------|----------|---------|--------|-----------------|--|--|
| Workforce experience of homelessness | | | | | | | | | | |
| Experienced | Total | Black | White | Asian | More | AI/AN | NHOPI | Hispanic/Latinx | | |
| homeless-ness | | | | | than one | | | | | |
| | | | | | race | | | | | |
| Yes | 27.96% | 46.46% | 20.96% | 7.02% | 40.58% | 100.00% | 12.50% | 39.56% | | |
| No | 72.04% | 53.54% | 79.04% | 92.98% | 59.42% | | 87.50% | 60.44% | | |
| | | | | | | | | | | |

We asked respondents for their opinion on how well the race and ethnicity of frontline staff and senior managers at their organization reflect the race and ethnicity of the people they serve. Overall, 76.54% of people agree or strongly agree that the race/ethnicity of frontline staff reflect the race/ethnicity of clients. For senior managers, 35.63% agree or strongly agree that their race/ethnicity reflect people served.



| Table 13. | | | | | | | | | |
|--|----------|--------|----------|----------|-------|--|--|--|--|
| Perception of workforce diversity | | | | | | | | | |
| | Strongly | Agree | Disagree | Strongly | Not | | | | |
| | Agree | | | Disagree | Sure | | | | |
| The race and ethnicity of frontline staff at my organization reflects the race and ethnicity of the people we serve. | 26.26% | 50.28% | 12.85% | 7.82% | 2.79% | | | | |
| organization reflects the race and ethnicity of the people | 8.43% | 27.20% | 34.10% | 26.44% | 3.83% | | | | |
| we serve. | | | | | | | | | |

This survey suggests that people of color may not be promoted to senior management level or hired as Executive Directors at the same rate that they are recruited to work the frontline. With this already in mind, we asked survey respondents to think about what kinds of skills they would 1) need to excel in their current position, and 2) need to take their career where they wanted it to go. Overall, people most frequently indicated that they need skills in supervision (40.66%), mental health counseling (34.24%), and time management (30.16%). These rates are similar across different racial and ethnic groups, with a few variances of note. Greater proportions of Black, Asian, Al/AN, and NH/PI staff felt they needed skills in grant writing than did staff who identified as White or more than one race. Greater proportions of Hispanic/Latinx, Asian, and to a lesser extend White staff were interested in data management skills to excel in their current position. Twenty-eight percent of Asian providers identified written communication as a needed skill, a greater proportion than all other groups.



| Table 14. | | | | | | | | |
|------------------------|--------------|---------|--------|--------|----------|--------|--------|-----------|
| Skills needed to excel | in current p | osition | | | | | | |
| Skills needed to | Total | Black | White | Asian | More | AI/AN | NHOPI | Hispanic/ |
| excel in current | | | | | than one | | | Latinx |
| position | | | | | race | | | |
| Mental health | 34.24% | 28.43% | 31.99% | 36.84% | 31.88% | 50.00% | 28.43% | 39.56% |
| Counseling | | | | | | | | |
| Time management | 30.16% | 27.45% | 29.04% | 35.09% | 24.64% | 0.00% | 27.45% | 20.88% |
| Financial | 16.93% | 17.65% | 15.81% | 19.30% | 11.59% | 16.67% | 17.65% | 14.29% |
| management | | | | | | | | |
| Written | 13.23% | 14.71% | 9.56% | 28.07% | 10.14% | 0.00% | 14.71% | 14.29% |
| communication | | | | | | | | |
| Technology skills | 23.35% | 19.61% | 20.96% | 29.82% | 23.19% | 33.33% | 19.61% | 19.78% |
| Grant writing | 18.29% | 27.45% | 13.24% | 22.81% | 15.94% | 33.33% | 27.45% | 20.88% |
| Data management | 28.99% | 16.67% | 27.57% | 43.86% | 27.54% | 16.67% | 16.67% | 34.07% |
| Fundraising | 18.68% | 28.43% | 13.24% | 22.81% | 17.39% | 0.00% | 28.43% | 16.48% |
| Supervisory skills | 40.66% | 37.25% | 40.07% | 45.61% | 33.33% | 50.00% | 37.25% | 37.36% |
| Other | 12.65% | 10.78% | 11.40% | 12.28% | 17.39% | 16.67% | 10.78% | 7.69% |

Note: Percentages are calculated with race totals as the denominator.

Participants could select all that apply.

There was less agreement about the skills people felt they needed in order to advance their careers; all skills except written communication and time management were endorsed by at least 1 in 4 respondents. Supervisory skills remained important for about half of respondents when thinking about the future. When thinking about moving up in their careers, about 30% of respondents identified grant writing and fundraising as key, whereas those were less important for exceling in their current positions. Written communication was again key to

Asian-identifying staff (24.56%), and more Hispanic/Latinx staff felt written communication was a skill they needed to advance (18.68%, compared to 14.29% who felt they needed improved written communication for their current role). As mentioned at the start of this section, it is important to keep in mind the small sample of NH/PI and AN/AI people in the responding sample.





| Table 15. | | | | | | | | | | | | |
|--------------------------|--|--------|--------|--------|--------------------|--------|--------|---------------------|--|--|--|--|
| Skills needed to a | Skills needed to advance their careers | | | | | | | | | | | |
| Skills needed to advance | Total | Black | White | Asian | More than one race | AI/AN | NHOPI | Hispanic/ Latinx | | | | |
| Mental health Counseling | 27.22% | 25.49% | 28.31% | 19.30% | 23.19% | 16.67% | 25.00% | 26.37% | | | | |
| Time management | 19.53% | 19.61% | 16.54% | 24.56% | 21.74% | 16.67% | 12.50% | 16.48% | | | | |
| Financial management | 24.46% | 22.55% | 21.69% | 31.58% | 23.19% | 50.00% | 12.50% | 25.27% | | | | |
| Written communication | 14.99% | 15.69% | 11.03% | 24.56% | 14.49% | 0.00% | 12.50% | 18.68% | | | | |
| Technology skills | 24.06% | 22.55% | 20.96% | 33.33% | 23.19% | 16.67% | 50.00% | 18.68% | | | | |
| Grant writing | 29.19% | 34.31% | 26.84% | 22.81% | 23.19% | 50.00% | 25.00% | 32.97% | | | | |
| Data management | 27.61% | 24.51% | 25.37% | 43.86% | 20.29% | 16.67% | 25.00% | 21.98% | | | | |
| Fundraising | 29.78% | 28.43% | 26.10% | 35.09% | 28.99% | 33.33% | 25.00% | 27.47% | | | | |
| Supervisory skills | 48.92% | 37.25% | 50.00% | 54.39% | 39.13% | 33.33% | 62.50% | 42.86% | | | | |
| Other | 14.40% | 13.73% | 14.71% | 7.02% | 17.39% | 16.67% | 12.50% | 13.19% | | | | |

Note: Percentages are calculated with race totals as the denominator.

Participants could select all that apply.

The final set of questions asked providers think about barriers/facilitators to training by answering the question, "If training or classes were offered to help you develop the skills you selected above, how important (Not a Concern (1), Somewhat Important (2), Very Important (3)) would the below factors be to you, as you considered taking part?" The factors listed were 1) fitting it into my busy day, 2) compensation for my time, 3) support from my manager, and 4) topic relevance. Figure 1 displays the average rating of importance of each factor, on a scale of 1 to 3.





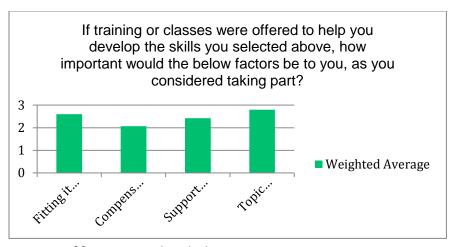


Figure 1. Average rating of factors considered when pursuing training opportunities

Most important to all providers was topic relevance (83.37% selected "very important"). Following topic relevance was "Fitting it into my busy day" (66.60% "very important). The importance of topic relevance and fitting trainings or classes into one's day was fairly consistent across racial groups. Sixty percent of providers felt support from their manager was very important, and these results saw some variation across race: 55.04% of White staff, 59.65% of Asian staff, 60.61% of multiracial staff, 65.98% of Black staff, 71.59% of Hispanic/Latinx staff, and 83.33% of Al/AN and NH/PI staff reported this factor very important. Additionally, there was some difference on the important of compensation for one's time: 29.80% of White staff, 31.82% of multiracial staff, 33.33% of NH/PI staff, 42.53% of Hispanic/Latinx staff, and 43.62% of Black staff indicated that compensation for their time was "very important." In both cases, White staff were less concerned about support from their managers and compensation for their time, and some difference is notable between non-White racial/ethnic groups.

Key findings from the survey include racial differences in education, lived experience with homelessness, desired training topics, and perceived barriers to participating in training. Respondents also perceived that race and ethnicity of senior management did not reflect the people they serve as well as the race/ethnicity of frontline staff.

Qualitative Interviews and Focus Groups

The data described above come from a non-systematic, voluntary survey of people working in housing and homelessness programs in San Francisco. The sample was more than five hundred, but the response rate overall or across racial and ethnic groups is unknown. However, our qualitative findings can help guide interpretation and clarify potential recommendations. We have looked at our qualitative data for two themes:

- 1. How do programs recruit more staff of color, and how do they support them?
- 2. How do clients feel provider race and ethnicity affect them?





How do programs recruit more staff of color, and how do they support them?

Employee diversity and organizational inclusion is an issue often facing human service agencies. The survey results above begin to discuss the specific needs of homeless service providers of color, and our qualitative research sheds additional light on the issue. Supporting employees of color starts with recruiting and hiring. A young interview participant captured the importance of hiring people of color and "changing what it means to be qualified."

Interviewer: What advice do you have for homeless service providers that they could do to fight racism? Respondent: Hire more people of color, straight up. I've definitely heard that they're like, "Well, we don't have that many people of color applying." It's like dawg, look for them, put in effort. It's like, there are amazing folks of color. The only difference is, is that we might not have a Bachelor's degree, a PhD, and all these accreditations. It's like but it doesn't mean we don't have the experience, the different types of articulation all along the spectrum, whether it be from academia, to another language, all on that spectrum. It doesn't mean we're not qualified. It's just changing what it means to be qualified, and that's the whole problem. But the advice would be hire more people of color, put queer and trans people of color first.

The survey found that Black providers were less likely to have a BA. Reflecting on the quote above, we recommend programs, when possible, change job descriptions that require a BA. The survey results also shed light on providers' desires for professional development. But what came up in our qualitative work alludes to a type of professional development not asked about in our survey: Trauma-informed peer support meets social justice education. After hearing in our interviews and client focus group about issues with staff of color, we asked providers about it directly. The interviewer's question is based on this comment from a respondent: "But you know what I've noticed, that people who work for the agencies or who are helping people to get from point A to point B - I noticed that the people stay close to their race. Like - except for Black people. They'll be quick to step on you. But I see the Hispanics and the Latino lady, or wherever she from, speaking Spanish trying to do the best she can to help that lady that's speaking Spanish. I see White people doing the best they can to help - help the white person that's wounded or injured or needs some help or like they are - they are quicker to gather community and they're quicker to share information." A provider in our focus group, who was a senior manager, told us a story in response to our prompt:

Interviewer: ...So, I'll hear from black folks, right? And like, "Well, Asians kind of stick together," or, "Latino folks kind of stick together, but, like, we don't. And if we—if I'm going to get services someplace, like you know, it will be the black woman behind the counter who steps on me first." And so, I'm curious, right? Like, in terms of your experience as providers, to what degree you see, experience that that kind of difference in sort of fundamental community organization. Does that make sense?

Respondent 1: Mm-hmm (affirmative), yeah.

Respondent 2: Mm-hmm (affirmative).

Respondent 3: Well, some of what you have said I have actually experienced and seen first-hand, and in one of my shelters in particularly, I saw some of those dynamics being played out, and I went in, and completely removed everybody on staff and switched it up. And, you know, but before I did, I went in and did my research myself, talked to some of the individuals, talked to some of the staff, et cetera. And I





just thought it was what was best to do a complete 100% shift. And it made a world of difference. One, because they—the staff knew I wasn't playing. And two, the clients knew I wasn't playing. Interviewer: Can you tell me—So, when you hired them to refill those positions, how did you do that? Respondent 3: Looked at things completely different. Some of the staff that I had in other sites, but one of the things that I communicate with staff at all times is in part—it's important that you have a heart and know how to treat people, and know how to talk to people and be kind. And those are some of the dynamics that I look at when hiring. The voice tone, the body language. Eye contact, the way you talk to people, the way you talk to me, the way you talk to staff, the way you interact. So, just took a completely different approach in looking at things, and not always hard-core experience.

Interviewer: Can I ask her a question? Did you do a training, was it conversations, was it during meetings? How did you convey that?

Respondent 3: Spent thousands, and thousands, and thousands of dollars on trainings.

Another focus group respondent echoed the importance of training people from historically oppressed groups or with lived experience of homelessness in how to be a positive model:

Respondent: I also think that I see myself as I have a responsibility in really training staff well. Not the heart; you cannot train on it. But the social justice—social justice aspect of this work can be a mindful when we're dealing with our community. And peer models are amazing. I have a peer model that go out of our shelter monitors. But we always talk about the peer model, you are a role model. So, someone born in there working that model, right? So—So, that folks really, you know, can fail without help in that.

Providers in our focus group had seen some "of these dynamics being played out" and had addressed them through training. The need for training was supported by a Black woman from the client focus group, who was commenting on Black providers with experience of homelessness:

Respondent: And they're not trauma conscious like they don't - they're not - they're just not - they don't have the skills and they don't have the - they don't have the skill. They think that oh I've got a job. I'm all dope now. I got a job. They - and I'm better than you.

In addition to lack of training, people attempting to explain the dynamics discussed internalized racism and "income stress," the difficulties providers of color face, as people of color, maintaining their own economic and residential stability.

Respondent: It is so different, but what I can say is that sometimes our own staff has—someone said it a while ago, and that was something about income stress. Sometimes when I go in, I go to other shelters, I do a lot of trainings, staff is working good jobs, staff's ability to put up with bullsh*t is very thin. Sorry, I said bullsh*t; you can strike that. To deal with bullsh*t sometimes is low, no matter what, no matter how much you try and support these staff.

The provider focus group's discussion of "income stress" supports the survey finding that providers of color find compensation for time spent on additional training to be very important. An interview with a man in a shelter adds to this idea.





Respondent: ...because what you have to remember is that some of these employees here, they have lives and some of their folks may be on drugs or they're struggling still. They're just one paycheck away from coming back here.

One concrete action for supporting staff of color is supporting them financially as much as possible. Participants also believed internalized racism was an issue. It is worth exploring how understanding and unlearning internalized racism might be included in trainings, combining elements of trauma-informed peer support and anti-racism curricula. The first quote below is from a provider, and the second is a dialogue between two clients.

Respondent: ...And I– I find that sometimes those people of color we tend to judge— Just to echo that we tend to judge our own folks, I think, little harder or people might have perceived notions of, "Oh, I don't like the way she talked to me, I don't like the way she said things or she is not interviewing the way I want her to interview for the housing program."

Respondent 1: I don't know - I know one thing for sure as a Black man, Black people hold grudges against each other, and they deliberately - it - they it just - they too jealous between each other. Too much jealousy going on. I don't understand why. But all those other, um, races, they don't have it. It's just us. And it's sad.

Respondent 2: It comes from slavery

The dynamics of how or why clients of color may sometimes feel treated less well by providers of the same race requires further study. The complexities of internalized racism and historical trauma may feel too big to take on, but talking about them is key to our racial equity work.

How do clients feel provider race and ethnicity affect them?

Implicit in the discussion of racial and ethnic diversity of staff is the idea that race-matched providers lead to better outcomes for clients. Some of our conversations challenged that, as described above. However, many people also discussed the benefits of working with staff of color. One theme that emerged was the ways participants felt they were treated differently by White staff.

Interviewer: Do you feel like people of color get treated differently by staff in the homeless service systems or programs?

Respondent: ...Yeah, I think people of color are treated differently, even when folks try not to. I think people are so conditioned and so colonized in their thought process that they do unconsciously, yeah. And the thing is, it's not overt. It's the, "Hello, how are you?" [high pitch voice change] the infantilization of people of color. It's like the -- I've definitely interacted with people -- again, it's about those low expectations that have low expectations and just to see it, it's just like I'm not surprised by it anymore. I'm not okay with it, but it's just, it's exhausting.





Despite their intentions, implicit biases held by White providers may negatively impact people of color. The following four excerpts from interviews with clients discuss the benefits that they feel come from working with providers of color. These three participants identified as Black.

Interviewer: So, they're trying to guide you down any other path but the one you wanted to be on?

Respondent: Yeah.

Interviewer: Did you feel the Black staff did that at all?

Respondent: No.

Interviewer: What was your experience there?

Respondent: I felt like, in a sense, like they were my family that I didn't have. Like, they were so supportive and I always just came to them, like, with my truth, like this is—this is who I am, this is what's happening for me, and I need help, so can you help me? And they were like, oh yeah. We could do this,

this, this, and this, and I'm just like, whoa.

Interviewer: Did you know who to go to and who not to go to? How did you find out the navigation? How did you work that out?

Respondent: With the people that I was comfortable with, mainly black people [laughs]. Because I felt like no one else was going to help me, no one else was going to hear me, no one else was going to give me what I needed.

Interviewer: Why did you think that?

Respondent: Because, honestly, that's what it was for me.

Interviewer: Or, like, what led you to that insight? Was it something you saw, something you heard? Respondent: It's just, like, nitpicking, kind of. Like, if I was to, like, raise my voice, like, someone that's not Black would come to me and just be like, oh, you can't do that. We're going to have to time you out, which means kick you out for a certain amount of hours or until, like, 'til the morning or something. And that just—I just kind of felt like I was—I couldn't go to those people because they're—they, like, oh, you have this under your belt, you have this under your belt, and it's just like, well I need help so I can have something positive under my belt, like, if that makes sense.

Interviewer: Do you feel like staff treat people of color differently or treat you differently because of your race? Are there white guests who you're like, "Oh, you would have talked to her differently than me?" Respondent: First of all, that's why I need to get in the field. I've never met a black therapist or psychiatrist, ever.... But I don't know if it's racism in that field or why they don't have any people of color working, but they definitely don't have that. So maybe if they had more people of color in the field and then it would be like a better-- I don't know if a lot better example, but it would be more helpful.

The three interview participants above felt they were, or would be, better cared for by Black providers, with whom they could be themselves and get more of what they needed ("like they were my family that I didn't have"). The following to participants identified as Hispanic or Latinx. The first interview was in English and the second was conducted in Spanish.

Interviewer: Do you feel like relating is a big help for you?

Respondent: Yea, to see yourself reflected. It's like why am I going to try -- on the real, why am I going to trust this white girl? Why? No, because if it's -- if I have to compete for food with someone or to compete for anything, I already know what's going to happen. I already know. No. If we're not seeing ourselves





reflected, it's like how are we going to see that we can get out of it? All I see, at a lot of programs, is this white savior complex embodied, and it's like no. I want to see queer and trans people of color who've been through it, surviving, survived it and now that are like living. So it's like been through it, survived, and are living, because we're always surviving. We're always surviving. It's like it's nice to see folks of color and queer and trans people of color living. When that does happen, it is beautiful to see, to see yourself reflected in someone who is like, "Yo, I get it, I f***** get it." And for someone to really show you that you're not stuck.

Respondent: And while I'm going to a center in which I know Latinos are going to give me service, I feel safer because, they know that – they know my language, they know where I come from, and they know they can't discriminate me because, they have gone through the same thing I have. Meanwhile, if I go to another center, I feel unsafe.

For the first respondent, it was important to have providers who reflected their identity as a queer person of color, generally. For the second participant, it was important to work with Spanish-speaking providers. These perspectives are important, as are the perspectives of people who had difficulty working with staff who shared their race. These conversations raise many questions, and we summarize our recommendations in the last section of this report.

Discussion

Our online survey of providers, focus groups, and interviews shed light on the diversity of the homeless service workforce in San Francisco, staff of color's experiences and opinions, and clients' perspectives on the role of provider race and ethnicity. Our findings describe a need for leadership to commit to racial equity, both as a lens to view client outcomes and a framework for managing and supporting the people who work for their agency.

Because one of San Francisco's structural change goals is professional development and leadership training for people of color, paying close attention to the real challenges providers of color face is vital. This research suggests practice and policy implications in the following areas:

- **Hiring.** If requiring a BA is getting in the way of hiring staff of color, particularly Black staff, programs should think critically about whether such a requirement is necessary.
- Training. Grant writing and fundraising may be concrete skills to teach without tailoring with a racial equity lens, but good supervisory skills and mental health counseling require elements of trauma-informed care, and perhaps an explicit organizational discussion of internalized racism. Everyone in the U.S. is exposed to racism and has work to do to unlearn implicit biases. Antiracism and diversity training should be ongoing and an understanding of microagressions, not just for White providers but for all staff.
- **Promoting.** Continued and ongoing analysis of how staff are promoted, what salary grades they're assigned, and what opportunities for professional development they're offered should





be a robust part of every program. By routinely collecting this data and analyzing it by race/ethnicity, gender identity/expression, and sexual orientation, programs can continue to drive themselves towards equitable practices.



7.2. Entry and Exit Location Groupings

We grouped HMIS data fields for situations at entry into the following categories for our analyses:

1. Homeless (Shelter + Street)

- a. Place not meant for human habitation
- b. Emergency Shelter (including motel/ hotel with voucher)

2. Permanent Housing/Renting w/ subsidy

- a. Rental by client with VASH subsidy
- b. Rental by client with other ongoing subsidy
- c. Permanent housing for formerly homeless persons
- d. Owned by client with ongoing subsidy

3. Permanent Housing/Renting w/o subsidy

- a. Rental by client with no ongoing housing subsidy
- b. Residential project / halfway house with no homeless criteria
- c. Owned by client with no ongoing subsidy

4. Institutionalized Care

- a. Long-term care facility or nursing home
- b. Substance abuse treatment facility or detox center
- c. Foster care home or foster care group home
- d. Hospital or other residential non-psychiatric medical facility
- e. Psychiatric hospital or other psychiatric facility
- f. Mental health/psychiatric, physical health, substance use treatment, foster care)

5. Jail, prison or juvenile detention facility

6. Doubled Up

- a. Staying or living with friends
- b. Staying or living with family

7. Transitional setting

- a. Transitional Housing for homeless persons (including youth)
- b. Safe Haven
- c. Hotel/Motel (no voucher)

8. Other

a. Other (True Other; i.e., response option was labeled "Other")

9. Missing data (not included in analysis)

- a. Client doesn't know
- b. Client refused



We grouped HMIS data fields for destination at project exit into the following categories for our analyses:

1. Homeless (Shelter + Street)

- a. Place not meant for human habitation
- b. Emergency Shelter (including motel/ hotel with voucher)

2. Permanent Housing/Renting w/ subsidy

- a. Rental by client with VASH subsidy
- b. Rental by client with other ongoing subsidy
- c. Permanent housing for formerly homeless persons
- d. Owned by client with ongoing subsidy

3. Permanent Housing/Renting w/o subsidy

- a. Rental by client with no ongoing housing subsidy
- b. Residential project / halfway house with no homeless criteria
- c. Owned by client with no ongoing subsidy

4. Institutionalized Care

- a. Long-term care facility or nursing home
- b. Substance abuse treatment facility or detox center
- c. Foster care home or foster care group home
- d. Hospital or other residential non-psychiatric medical facility
- e. Psychiatric hospital or other psychiatric facility
- f. Mental health/psychiatric, physical health, substance use treatment, foster care)

5. Jail, prison or juvenile detention facility

6. Doubled Up

- a. Staying or living with friends (permanent)
- b. Staying or living with family (permanent)
- c. Staying or living with friends (temporary) (Option at Exit only)
- d. Staying or living with family (temporary) (Option at Exit only)

7. Transitional setting

- a. Transitional Housing for homeless persons (including youth)
- b. Safe Haven
- c. Hotel/Motel (no voucher)

8. Other (clarify this is exit)

- a. Other (True Other; i.e., response option was labeled "Other")
- b. Deceased

9. Missing data (not included in analysis)

- a. Client refused
- b. Data not collected
- c. No exit interview completed





7.3 CCMS Data

Table 16. FY1415 CCMS SUMMARY OF HOMELESS SERVED BY SF DEPARTMENT OF PUBLIC HEALTH by RACE/ETHNICITY

CCMS Cohort Report Download Date 040116, this report revised 7/20/2017

Urgent/Emergent Utilization during FY1415

| | GRAND | | | | | | | | | |
|---|--|----------------|------------------------------|----------------|--|----------------|-------------------------------|----------------|-------------------------------------|----------------|
| CATEGORY | TOTAL HOMELESS SERVED in FY1415 | % of COHORT | Cohort: WHITE HOMELESS | % of COHORT | Cohort: AFRICAN AMERICAN HOMELESS | % of COHORT | Cohort: LATINO HOMELESS | % of COHORT | Cohort: ALL OTHER HOMELESS | % of COHORT |
| Cohort's % of All | | | | | | | | | | |
| Homeless | | | | | | | | | | |
| Individuals | 100.0% | | 36% | | 33% | | 12% | | 18% | |
| COHORT UNDUPLICATED | 9,975 | 100% | 3,633 | 100% | 3,337 | 100% | 1,189 | 100% | 1,816 | 100% |
| Users of | , | | , | | , | | , | | , | |
| Urgent/Emergent | | | | | | | | | | |
| Services | 7,342 | 73.6% | 2,769 | 76.2% | 2,516 | 75.4% | 829 | 69.7% | 1,228 | 67.6% |
| Non Users | | | | | | | | | | |
| of | | | | | | | | | | |
| Urgent/Emergent | | | | | | | | | | |
| Services | 2,633 | 26.4% | 864 | 23.8% | 821 | 24.6% | 360 | 30.3% | 588 | 32.4% |
| Homeless | | | | | | | | | | |
| History in CCMS as of end of FY - | | | | | | | | | | |
| Average | | | | | | | | | | |
| In Direct | | | | | | | | | | |
| Access to | | | | | | | | | | |
| Housing (DAH) | | | | | | | | | | |
| Unit (as of end of | | | | | | | | | | |
| · FY) | 119 | 1.2% | 45 | 1.2% | 46 | 1.4% | 15 | 1.3% | 13 | 0.7% |
| Average | | | | | | | | | | |
| DAH days (if | | | | | | | | | | |
| resided) | 230.3 | 0.0% | 234.5 | 0.0% | 221.4 | 0.0% | 233.8 | 0.0% | 240.9 | 0.0% |
| In | | | | | | | | | | |
| Stabilization Unit | | | | | | | | | | |
| (as of end of FY) | 256 | 2.6% | 121 | 3.3% | 71 | 2.1% | 31 | 2.6% | 33 | 1.8% |
| Average | | | | | | | | | | |
| Stabilization | | | | | | | | | | |
| Room days (if | 171.7 | 0.0% | 173.1 | 0.0% | 162.7 | 0.0% | 209.7 | 0.0% | 152.2 | 0.0% |
| resided) Utilized | 17 1.7 | 0.0% | 173.1 | 0.0% | 102.7 | 0.0% | 209.7 | 0.0% | 132.2 | 0.0% |
| Shelter | 4,794 | 48.1% | 1,516 | 41.7% | 1,784 | 53.5% | 540 | 45.4% | 954 | 52.5% |
| Average | -, | , 0 | ., | ,0 | -, | | | , | | |
| Shelter days (if | | | | | | | | | | |
| resided) | 75.9 | ~ | 75.9 | ~ | 71.7 | ~ | 86.6 | ~ | 77.8 | ~ |
| Span of Time since first notation of homelessness | | | | | | | | | | |
| in CCMS | | | | | | | | | | |
| Average | | | | | | | | | | |
| Time Homeless | 6.01 | | 6 56 | | 9.64 | | 6 22 | | 1 92 | |
| (as of end of FY) Median Time | 6.91 | ~ | 6.56 | ~ | 8.64 | ~ | 6.32 | ~ | 4.83 | ~ |
| Homeless (as of | | | | | | | | | | |
| end of FY) | 5.77 | ~ | 5.40 | ~ | 8.92 | ~ | 5.36 | ~ | 2.67 | ~ |
| | ī - | | | L | 1 | | 1 | | | l |



| | | 1 | | 1 | | 1 | 1 | 1 | | 1 |
|-----------------------------|-------|-------|-------|-------|-------|-------|------|-------|-------|-------|
| 0.1 to 1 year | 2,102 | 21.1% | 752 | 20.7% | 530 | 15.9% | 234 | 19.7% | 586 | 32.3% |
| 1.1 to 2 years | 948 | 9.5% | 397 | 10.9% | 229 | 6.9% | 117 | 9.8% | 205 | 11.3% |
| 2.1 to 5 | | | | | | | | | | |
| years 5.1 to 10 | 1,611 | 16.2% | 610 | 16.8% | 382 | 11.4% | 225 | 18.9% | 394 | 21.7% |
| years | 2,042 | 20.5% | 790 | 21.7% | 688 | 20.6% | 294 | 24.7% | 270 | 14.9% |
| Over 10 years | 3,272 | 32.8% | 1,084 | 29.8% | 1,508 | 45.2% | 319 | 26.8% | 361 | 19.9% |
| 10.1 to 15 | | | | | | | | | | |
| years 15.1 to 18 | 1,864 | 18.7% | 651 | 17.9% | 771 | 23.1% | 216 | 18.2% | 226 | 12.4% |
| years | 1,408 | 14.1% | 433 | 11.9% | 737 | 22.1% | 103 | 8.7% | 135 | 7.4% |
| Over 18 | | | | | | | | | | |
| years | - | 0.0% | - | 0.0% | - | 0.0% | - | 0.0% | - | 0.0% |
| Demographics | | | | | | | | | | |
| Average Age | 45.3 | ~ | 45.2 | ~ | 46.9 | ~ | 44.9 | ~ | 42.8 | ~ |
| Median Age | 46.0 | ~ | 46.0 | ~ | 49.0 | ~ | 46.0 | ~ | 43.0 | ~ |
| Age 18- 24 | 631 | 6.3% | 201 | 5.5% | 193 | 5.8% | 76 | 6.4% | 161 | 8.9% |
| 24.1 to 30 | 921 | 9.2% | 349 | 9.6% | 247 | 7.4% | 106 | 8.9% | 219 | 12.1% |
| 30.1 to 40 | 1,972 | 19.8% | 778 | 21.4% | 534 | 16.0% | 252 | 21.2% | 408 | 22.5% |
| 40.1 to 50 | 2,659 | 26.7% | 977 | 26.9% | 875 | 26.2% | 333 | 28.0% | 474 | 26.1% |
| 50.1 to 60 | 2,689 | 27.0% | 914 | 25.2% | 1,071 | 32.1% | 305 | 25.7% | 399 | 22.0% |
| 60.1 to 70 | 943 | 9.5% | 339 | 9.3% | 380 | 11.4% | 97 | 8.2% | 127 | 7.0% |
| Over 70 | 160 | 1.6% | 75 | 2.1% | 37 | 1.1% | 20 | 1.7% | 28 | 1.5% |
| No data | - | 0.0% | - | 0.0% | - | 0.0% | - | 0.0% | - | 0.0% |
| Gender | | | | | | | | | | |
| Male | 7,277 | 73.0% | 2,693 | 74.1% | 2,509 | 75.2% | 957 | 80.5% | 1,118 | 61.6% |
| Female | 2,356 | 23.6% | 894 | 24.6% | 801 | 24.0% | 213 | 17.9% | 448 | 24.7% |
| Transgender (not specified) | 11 | 0.1% | 4 | 0.1% | 3 | 0.1% | 1 | 0.1% | 3 | 0.2% |
| Transman (F | | | | | | | | | | |
| to M) Transwoman | 30 | 0.3% | 9 | 0.2% | 8 | 0.2% | 8 | 0.7% | 5 | 0.3% |
| (M to F) | 47 | 0.5% | 21 | 0.6% | 13 | 0.4% | 8 | 0.7% | 5 | 0.3% |
| No data | 254 | 2.5% | 12 | 0.3% | 3 | 0.1% | 2 | 0.2% | 237 | 13.1% |

