

San Mateo County Behavioral Health and Recovery Services Provider Outreach Annual Report

Fiscal Year 2022–2023

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December 2023



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Executive Summary

In 2004, California voters approved Proposition 63, the Mental Health Services Act, which provides funding to counties for mental health services by imposing a 1% tax on individuals with personal income in excess of \$1 million. The Community Services and Supports component of the act was created to provide direct services to individuals with severe mental illness. The component includes outreach and engagement activities.

San Mateo County Behavioral Health and Recovery Services (SMC BHRS) funds the North County Outreach Collaborative (NCOC) and the East Palo Alto Partnership for Mental Health Outreach (EPAPMHO). These organizations provide outreach and engagement activities to residents of San Mateo County. Each collaborative also has providers who provide direct services to the populations they serve.

This report summarizes self-reported data from attendees at individual and group outreach events that occurred in fiscal year (FY) 2022–2023 (July 1, 2022–June 30, 2023). Appendices A through H show data for five providers participating in NCOC and three providers participating in EPAPMHO. We also present self-reported data from these outreach events since FY2018–2019 to show how attendance has changed over time.

Total Attendance

For FY2022–2023, SMC BHRS providers reported that there were 5,519 attendees at all outreach events, which reflects a 30.7% decrease in total attendance compared with FY2021–2022 (which saw 7,961 attendees). A decline in attendance at group events attributed to this decrease. During FY2022–2023, SMC providers reached 4,601 attendees across 179 group outreach events, while during FY2021–2022, providers reached 7,144 attendees across 174 group outreach events. The attendance at group outreach events decreased by 35.6% between FY2021–2022 and FY2022–2023. The attendance at individual outreach events showed a modest increase of 12.4%, with an additional 101 attendees served in FY2022–2023 than in FY2021–2022.

Demographic Characteristics of Outreach Attendees

NCOC

There were 4,573 attendees at NCOC outreach events. Among attendees at NCOC outreach events, the most common age group was adults (31%). Over half the attendees were female (58%). The three largest racial/ethnic groups represented White (22%), multiracial (12.6%), or Filipino (10.8%). Twelve percent of attendees declined to state their race or ethnicity. Of those

reporting special population status (e.g., homeless, at risk for homelessness, vision impaired, hearing impaired, veterans), 10% of attendees reported being at risk for homelessness, and 7% of attendees reported having a physical or mobility disability.

EPAPMHO

There were 946 attendees at EPAPMHO outreach events. Most attendees were adults (58%) and females (52%). The greatest proportion of attendees by race/ethnicity identified as Mexican (33%), followed by Native Hawaiian or Pacific Islander (26%). Of those reporting special population status, 48% were at risk for being homeless and 32% were homeless.

Outreach Event Characteristics

NCOC

NCOC individual outreach events ranged from 3 minutes to 2 hours and averaged 38 minutes. Most individual outreach events took place in schools (33%) and over the phone (24%). Most individual outreach events were conducted in English (87.2%), followed by Spanish (11.7%).

NCOC group outreach events ranged from 30 minutes to 6 hours and averaged 83 minutes. Of the 148 group outreach events, most were conducted in schools (39%) or virtually (35%). Most group outreach events were conducted in English (93%), followed by Spanish (5%).

NCOC individual outreach events resulted in mental health referrals (27%) and substance use referrals (3%). Providers made 757 social service referrals for 366 NCOC individual outreach attendees. Among social services referrals, the top five types of referrals were in medical care (24%), other services (20%), food (16%), cultural services (14%), and financial services (8%; see Exhibit 5a).

EPAPMHO

EPAPMHO individual outreach events lasted from 5 to 35 minutes and averaged 16 minutes. Most outreach events took place over the phone (54%) or in offices (34%). More than half were held in Spanish (60%).

There were 31 EPAPMHO group outreach events that lasted from 30 minutes to 5 hours. Most outreach events occurred in various community locations (39%) and offices (26%) and were conducted in Tongan (42%).

EPAPMHO individual outreach events resulted in mental health referrals (14%) and substance use referrals (72%). Providers made 1,096 referrals for 552 individual outreach attendees. The top five types of other social services referrals made for individual outreach attendees were for

medical care (39%), housing (37%), and form assistance (6%), other services (5%), and health insurance (4%); .

Recommendations

We have the following recommendations based on FY2022–2023 data. These recommendations fall under two umbrellas: those aimed at enhancing outreach and those intended to improve data collection.

Providing outreach in different languages and offering non-office visits and virtual appointments may have resulted in modest increases in the number of participants attending individual outreach events this year.

Continue to conduct outreach in languages other than English. This past reporting year, outreach events were conducted in languages that represented the residents served by the participating providers. For example, the EPAPMHO collaborative conducted outreach in Spanish because the Mexican population was the largest racial/ethnic population attending these events. Similarly, other EPAPMHO individual outreach events were offered in Tongan and Samoan because participants indicated that these were their preferred languages. Conducting outreach in languages other than English can ensure that the SMC BHRS outreach program is serving the needs of the county’s non-English-speaking population. Although there was a modest increase in the number of individual outreach events, there was a sharp decline in attendees at group events. We suggest that collaboratives, in particular NCOC, consider conducting some group outreach events in preferred languages of the county residents, such as Tagalog, Samoan, and Tongan. These strategies may help improve attendance at group events in the coming years.

Continue to offer non-office locations for group and individual outreach events. Data show that many outreach events were conducted in communities and in nontraditional locations, such as over the phone and through telehealth services. Although this may have originally been in response to the COVID-19 pandemic, the county should consider continuing to provide alternative locations or venues, including a virtual option. This will give county residents multiple options to avail themselves of the services offered through the program.

Provide social service referrals to attendees at group outreach events as well. The county provides referrals to social services like housing and form assistance to those who attend individual outreach events. The county could consider offering similar referrals to social services during group outreach events as this will help to address attendees’ needs and improve their overall health and well-being.

Introduction

In 2004, California voters approved Proposition 63, the Mental Health Services Act (MHSA), which provides funding to counties for mental health services by imposing a 1% tax on personal income of more than \$1 million. Activities funded by MHSA are grouped into various components. The Community Services and Supports (CSS) component was created to provide direct services to individuals with severe mental illness. CSS is allotted 80% of MHSA funding for services focused on recovery and resilience while providing clients and families with an integrated service experience. CSS has three service categories: (a) Full-Service Partnerships, (b) General Systems Development Funds, and (c) Outreach and Engagement.

The San Mateo County Behavioral Health and Recovery Service (SMC BHRS) MHSA Outreach and Engagement strategy aims to increase access and improve linkages to behavioral health services for underserved communities. Strategies include community outreach collaboratives, pre-crisis response, and primary care-based efforts. SMC BHRS has seen a consistent increase in the representation of underserved communities in its system since the strategies were deployed.

Community outreach collaboratives funded by MHSA include the East Palo Alto Partnership for Mental Health Outreach (EPAPMHO) and the North County Outreach Collaborative (NCOC). EPAPMHO caters to transition-age youth and adults; Latino, African American, and Pacific Islander communities; and people who identify as lesbian, gay, bisexual, transgender, and questioning in East Palo Alto. NCOC caters to rural and/or ethnic communities (Chinese, Filipino, Latino, Pacific Islander) and lesbian, gay, bisexual, transgender, and questioning communities in the North County region, including Pacifica. These collaboratives provide advocacy, systems change, resident engagement, expansion of local resources, and education and outreach to decrease stigma related to mental illness and substance use. They work to increase awareness of and access and linkages to culturally and linguistically competent services for behavioral health, Medi-Cal and other public health services, and social services. They participate in a referral process to ensure that those in need receive appropriate services such as food, housing, and medical care. Finally, they promote and facilitate resident input into the development of MHSA-funded services and other BHRS program initiatives.

The American Institutes for Research® (AIR®) has supported SMC BHRS in reporting findings from the county's outreach activities since fiscal year (FY) 2014–2015. This annual report provides details on outreach activities conducted by providers in FY2022–2023 (July 1, 2022–June 30, 2023). Providers collected outreach data using an electronic form (SurveyMonkey®) that gathers self-reported information from attendees. AIR created this form

based on interviews with San Mateo County staff and focus groups with providers. After data are entered, AIR cleans them and calculates aggregated counts and percentages to describe outreach activities.

This report focuses on EPAPMHO and NCOC outreach events that occurred during FY2022–2023. We also present historical data from FY2014–2015 to FY2021–2022 to show how outreach has changed over time. Counts of attendees do not necessarily represent unique individuals because a person may have been part of more than one outreach event, taken part in both individual and group outreach events, and/or interacted with different providers. Summaries are also available to help SMC BHRS and its providers enhance their understanding of each individual provider’s outreach efforts. Please refer to Appendices A–H for provider-specific summaries. Exhibit 1 displays the number of outreach attendees in FY2022–2023 by event type (i.e., individual or group) for NCOC providers, including Asian American Recovery Services, Daly City Peninsula Partnership Collaborative, Daly City Youth Health Center, Pacifica Collaborative, and StarVista; and for EPAPHMO providers, including Anamatangi Polynesian Voices, El Concilio, and Free At Last.

Overall Outreach

During FY2022–2023, there were 5,519 attendees at outreach events—918 attendees at individual outreach events and 4,601 attendees across 179 group outreach events. An individual outreach event included a single attendee, while group outreach events included multiple attendees. As stated earlier in this document, the count of attendees is not necessarily unique because a person may have been a part of multiple individual or group outreach events.

Exhibit 1 shows the number of outreach attendees by collaborative, provider, and event type (i.e., individual or group), for FY2022–2023.

Exhibit 1. Outreach Attendees, by Collaborative, Provider, and Event Type, FY2022–2023

Provider organization	Number of individual outreach attendees	Number of attendees at group outreach events	Total attendees reported across all events
NCOC			
Asian American Recovery Services	133	959	1,092
Daly City Peninsula Partnership Collaborative	120	1,028	1,148
Daly City Youth Health Center	64	594	658

Provider organization	Number of individual outreach attendees	Number of attendees at group outreach events	Total attendees reported across all events
Pacifica Collaborative	12	1,615	1,627
StarVista	37	11	48
NCOC total	366	4,207	4,573
EPAPMHO			
Anamatangi Polynesian Voices	24	394	418
El Concilio	92	0	92
Free At Last	436	0	436
EPAPMHO total	552	394	946
NCOC and EPAPMHO total	918	4,601	5,519

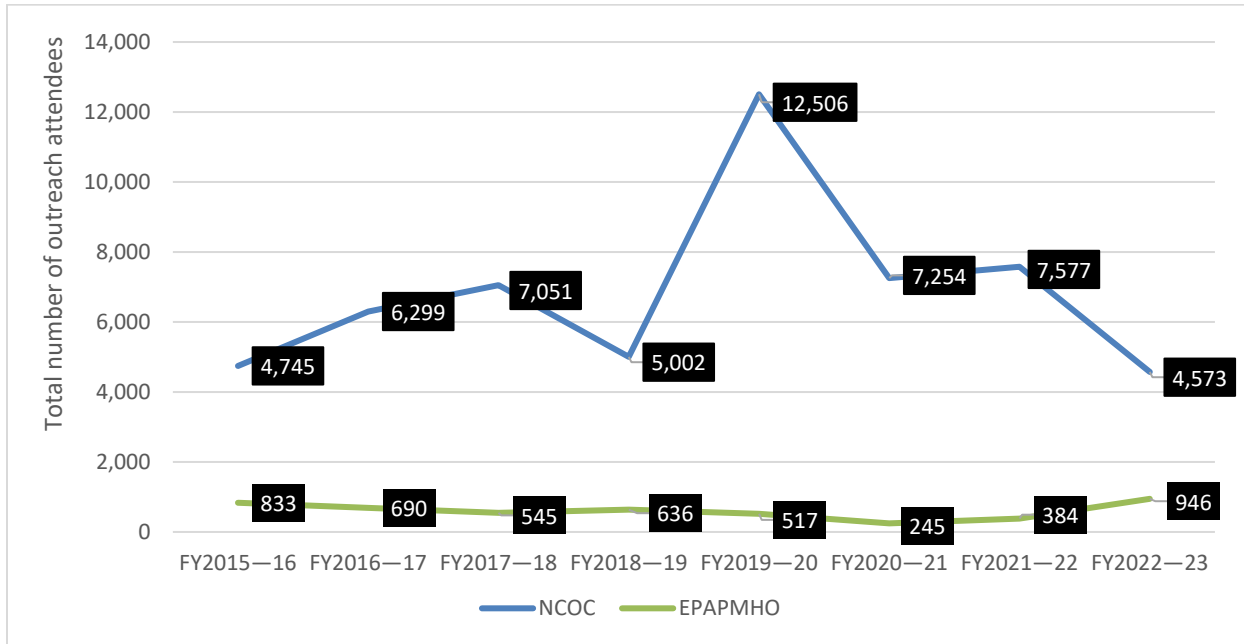
Note. NCOC = North County Outreach Collaborative; EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year. Multicultural Counseling and Education Services of the Bay Area changed its name to Anamatangi Polynesian voices.

The NCOC is expected to serve a larger proportion of the outreach collaborative effort because it serves the entire northern region of San Mateo County (estimated population = 139,919), including the cities of Colma, Daly City, and Pacifica. The population of these cities is five times the population of the city of East Palo Alto, which is served by EPAPMHO. The north region also spans a much wider geographical area, making group events (vs. individual outreach), such as community-wide fairs, more feasible. In contrast, East Palo Alto spans 2.5 square miles, making an individual approach to outreach more achievable.

Exhibit 2 shows the trends in the number of outreach attendees over the years for both collaboratives. The number of NCOC outreach attendees increased annually from 2014 to 2020, with the exception of from FY2018–2019. In FY 2019–2020, the number of NCOC attendees increased significantly likely due to more individuals seeking mental health services during the COVID-19 pandemic. The COVID-19 regional stay-at-home order was issued on March 16, 2020, and services provided from March 2020 to June 2020 showed an increase in outreach because many more residents were likely seeking mental health services in response to the pandemic. Events sponsored by the Daly City Peninsula Partnership Collaborative and the Daly City Youth Health Center also addressed food security during the pandemic (FY2019–2020) by distributing food during the events. A higher attendance at these events may contribute to an overall increase seen in FY2019–2020. There was a sharp decrease in attendance in FY2022–2023 from FY2021–2022.

The number of EPAPMHO outreach attendees decreased from FY2014 to FY2021 but increased from FY2020 to FY2023. The number of outreach attendees served this year was similar to in FY2014–2015.

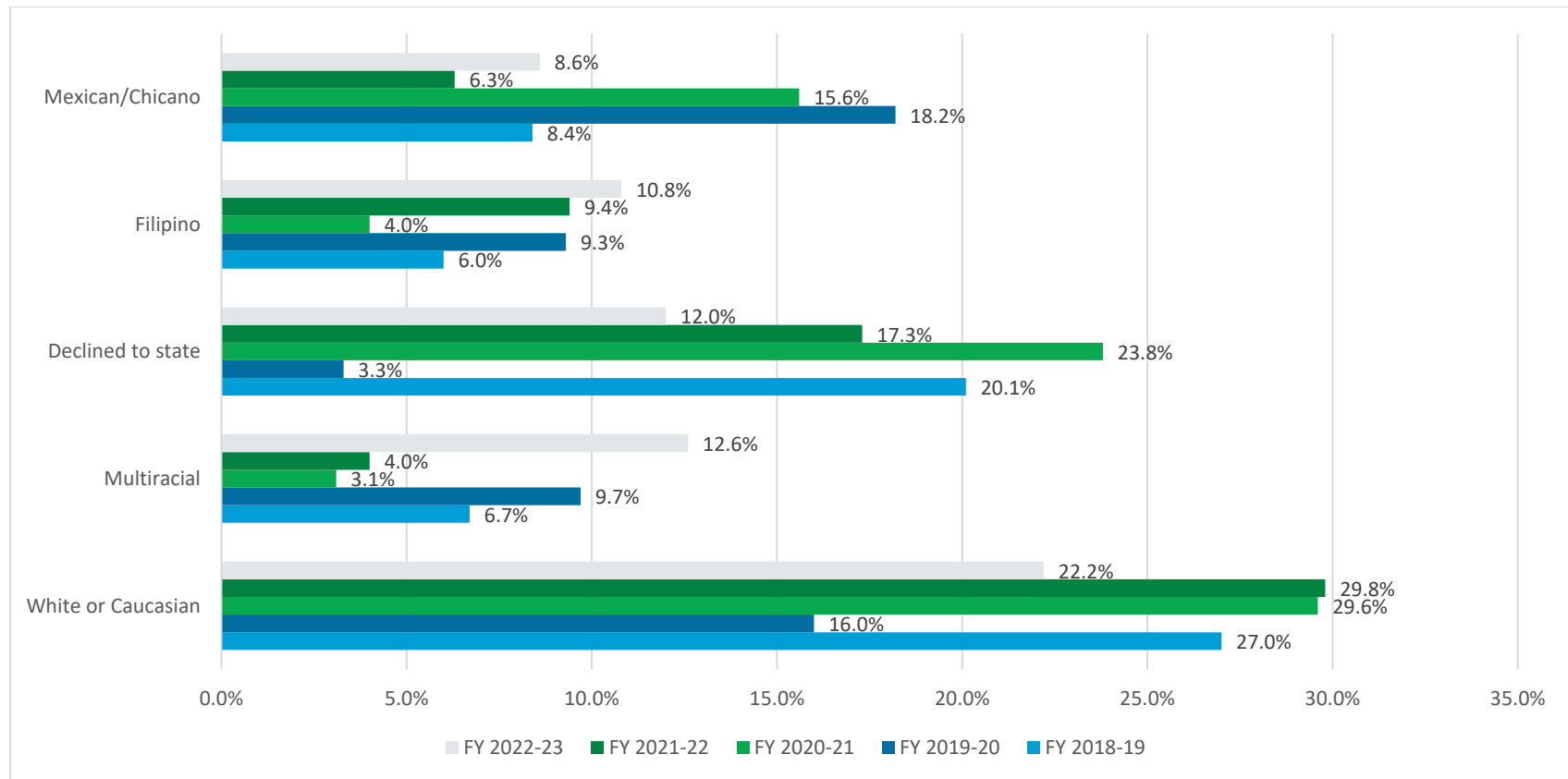
Exhibit 2. Total Outreach Attendees by Collaborative, FY2014–2023



Note. FY = fiscal year; NCOC = North County Outreach Collaborative; EPAPMHO = East Palo Alto Partnership for Mental Health Outreach. The number of attendees from previous fiscal years is slightly higher than the number reported in the previous reports because some outreach data were reported after that fiscal year.

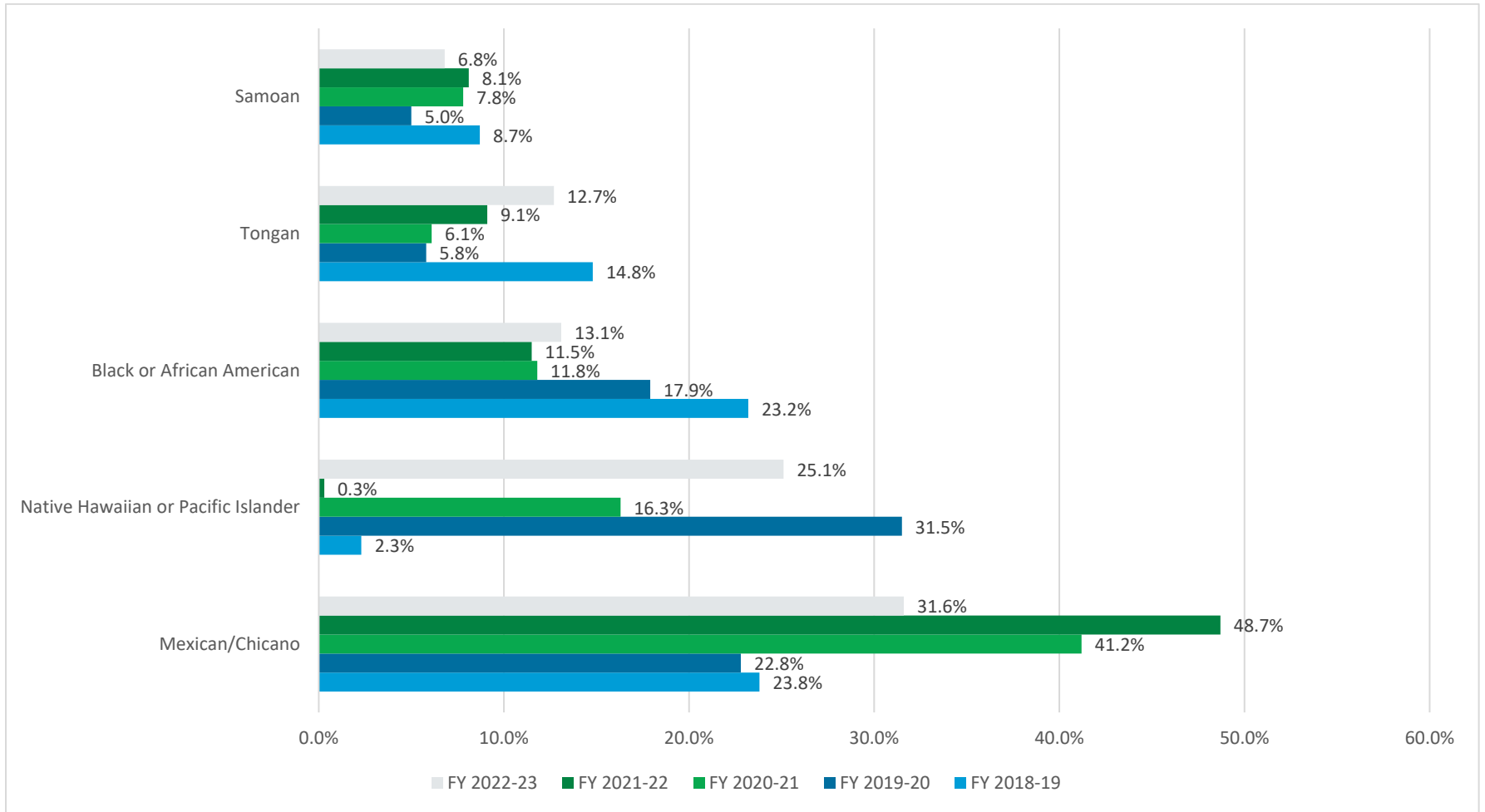
Exhibits 3a and 3b present the proportion of the top five racial/ethnic groups served by individual and group outreach in FY2022–2023 and trends over the past 4 fiscal years (i.e., FY2018–2019, FY2019–2020, FY2020–2021, and FY2021–2022), within each collaborative. A table with the entire breakdown of racial/ethnic groups from FY2018–2019 to FY2022–2023 is presented in Appendix I.

Exhibit 3a. Percentage of the Top Five Racial/Ethnic Groups Served by NCOC in FY2022–2023 and Trends in Prior Years, FY2018–2019 to FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year.

Exhibit 3b. Percentage of the Top Five Racial/Ethnic Groups Served by EPAPMHO in FY2022–2023 and Trends in Prior Years, FY2018–2019 to FY2022–2023



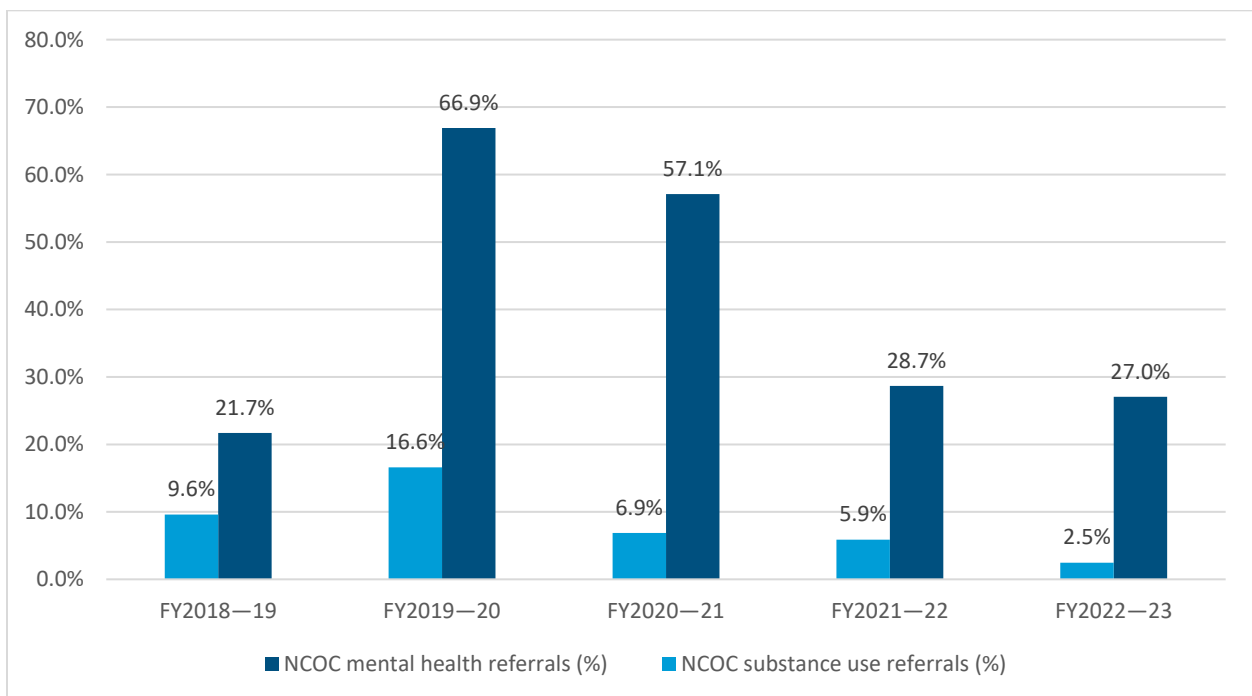
Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year.

The NCOC has seen decreased outreach numbers this year compared to FY2021–2022 (see **Exhibit 2**), and there are a few key differences in the racial/ethnic demographics of the outreach attendees. For example, the proportion of White or Caucasian attendees decreased in FY2022–2023 compared with FY2021–2021, while the proportion of multiracial, Filipino, and Mexican/Chicano attendees increased. The proportion of attendees who declined to state their race/ethnicity decreased in FY2022–2023 to 12% from 23.8% in FY2020–2021.

The EPAPMHO has seen increased outreach numbers this year compared with FY2021–2022 (see **Exhibit 2**), and there are a few key differences in the racial/ethnic demographics of the outreach attendees. From FY2021–2022 to FY2022–2023, there has been an observed increase in attendance by Native Hawaiian/Pacific Islander and Tongan attendees at these events. However, there has been a decrease in attendees self-reporting their race/ethnicity as Mexican and Samoan.

Exhibit 4a presents the percentages of mental health and substance use referrals by NCOC from FY2018–2019 through FY2022–2023. Compared with FY2021–2022, the percentage of mental health referrals among all referrals did not display a significant change in FY2022–2023, while the substance abuse referrals decreased by 3.4% points.

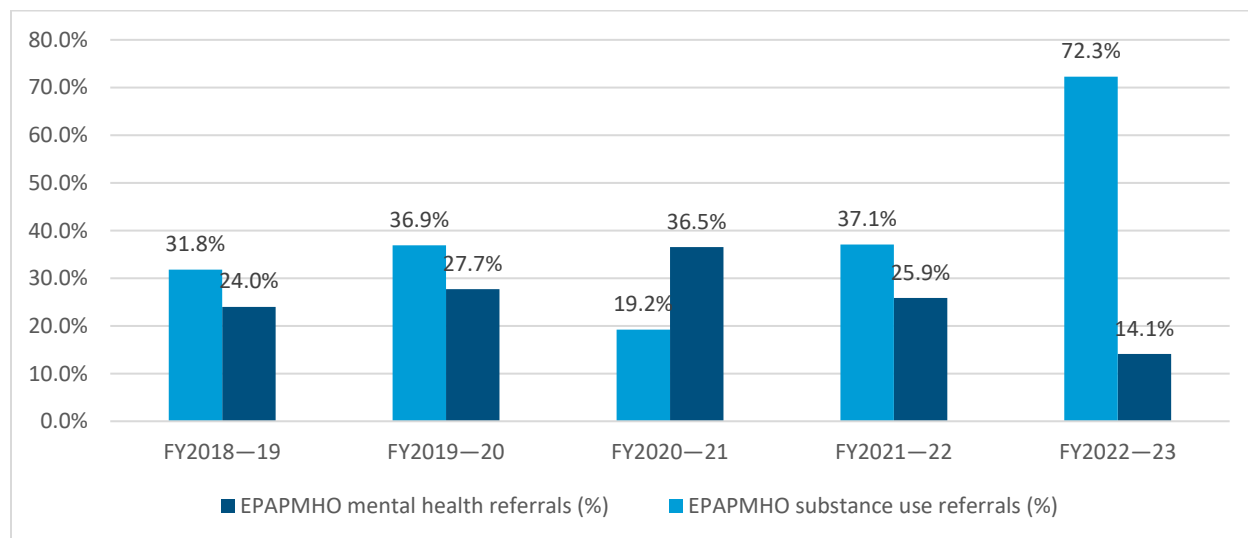
Exhibit 4a. Percentage of Mental Health/Substance Use Referrals by NCOC, FY2018–2019 to FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year.

Exhibit 4b presents the percentages of mental health and substance use referrals by EPAPMHO from FY2018–2018 through FY2022–2023. Compared with FY2021–2022, the percentage of mental health referrals decreased by 11.8 percentage points in FY2022–2023. The percentage of substance abuse referrals almost doubled in FY2022–2023 compared with FY2021–2022.

Exhibit 4b. Percentage of Mental Health/Substance Use Referrals by EPAPMHO, FY2018–2019 to FY2022–2023

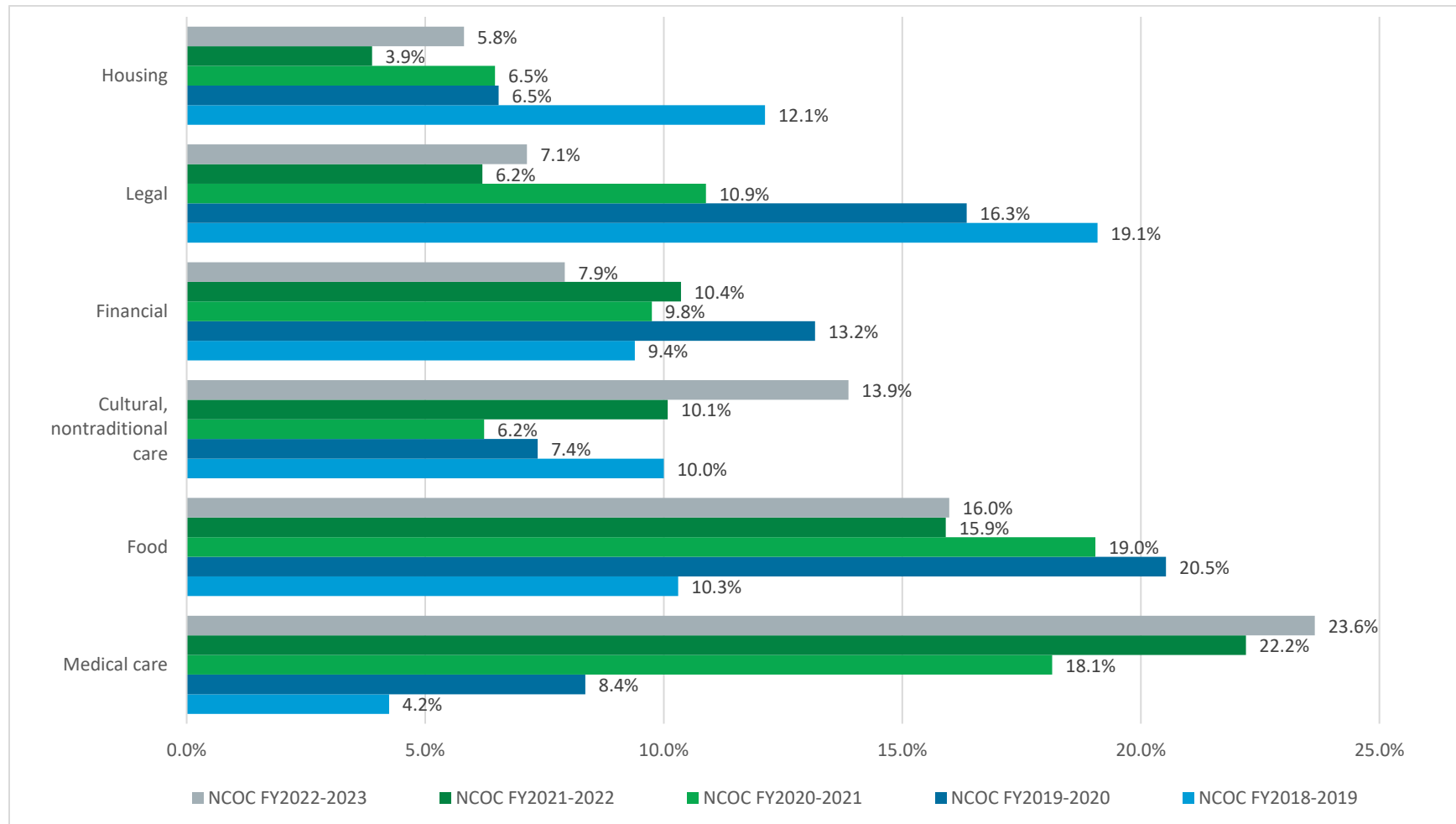


Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year.

Of the 4,573 individuals who attended NCOC events in FY2022–2023, 16.5% had referrals to social services. The percentage of referrals to social services increased over FY2021–2022: of the 7,577 individuals who attended NCOC events in FY2021–2022, 14.3% had referrals to social services. Of the 946 individuals who attended EPAPMHO events in FY2022–2023, there were 1,096 referrals to social services. The number of referrals to social services decreased from FY2022–2022: of the 384 individuals who attended EPAPMHO events in FY2021–2022, there were 1,081 referrals. **Exhibits 5a and 5b** present the shares of the top five social services to which individual outreach event attendees were referred to in FY2022–2023 and the previous four fiscal years (FY2021–2022, FY2020–2021, FY2019–2020, FY2018–2019).

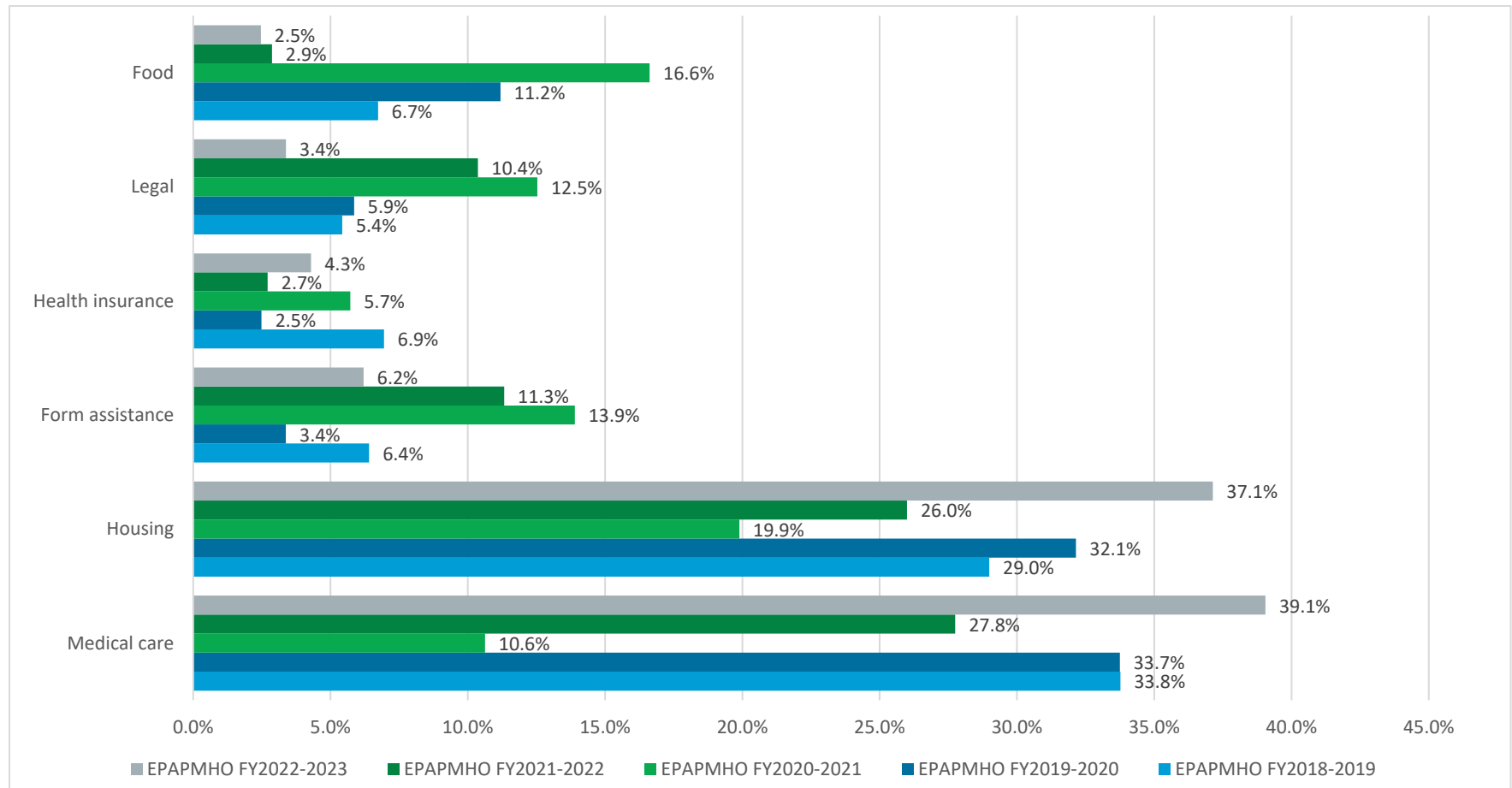
- In FY2022–2023, NCOC saw increases in the proportion of legal, housing assistance, cultural care, and medical care services compared with the prior year. On the other hand, the percentage of referrals for financial assistance decreased in FY2022–2023 compared with the previous year.
- In FY2022–2023, EPAPMHO saw increases in the proportion of referrals for health insurance, housing, and medical care services. On the other hand, the percentage of referrals for food, legal, and form assistance decreased in FY2022–2023 compared with the previous year.

Exhibit 5a. Referrals to Social Services Made by NCOC, FY2018–2019 to FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year. Social service referrals not included in the graph include form assistance (3.2% in FY2022–2023), emergency/protective services (1.1% in FY2022–2023), transportation (1.1% in FY2022–2023), and health insurance (0.3% in FY2022–2023). Referrals categorized as other social services represented 20.1% of all social service referrals in FY2022–2023 and included services related to COVID-19 testing and vaccinations, EOM Parent Project, the Home Energy Assistance Program, and mental health.

Exhibit 5b. Referrals to Social Services Made by EPAPMHO, FY2018–2019 to FY2021–2022



Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year. Social service referrals not included in the graph include financial (1.5% in FY2022–2023), cultural/nontraditional care (0.4% in FY2022–2023), emergency/protective services (0.2% in FY2022–2023), and transportation (0.1% in FY2022–2023). Referrals categorized as other social services represented 5.4% of all social service referrals FY2022–2023 and included services related to COVID-19 testing and vaccinations, EOM Parent Project, the Home Energy Assistance Program, and mental health.

The following sections provide details about the attendees at group and individual outreach events across the two collaboratives and their provider organizations in FY2022–2023.

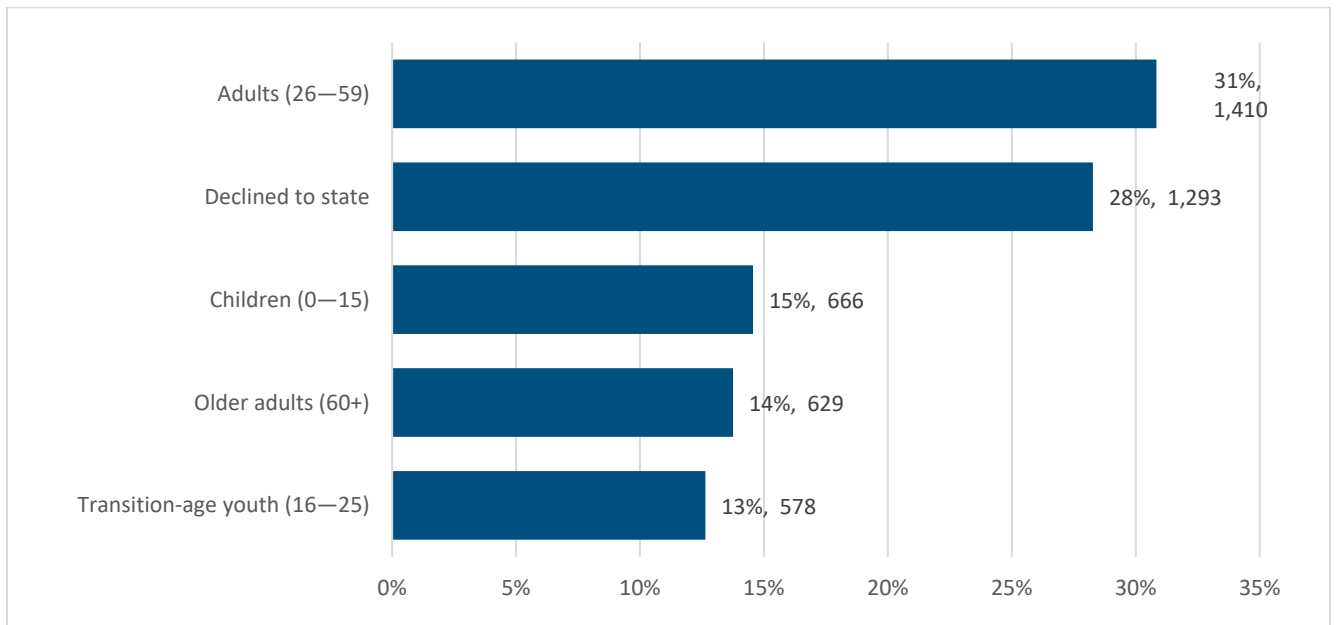
North County Outreach Collaborative

This section provides details about 4,573 attendees at NCOC group and individual outreach events across the five provider organizations in FY2022–2023.

Demographics

Age: Attendees across NCOC outreach events were adults (26–59 years of age; 31%), children (0–15 years of age; 15%), older adults (60 years of age and older; 14%), and transition-age youth (16–25 years of age; 13%) in FY2022–2023. Twenty-eight percent of attendees declined to state their age. See **Exhibit 6** for the number and percentage of total outreach attendees representing each reported age group.

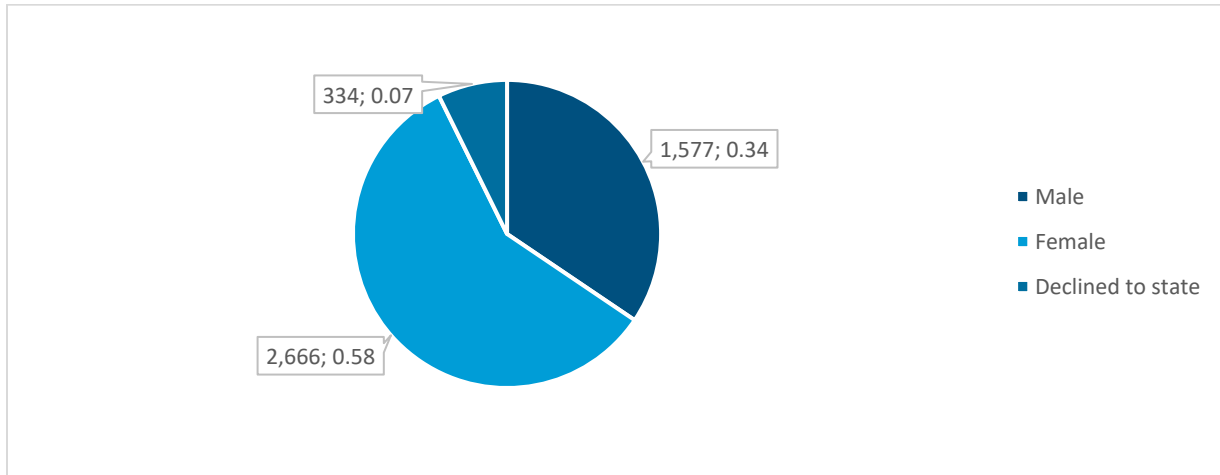
Exhibit 6. Age of Total Outreach Attendees Served by NCOC, FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year. The total count for age reported may exceed the total number of attendees because some providers may have reported individuals in two or more age groups, leading to extra counts in some cases for the group outreach attendees. Therefore, the percentages may add up to more than 100%.

Sex at birth: Exhibit 7 shows the sex at birth of attendees across NCOC group and individual outreach events for FY2022–2023. Attendees indicated their sex at birth as female (58%) or male (35%), or they declined to state their sex at birth (7%).

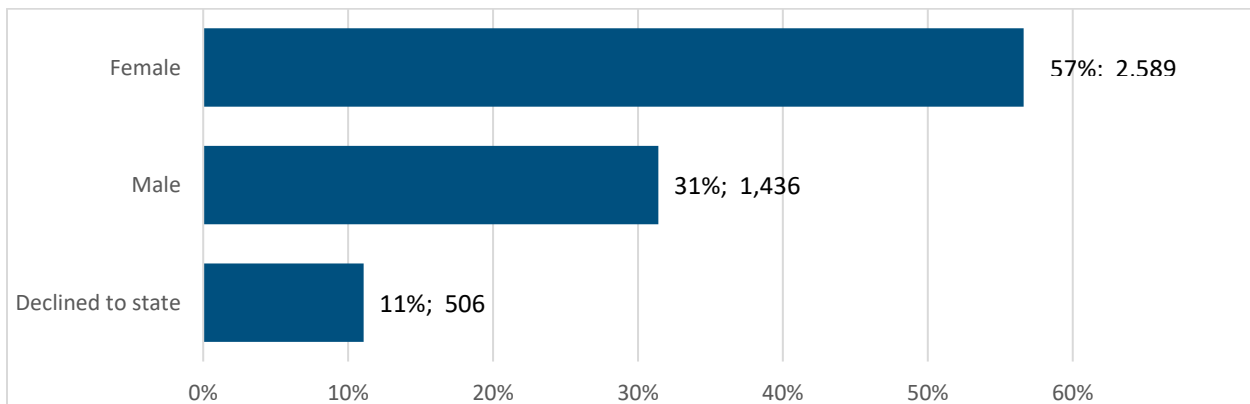
Exhibit 7. Sex at Birth of Outreach Attendees Served By NCOC, FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year. Percentages may not sum to 100% because of rounding. The total count for sex reported may exceed the total number of attendees because some providers may have reported individuals in two or more sex groups, leading to extra counts in some cases for the group outreach attendees.

Gender: Exhibit 8 shows the gender of attendees across NCOC group and individual outreach events for FY2022–2023. The majority of attendees identified as female (57%), and 31% of attendees identified as male. Other gender identities, which are not displayed in Exhibit 8 due to the small sample size, were female-to-male transgender ($n = 14$), genderqueer ($n = 12$), Gender questioning ($n = 8$), male-to-female transgender ($n = 6$), other gender ($n = 5$), and Indigenous gender identity ($n = 1$). Eleven percent of the attendees declined to state gender.

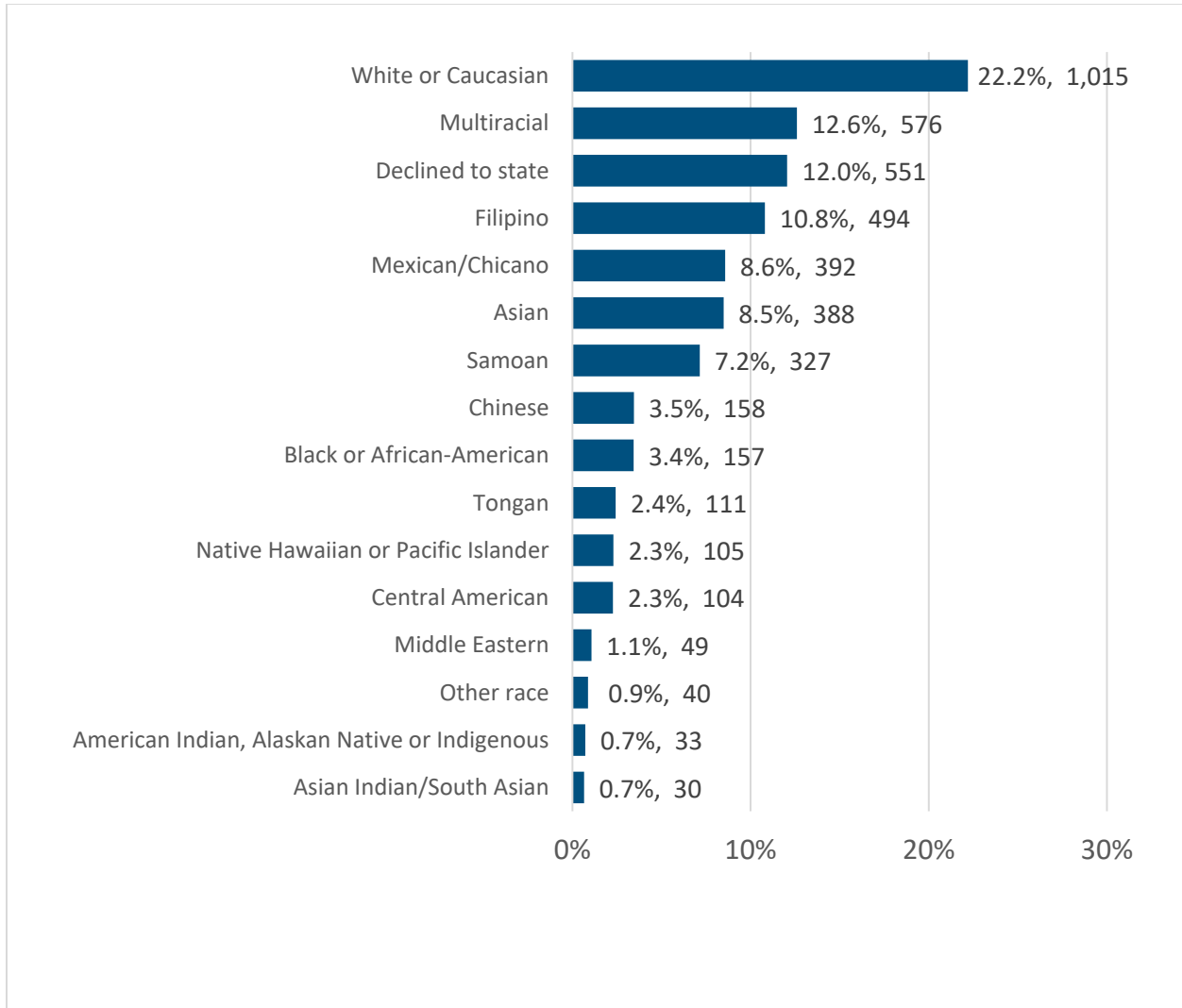
Exhibit 8. Gender of Outreach Attendees Served By NCOC, FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year.

Race and ethnicity: In FY2022–2023, the three largest racial/ethnic groups represented by all NCOC attendees identified as White (22.2%), multiracial (12.6%), and Filipino (10.8%). Nine percent of the attendees identify as Mexican/Chicano, and 9% as Asian with 12% declined to state their race. See **Exhibit 9** for the percentage of attendees representing each reported racial/ethnic group.

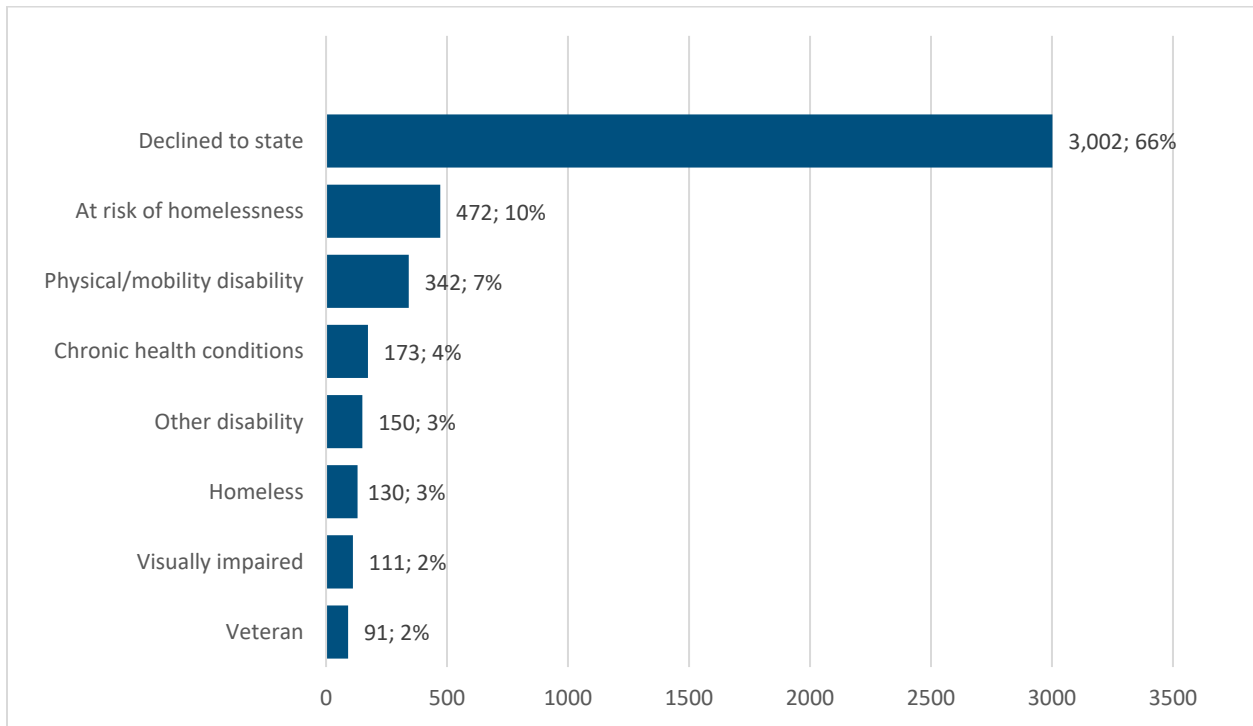
Exhibit 9. Race and Ethnicity of Outreach Attendees Served By NCOC, FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year. The total count for race/ethnicity reported may exceed the total number of attendees because some providers may have reported individuals in two or more race/ethnicity groups, leading to extra counts in some cases for the group outreach attendees. Therefore, the percentages may add up to more than 100%.

Special populations: Out of the 4,573 people who attended NCOC outreach events, 10% reported being at risk of homelessness, 7% reported a physical or mobility disability issue, and 4% reported chronic health conditions as one of the special needs they had. Most attendees (66%) declined to state a special need in FY2022–2023. Please refer to **Exhibit 10** for the number of attendees representing each special population in FY2022–2023.

Exhibit 10. Special Populations Served By NCOC, FY2022–2023



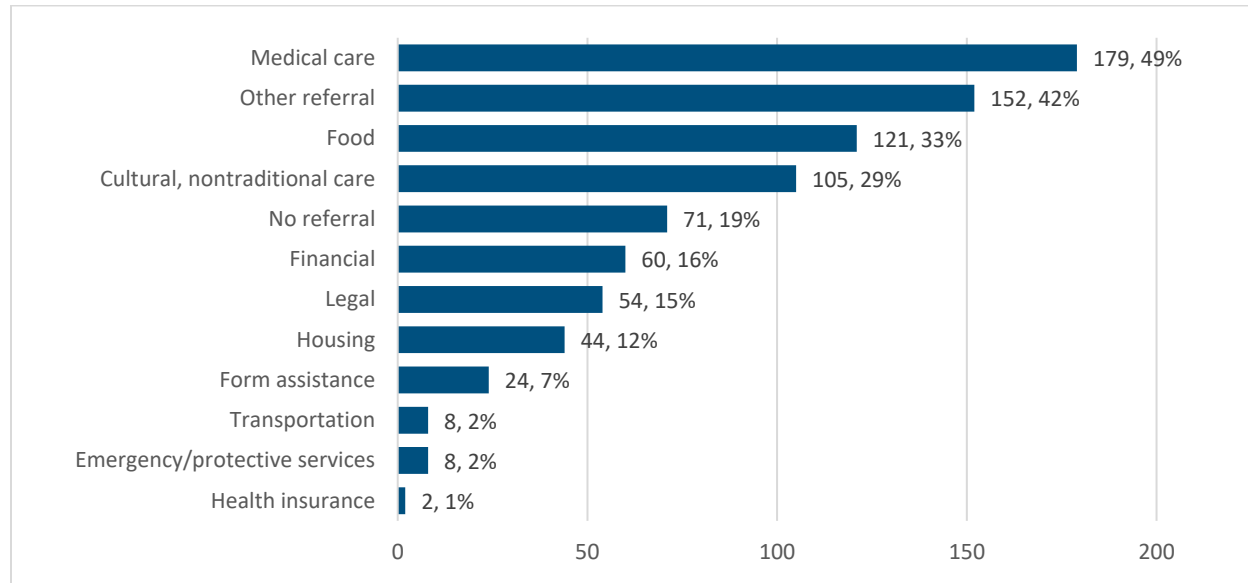
Note. NCOC = North County Outreach Collaborative; FY = fiscal year. Attendees could be included in more than one special population. Percentages may not sum to 100% because of rounding. Due to small group sizes, the graph does not display 193 attendees who belonged to the following special population groups: hearing impairment (*n* = 66), developmental disability (*n* = 63), learning disability (*n* = 57), and dementia (*n* = 7).

Additional Outreach Characteristics (Individual Outreach Events Only)

Mental health/substance use referrals: NCOC individual outreach events resulted in mental health referrals (27%) and substance use referrals (2.5%) in FY2022–2023.

Referrals to social services: Providers made 757 referrals for 366 NCOC individual outreach attendees. Out of the 366 people who attended individual NCOC events, 49% were referred to medical care services; 42% were referred to other services, such as COVID-19 testing and vaccination, EOM Parent Project the Home Energy Assistance Program (HEAP), and mental health services; and 33% were referred to food services. **Exhibit 11** summarizes the number and percentage of attendees receiving a given type of referral in FY2022–2023.

Exhibit 11. Referrals to Social Services, FY2022–2023

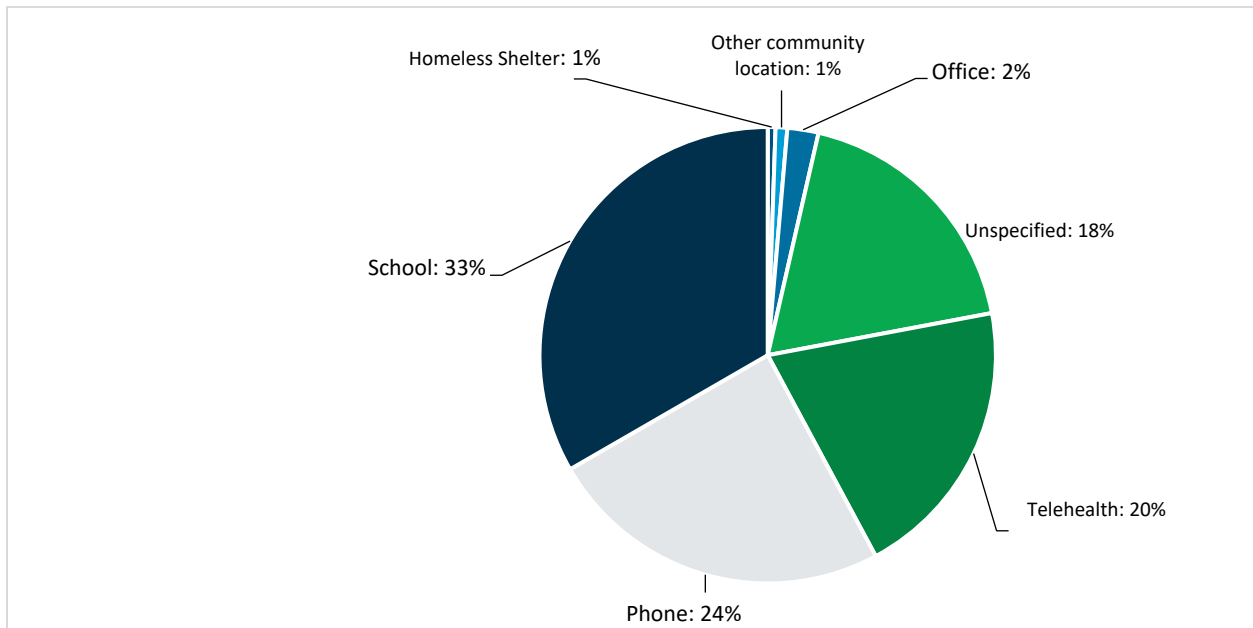


Notes. FY = fiscal year. Only individual outreach events (*n* = 366) offer service referrals. Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%. Other referrals include services related to COVID-19 testing and vaccination, EOM Parent Project, the Home Energy Assistance Program, and mental health services.

Event Characteristics

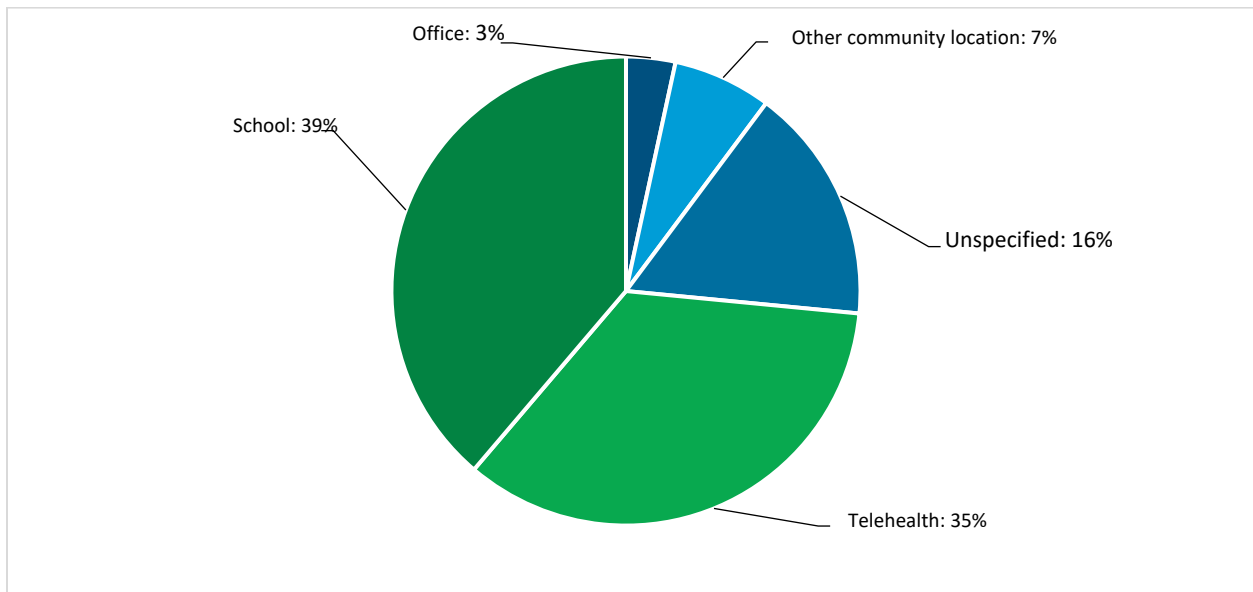
Location: Exhibits 12 and 13 present the locations for individual and group outreach events in FY2022–2023. NCOC individual outreach events occurred primarily at school (33%) or over the phone (24%) in FY2022–2023. Group outreach events occurred primarily at school (39%), via telehealth (35%), and at other community locations (7%). Other community locations included places such as Boys & Girls Clubs, community centers, the Daly City Youth Health Center, health fairs, fairgrounds, malls, and public parks. The “Other locations” category includes all the locations that were reported that make up less than 10% of the total locations reported.

Exhibit 12. Locations of NCOC Individual Outreach Events, FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year. Percentages may not sum to 100% because of rounding.

Exhibit 13. Locations of NCOC Group Outreach Events, FY2022–2023



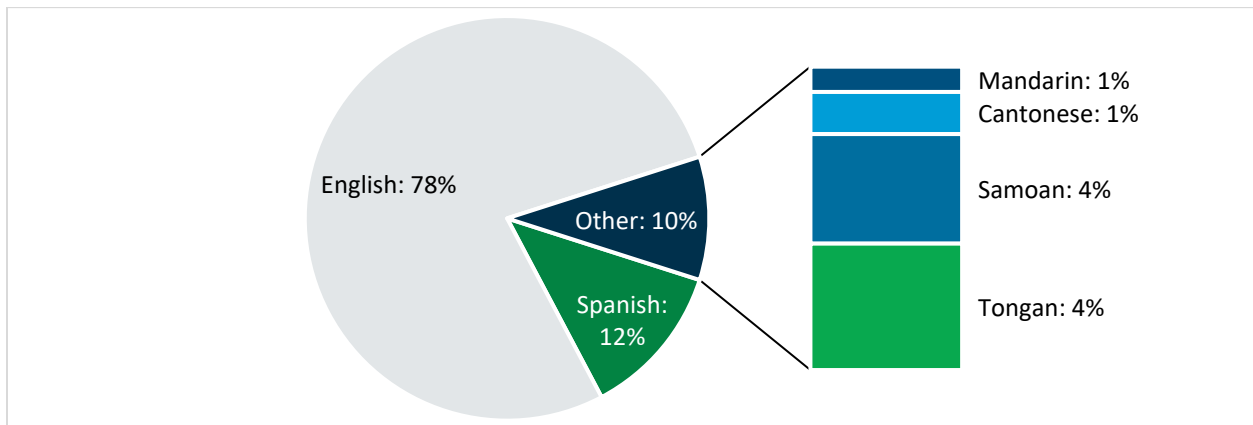
Note. NCOC = North County Outreach Collaborative; FY = fiscal year. Percentages may not sum to 100% because of rounding.

Length of contact: For FY2022–2023, the individual outreach events ranged from 3 to 120 minutes and lasted 38 minutes on average. The average length of NCOC group outreach events ranged from 30 to 360 minutes and lasted 83 minutes on average.

Language used: NCOC individual outreach events were conducted in English (87.2%) and Spanish (11.7%) in FY2022–2023. NCOC group outreach events were conducted in English (92.6%) and Spanish (5.4%) in FY2022–2023.

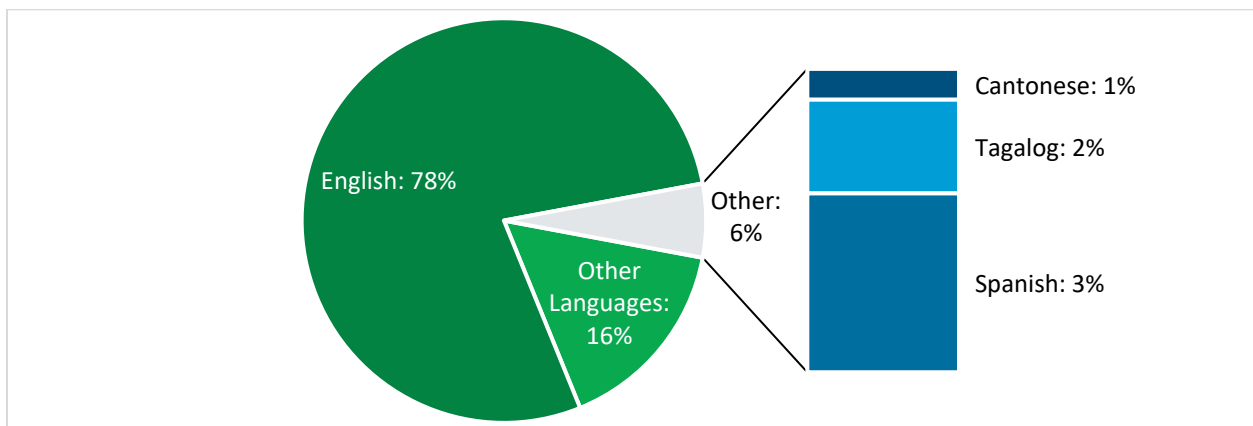
Preferred language: Exhibits 14 and 15 present breakdowns of the preferred languages at individual and group outreach events in FY2022–2023. NCOC individual outreach attendees preferred English (78%), Spanish (12%), and other languages (6%). NCOC group outreach attendees preferred English (78%), other languages (16%), Tagalog (2%), and Spanish (3%).

Exhibit 14. Preferred Languages of NCOC Individual Outreach Attendees, FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year.

Exhibit 15. Preferred Languages of NCOC Group Outreach Attendees, FY2022–2023



Note. NCOC = North County Outreach Collaborative; FY = fiscal year. Percentages may not sum to 100% because of rounding.

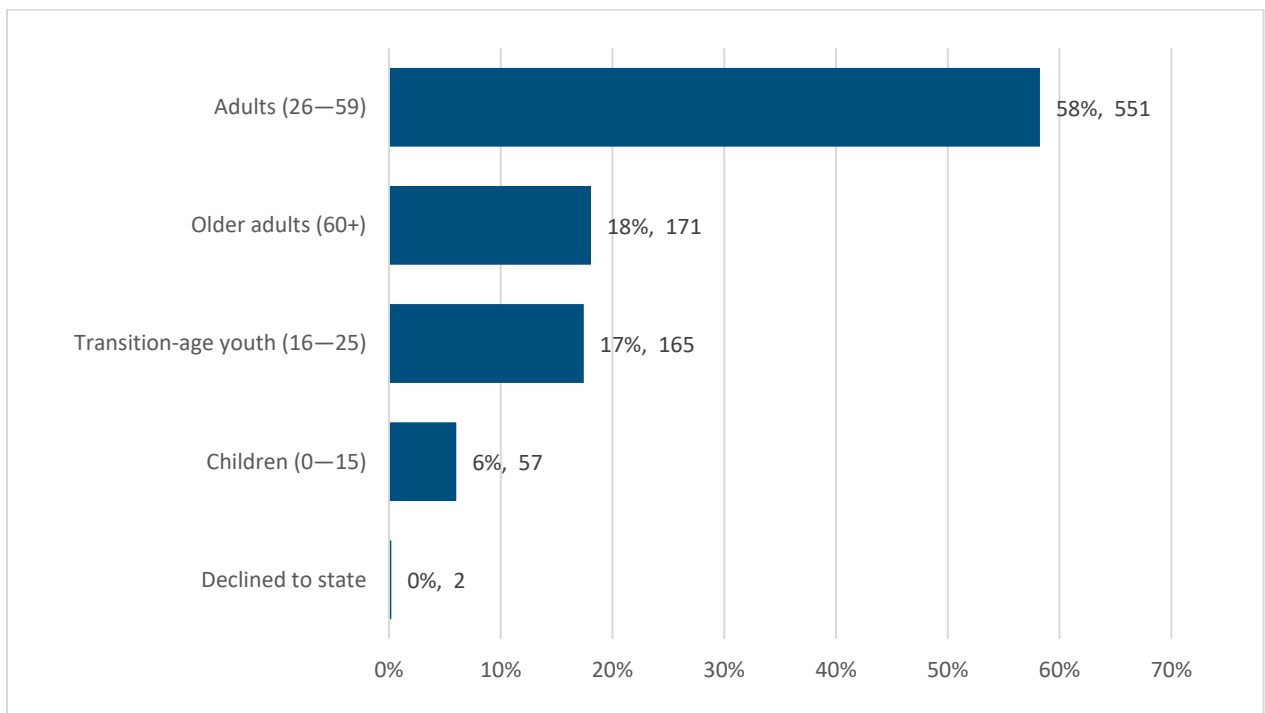
East Palo Alto Partnership for Mental Health Outreach

This section provides details about 946 attendees at EPAPMHO group and individual outreach events across three provider organizations in FY2022–2023.

Demographics

Age: Of the EPAPMHO FY2022–2023 individual and group outreach attendees, 58% were adults (26–59 years of age), 18% were older adults (60+ years of age and older), 17% were transition-age youth (16–25 years of age), and 6% were children (0–15 years of age). See **Exhibit 16** for the number and percentage of outreach attendees representing each reported age group.

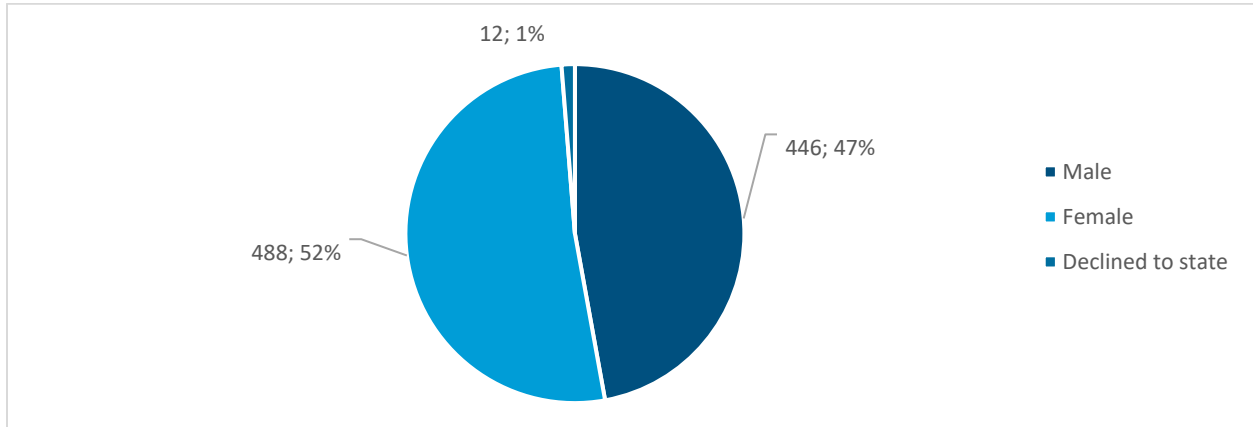
Exhibit 16. Age of Outreach Attendees Served By EPAPMHO, FY2022–2023



Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year. The total count for age reported may exceed the total number of attendees because some providers may have reported individuals in two or more age groups, leading to extra counts in some cases for the group outreach attendees. Therefore, the percentages may add up to more than 100%. Note that the “Declined to state” category is 0% in the exhibit due to rounding; however, 0.21% declined to state their age.

Sex at birth: Attendees across EPAPMHO outreach events indicated their sex at birth as female (52%) or male (47%). See **Exhibit 17** for the number and percentage of reporting sex at birth.

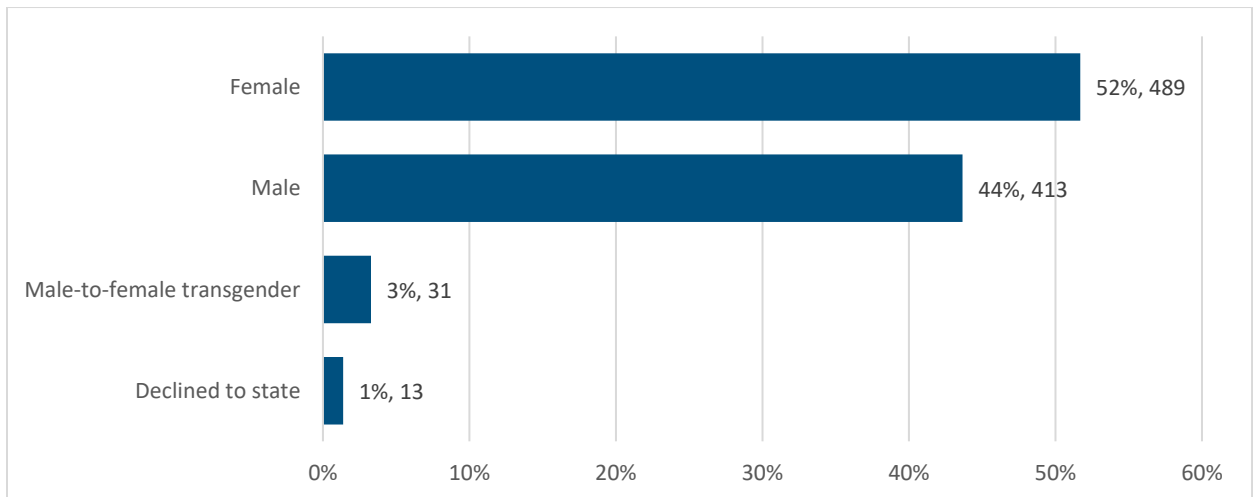
Exhibit 17. Sex at Birth of Outreach Attendees Served By EPAPMHO, FY2022–2023



Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year. Percentages may not sum to 100% because of rounding. The total count for sex reported may exceed the total number of attendees because some providers may have reported individuals in two or more sex groups, leading to extra counts in some cases for the group outreach attendees.

Gender: Attendees across EPAPMHO individual and group outreach events identified themselves as female (52%), male (44%), or male-to-female transgender (3%). See **Exhibit 18** for the number and percentage of individual and group outreach attendees representing each reported gender.

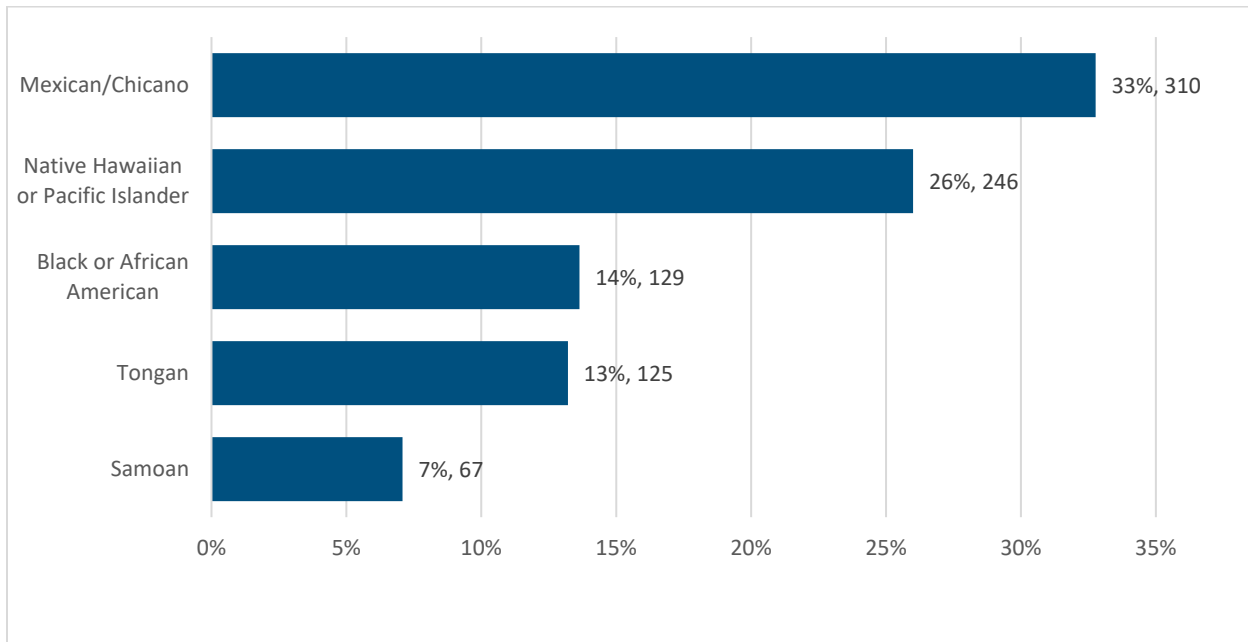
Exhibit 18. Gender of Outreach Attendees Served By EPAPMHO, FY2022–2023



Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year. Gender identities, which are not displayed due to small samples, were female-to-male transgender person ($n = 2$) and Indigenous gender identity ($n = 1$).

Race and ethnicity: In FY2022–2023, the four largest racial/ethnic groups represented by all EPAPMHO attendees identified as Mexican or Chicano (32%), Native Hawaiian or Pacific Islander (25%), Black or African-American (13%), Tongan (13%), and Samoan (7%). See **Exhibit 19** for the number and percentage of attendees representing each reported racial/ethnic group.

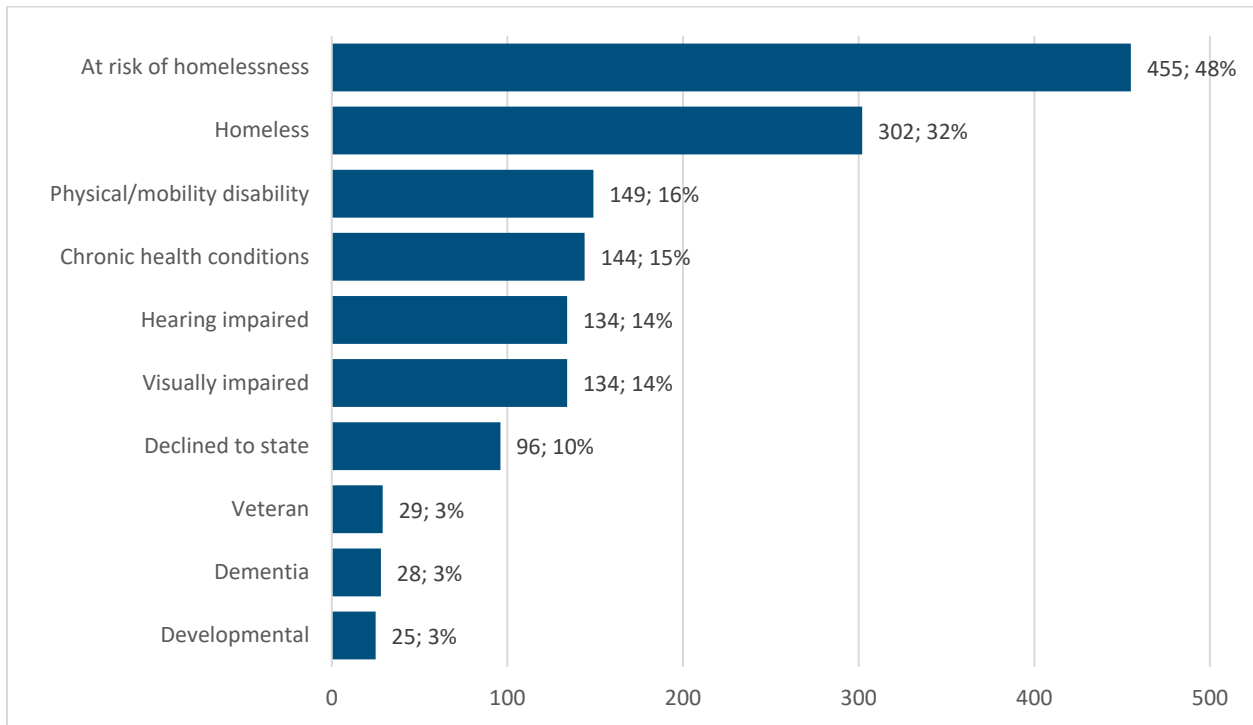
Exhibit 19. Race and Ethnicity of Outreach Attendees Served By EPAPMHO, FY2022–2023



Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year. The graph does not display 105 attendees belonging to various race/ethnicity groups due to small n within each group. The total count for race/ethnicity reported may exceed the total number of attendees because some providers may have reported individuals in two or more race/ethnicity groups, leading to extra counts in some cases for the group outreach attendees. Therefore, the percentages may add up to more than 100%.

Special populations: Out of the 946 people who attended EPAPHMO events, 48% reported being at risk of homelessness, 32% reported homelessness, 16% reported a physical or mobility disability issue, 15% reported chronic health conditions, 14% reported hearing impairment, and 14% reported visual impairment as one of the special needs they have. Refer to **Exhibit 20** for the number and proportion of attendees representing each special population in FY2022–2023.

Exhibit 20. Special Populations Served by EPAPMHO, FY2022–2023



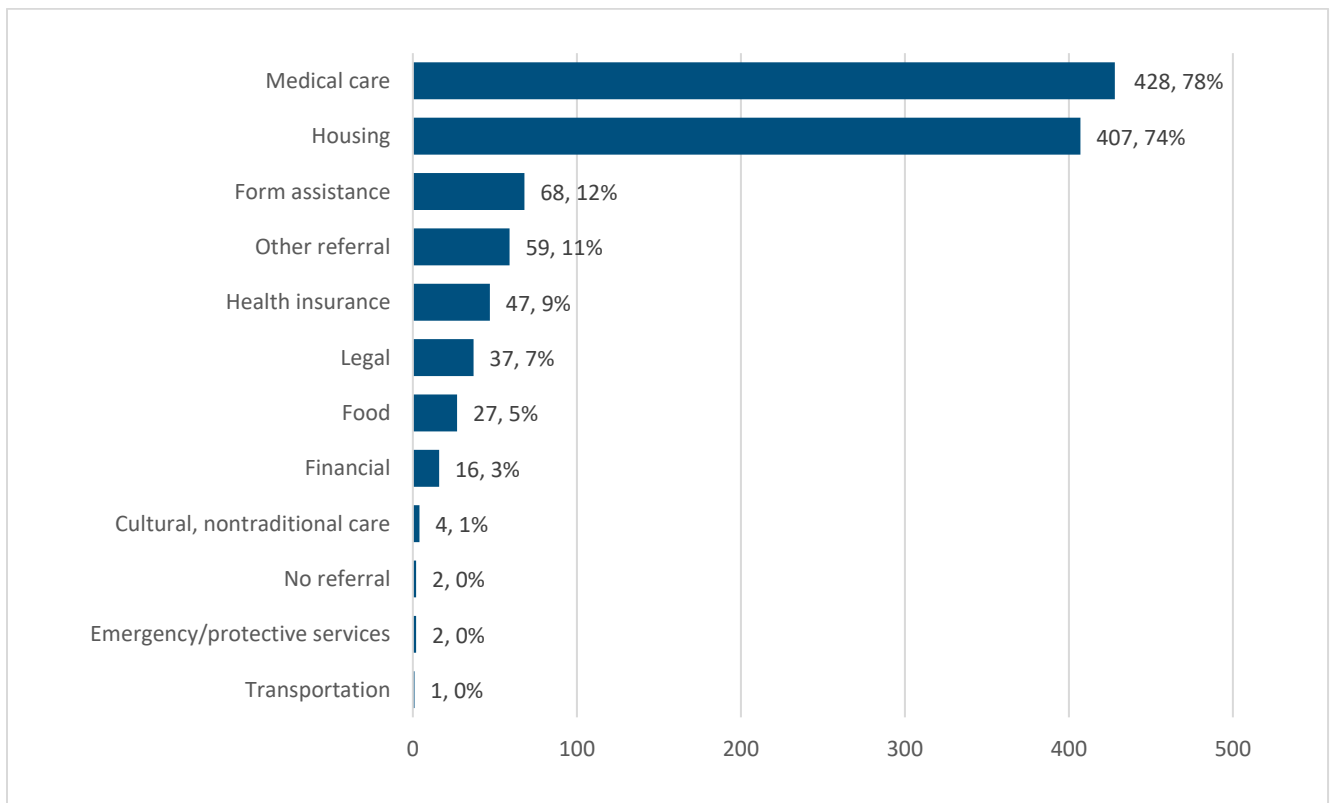
Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%. There were fifteen endorsements for special populations that are not displayed in the graph above due to the small sample. These special populations were other disability and learning disability.

Additional Outreach Characteristics (Individual Outreach Events Only)

Mental health/substance use referrals: EPAPMHO individual outreach events resulted in mental health referrals (14.1%) and substance use referrals (72.3%) in FY2022–2023.

Referrals to social services: Providers made 1,096 referrals to 552 EPAPMHO individual outreach attendees. Out of the 522 people who attended individual EPAPMHO events, 78% were referred to medical care services; 74% were referred to housing services; 12% were referred to form assistance services; 11% were referred to other services, such as COVID-19 testing and vaccination, EOM Parent Project, the Home Energy Assistance Program, and mental health services, and 33% were referred to food services. **Exhibit 21** summarizes the number of attendees receiving a given type of referral.

Exhibit 21. Referrals to Social Services, FY2022–2023

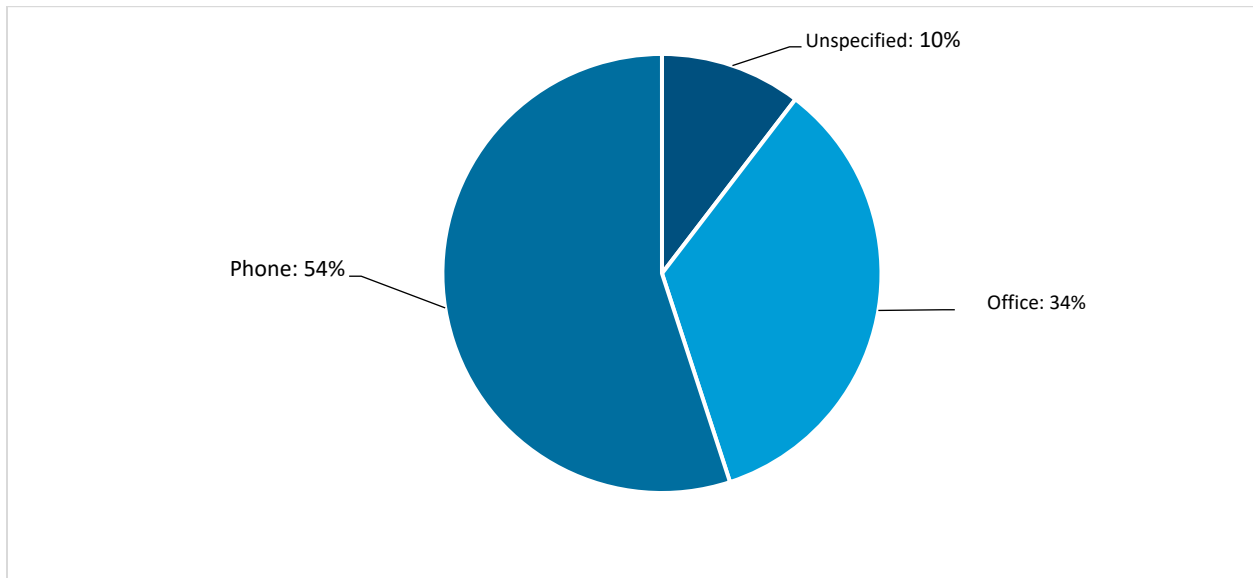


Notes. FY = fiscal year. Only individual outreach events ($n = 552$) offer service referrals. Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%. Other referrals include services related to COVID-19 testing and vaccination, EOM Parent Project, the Home Energy Assistance Program, and mental health services.

Event Characteristics

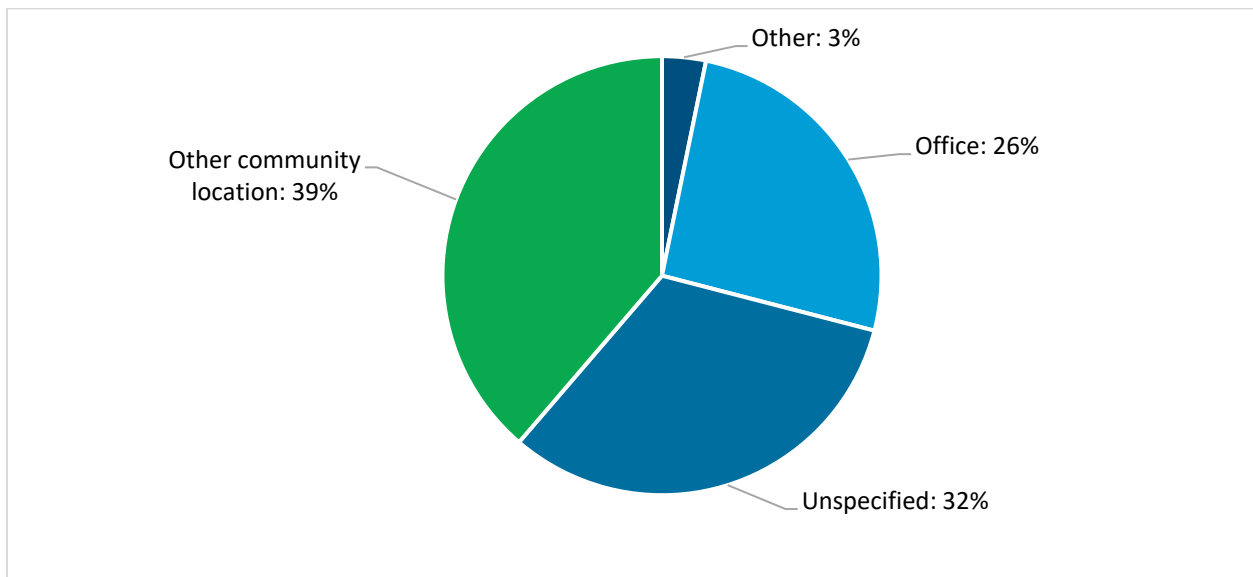
Location: EPAPMHO individual outreach events occurred over the phone (54%), in offices (34%), or at unspecified locations (10%). **Exhibit 22** presents individual outreach event locations. **Exhibit 23** presents the group outreach events. They occurred in other community locations (39%), unspecified locations (32%), an office (26%), or a mobile service (3%).

Exhibit 22. Location of EPAPMHO Individual Outreach Events, FY2022–2023



Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year.

Exhibit 23. Location of EPAPMHO Group Outreach Events, FY2022–2023



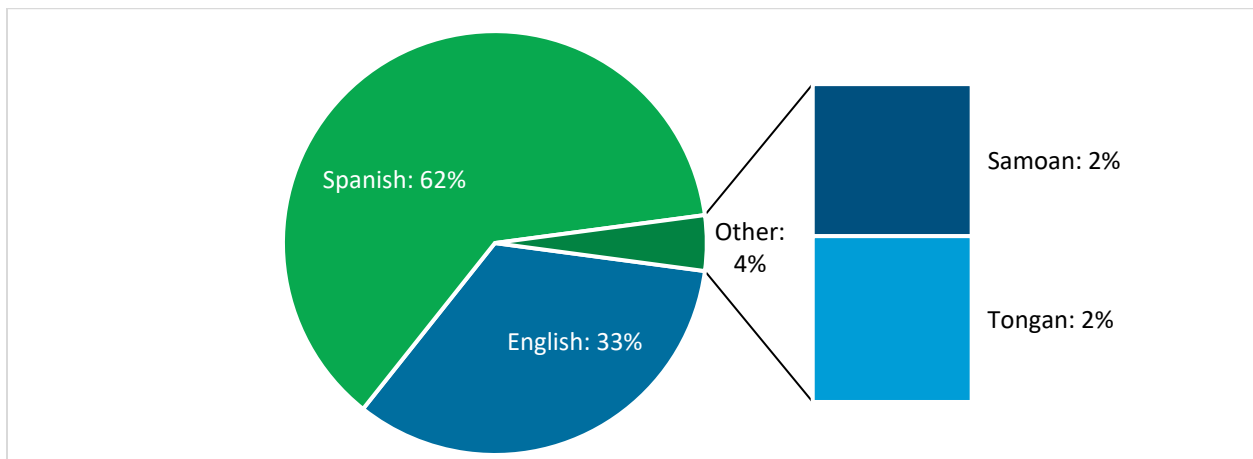
Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year.

Length of contact: In FY2022–2023, the individual outreach events lasted from 5 to 35 minutes and averaged 16 minutes. The group outreach events lasted from 30 minutes to 300 minutes.

Language used: EPAPMHO individual outreach events were conducted in Spanish (60%), English (36%), Samoan (2%), and Tongan (1.6%). The group outreach events were conducted in Tongan (41.9%), English (32.3%), and Samoan (25.8%).

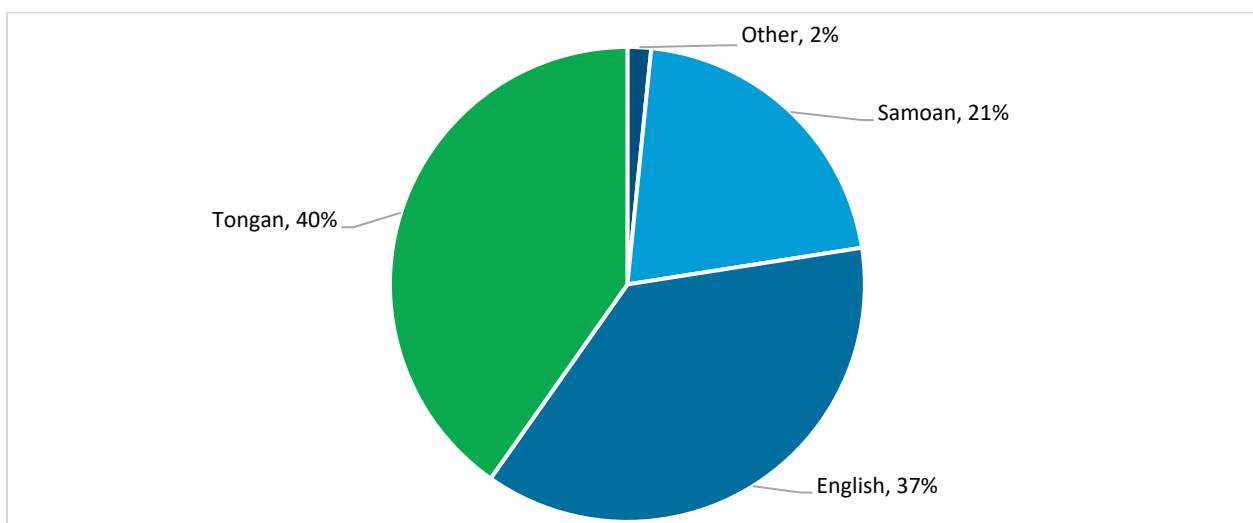
Preferred language: EPAPMHO individual outreach attendees preferred Spanish (62%), English (33%), Tongan (2%), and Samoan (2%). Attendees at the EPAPMHO group outreach events preferred Tongan (40%), English (27%), and Samoan (21%). **Exhibits 24 and 25** present breakdowns of preferred languages at individual and group outreach events in FY2022–2023.

Exhibit 24. Preferred Languages of EPAPMHO Individual Outreach Attendees, FY2022–2023



Note. EPAPMHO = East Palo Alto Partnership for Mental Health Outreach; FY = fiscal year.

Exhibit 25. Preferred Languages of EPAPMHO Group Outreach Attendees, FY2022–2023



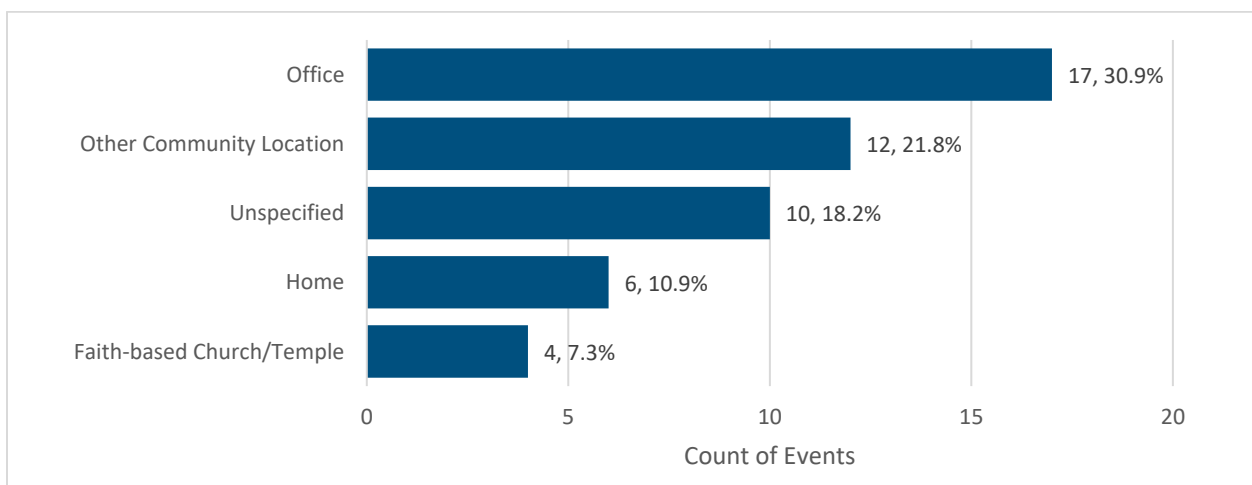
Appendix A. FY2022–2023 Outreach, Anamatangi Polynesian Voices

For FY2022–2023, Anamatangi Polynesian Voices reported 55 outreach events, which included 24 individual events and 31 group events. There were 418 attendees across all events. All individual events lasted for 30 minutes. The group outreach events ranged from 30 to 300 minutes and lasted for 119 minutes on average.

Outreach events

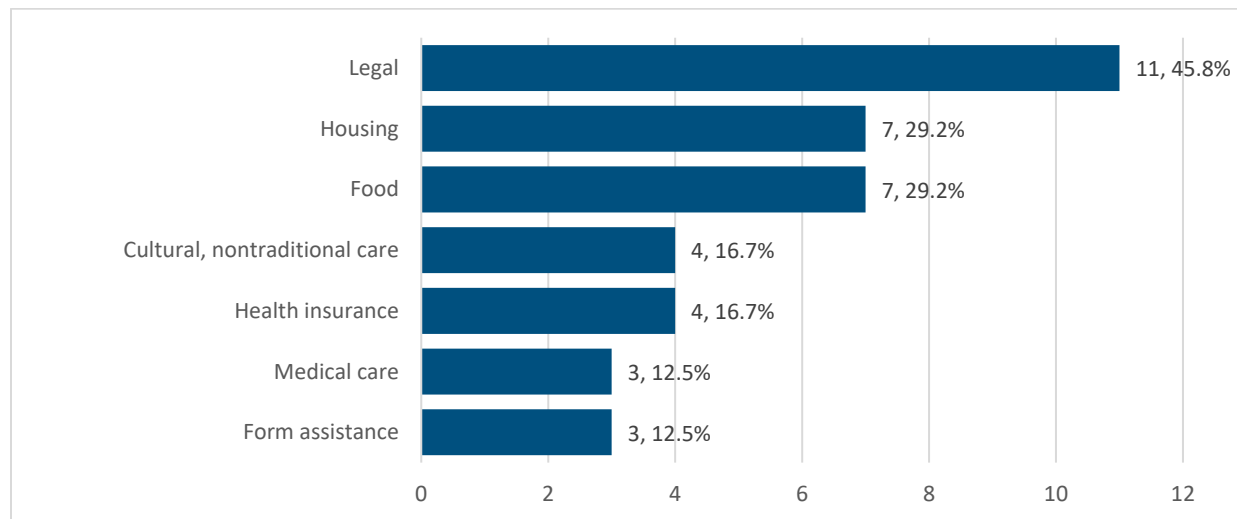
- Most frequently took place in an office (**30.9%**; $n = 17$). Other locations for events and their respective values are shown in **Exhibit A1**.
- Were conducted in Tongan (**40%**; $n = 22$), Samoan (**34.5%**; $n = 19$), and English (**25.5%**; $n = 14$).
- Resulted in 24 mental health referrals and 1 substance use treatment referral.
- There were 41 referrals to social services for individuals who attended the individual events. (See **Exhibit A2**.) Individual outreach event attendees ($n = 24$) were referred to legal (45.8%; $n = 11$); housing (**29.2%**, $n = 7$); food (**29.2%**; $n = 7$) services; cultural, nontraditional care (**16.7%**, $n = 4$); health insurance (**16.7%**, $n = 4$); medical care (**12.5%**; $n = 3$); form assistance (**12.5%**; $n = 3$) services; financial (**4.2%**; $n = 1$) services; and emergency/protective services (**4.2%**; $n = 1$).

Exhibit A1. Counts and Percentages of Events by Location Type: Anamatangi Polynesian Voices Outreach Events, FY2022–2023



Note. These events were not displayed in the graph above due to the small n: Age-specific Community Center ($n = 1$), Home Shelter ($n = 1$), Job Site ($n = 1$), Mobile Service ($n = 1$), Phone ($n = 1$), and Residential Care ($n = 1$).

Exhibit A2. Counts and Percentages of Social Services Referrals following Individual Outreach Events: Anamatangi Polynesian Voices, FY2022–2023



Notes. 1) Only individual outreach events ($n = 24$) offer service referrals.

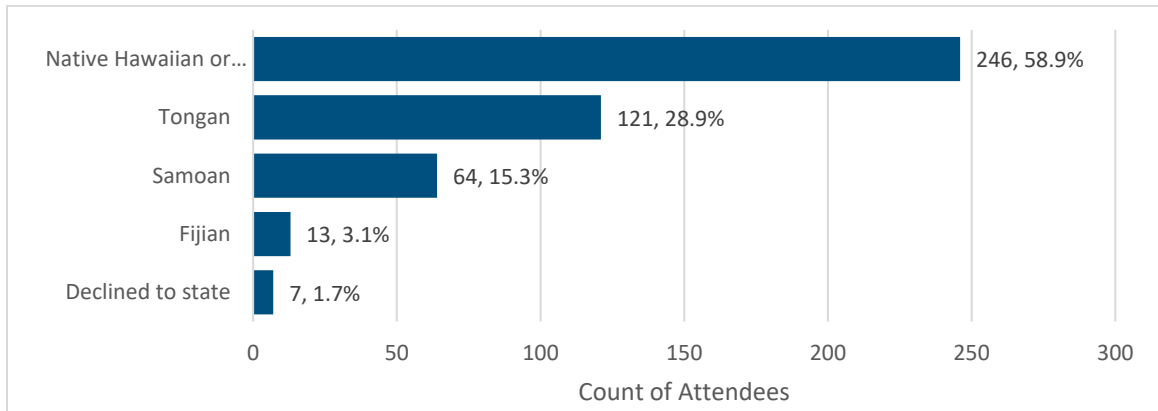
2) Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%.

3) These referral types were not displayed in the graph above due to the small n: Financial ($n = 1$) and Emergency/Protective services ($n = 1$).

Demographics of Outreach event attendees

- 53% were female (**53.1%**; $n = 222$); 44% were male (**44%**, $n = 184$); 2.9% declined to state (**2.9%**, $n = 12$).
- 52.9% identified their gender as female (**52.7%**; $n = 221$); 44% identified as male (**44%**; $n = 184$); 13 declined to state (**3.1%**); 1 (**0.2%**) reported an Indigenous gender identity.
- Identified as straight (**94%**; $n = 393$), gay/lesbian (**5.7%**; $n = 24$), other (**5.7%**; $n = 24$), queer (**0.5%**; $n = 2$), and declined to state (**0.2%**; $n = 1$).
- Included adults (26–59 years of age; **30.4%**; $n = 127$), older adults (60 years of age and older; **32.8%**; $n = 137$), transition-age youth (16–25 years of age; **22.7%**; $n = 95$), and youth (15 years of age and younger; **13.6%**, $n=57$). Two attendees declined to state their age (**0.5%**; $n = 2$).
- Were primarily Native Hawaiian (**58.9%**, $n = 246$) or Tongan (**28.9%**; $n = 121$). (See **Exhibit A3.**)

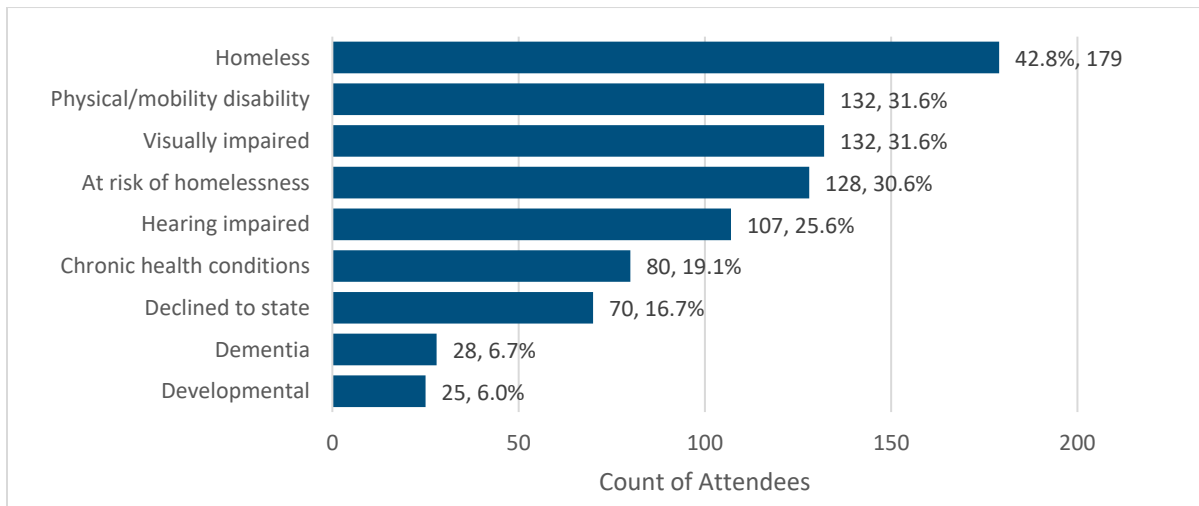
Exhibit A3. Counts and Percentages of Racial/Ethnic Categories: Anamatangi Polynesian Voices Attendees at Outreach Events, FY2022–2023



Note. Percentages add to more than 100% because attendees could select more than one race/ethnicity. There were three clients whose racial/ethnic categories are not displayed in the graph above due to the small n (n=1 for each of these racial/ethnic categories: Multi-racial (n = 1), Mexican/Chicano (n = 1), and Caribbean (n = 1).

In FY2022–2023, out of the 418 people who attended Anamatangi events, 42.8% reported homelessness, 31.6% reported a physical or mobility disability issue, 31.6% reported visual impairment, and 30.6% reported being at risk of homelessness as one of the special needs they have. (See **Exhibit A4.**) They also reported hearing impairment, chronic health conditions, dementia, and developmental disabilities among their special needs. Note that special populations are defined as those with special needs in the categories defined in Exhibit A4.

Exhibit A4. Counts and Percentages of Special Populations: Anamatangi Polynesian Voices Attendees at Outreach Events, FY2022–2023



Note. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%. These special populations were not displayed in the graph above due to the small n: Other disability (n = 11) and Learning disability (n = 1).

Appendix B. FY2022–2023 Outreach, Asian American Recovery Services (AARS)

For FY2022–2023, Asian American Recovery Services (AARS) reported 152 outreach events, which included 133 individual events and 19 group events. There were 1092 attendees. Individual outreach events ranged from 10 to 120 minutes and on an average lasted for 36 minutes. The group outreach events ranged from 60 to 120 minutes and lasted for 69 minutes on an average.

Outreach events

- Were most often at unspecified locations (**55.3%**, $n=84$) or held over the phone (**36.8%**, $n = 56$). Other locations of events and their respective values are shown in **Exhibit B1**.
- Were conducted in English (**100%**; $n = 152$).
- Resulted in 22 mental health referrals and 8 substance use treatment referrals at individual outreach events.
- There were 519 referrals to social services for individuals who attended the individual events. (See **Exhibit B2**.) Individual outreach event attendees ($n = 133$) were referred to other referrals (**100.0%**; $n = 133$) including services related to COVID-19 testing and vaccinations, EOM Parent Project, the Home Energy Assistance Program (HEAP), and mental health; cultural, non-traditional care (**78.9%**, $n = 105$); food (**73.7%**; $n = 98$); medical care (**39.1%**, $n = 52$); legal services (**33.1%**, $n = 44$); financial services (**32.3%**; $n = 43$); housing services (**18.0%**, $n = 24$), form assistance (**12.8%**; $n = 17$) services, transportation (**1.5%**, $n = 2$) services, no referral (**1.5%**, $n = 2$), and health insurance (**0.8%**, $n = 1$)

Exhibit B1 Counts and Percentages of Events by Location Type: AARS Outreach Events, FY2022–2023

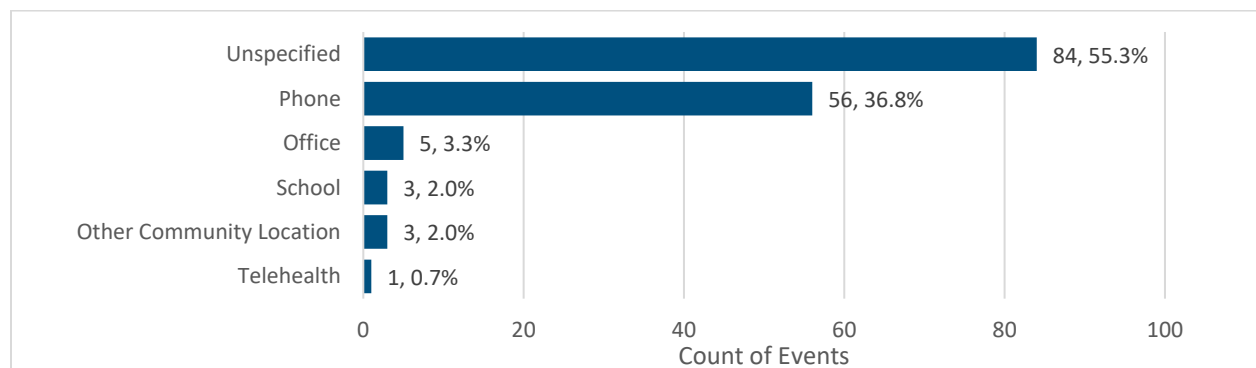
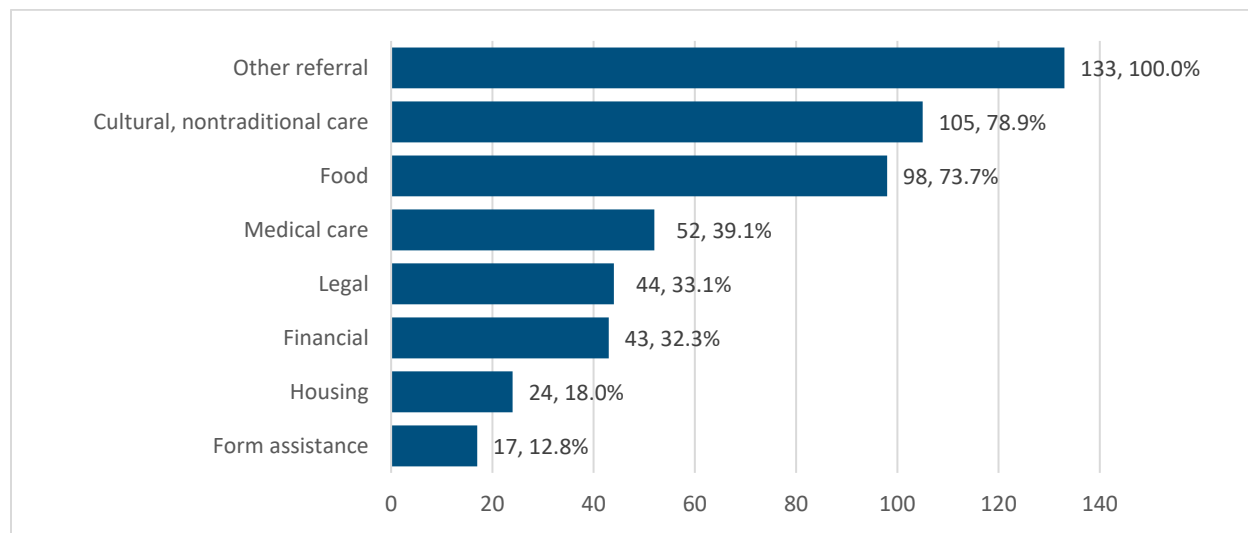


Exhibit B2. Counts and Percentages of Social Services Referrals following Individual Outreach Events: AARS, FY2022–2023



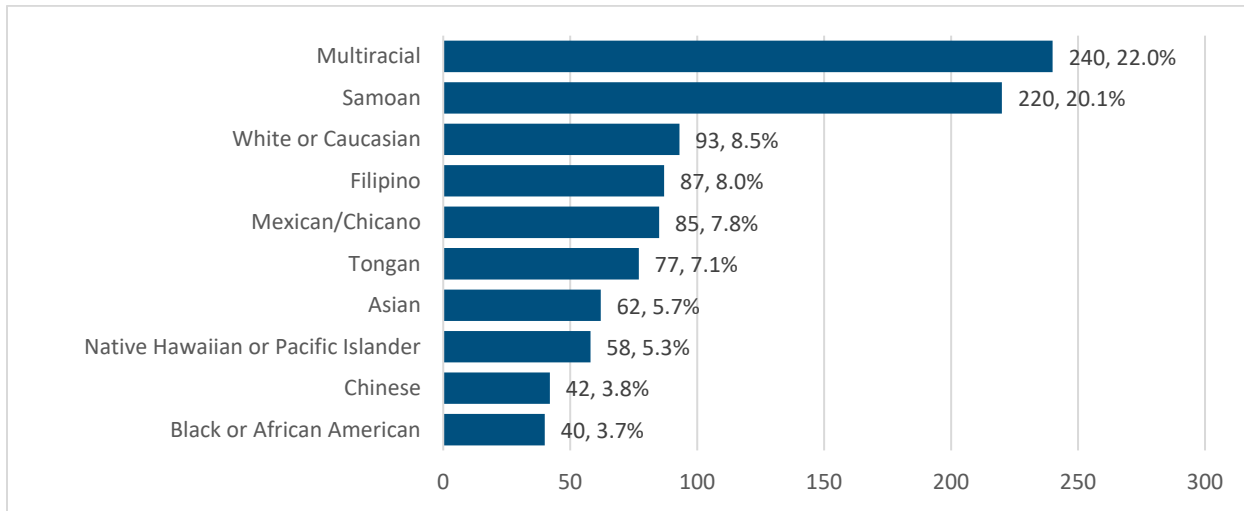
Notes. 1) Only individual outreach events ($n = 133$) offer service referrals. 2) Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%.

3) These referral types were not displayed in the graph above due to the small n : Transportation ($n = 2$), No Referral ($n = 1$), and Health insurance ($n = 1$).

Demographics of outreach event attendees

- Reported their sex at birth as female (**65.1%**; $n = 711$). Thirty-three percent were male (**33.6%**; $n = 367$). Close to 2% declined to report their sex at birth (1.6%; $n = 17$). The remaining were intersex (0.3%; $n = 3$).
- Identified their gender as female (**69.2%**; $n = 756$), male (**26.9%**; $n = 294$); female-to-male transgender (**0.4%**; $n = 4$); queer (**0.2%**; $n = 2$); an Indigenous gender identity (**0.1%**; $n = 1$); and other (**0.3%**; $n = 3$). Thirty-two attendees declined to state their gender (2.9%).
- Identified as heterosexual (**77.5%**; $n = 846$), gay/lesbian (**4.3%**; $n = 47$), bisexual (**2.1%**; $n = 23$), queer (**1.7%**; $n = 19$), questioning orientation (**0.5%**; $n = 6$); pansexual (**0.03%**; $n = 3$); and an Indigenous gender identity (**1.0%**; $n = 11$). The remaining attendees either declined to state their sexual orientation (**14.4%**; $n = 157$) or indicated an orientation that was not listed (**0.9%**; $n = 10$).
- Included adults (26–59 years of age; **48.5%**; $n = 530$), children (15 years of age and younger; **21.6%**; $n = 236$), transition-age youth (16–25 years of age; **17.1%**; $n = 187$), and older adults (60 years of age and older; **11.4%**; $n = 125$). 17 attendees declined to state their age (**1.6%**).
- Were primarily multi-racial (**22%**; $n = 240$), Samoan (**20.1%**; $n = 220$), White or Caucasian (**8.5%**; $n = 93$), and Filipino (**8.0%**; $n = 87$). (See Exhibit B3.)

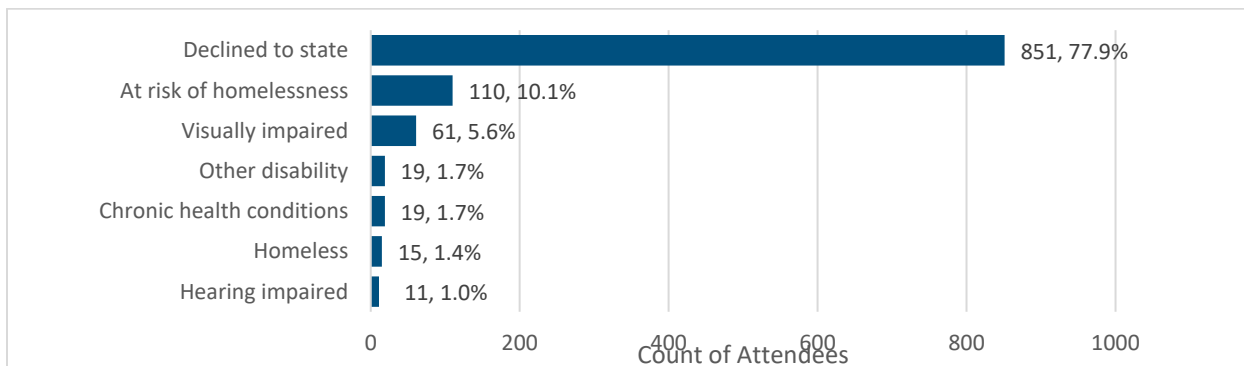
Exhibit B3. Counts and Percentages of Racial/Ethnic Categories: AARS Attendees at Outreach Events, FY2022–2023



Note. Percentages add to more than 100% because attendees could select more than one race/ethnicity. racial/ethnic categories were not displayed in the graph above due to the small n: Declined to state ($n = 16$), other race ($n = 15$), Central American ($n = 15$), Middle Eastern ($n = 12$), American Indian, Alaskan Native, or Indigenous ($n = 8$), Asian Indian/South Asian ($n = 7$), Japanese ($n = 4$), Fijian ($n = 3$), Puerto Rican ($n = 3$), European ($n = 2$), Chamorro ($n = 2$), African ($n = 1$), and Cambodian ($n = 1$).

In FY2022–2023, out of the 1092 people who attended AARS events, 77.9% declined to state their status, 10.1% reported being at risk of homelessness, 5.6% reported visual impairment, 1.7% reported another disability, 1.7% reported having a chronic health condition, 1.4% reported being homeless, and 1.0% reported being hearing impaired. (See **Exhibit B4.**)

Exhibit B4. Counts and Percentages of Special Populations: AARS Attendees at Outreach Events, FY2022–2023



Note. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%. These special populations were not displayed in the graph above due to the small n: Physical/mobility disability ($n = 10$), Veteran ($n = 6$), Learning disability ($n = 5$), and Developmental ($n = 1$).

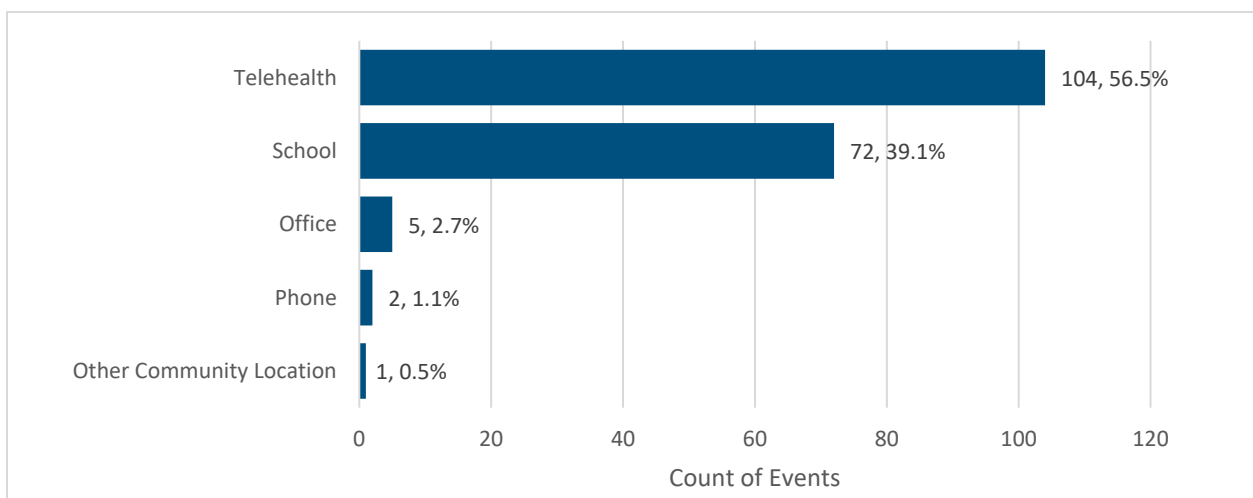
Appendix C. FY2022–2023 Outreach, Daly City Peninsula Partnership Collaborative

For FY2022–2023, Daly City Peninsula Partnership Collaborative reported 184 outreach events, including 120 individual events and 64 group events. There were 1148 attendees at these events. Individual outreach events ranged from 45 to 60 minutes and lasted for 45 minutes on average. The group outreach events ranged from 30 to 360 minutes and lasted for 93 minutes on average.

Outreach events

- Took place via telehealth most often (**56.5%**; $n = 104$). Other locations of events and their respective values are shown in **Exhibit C1**.
- Were conducted in English (**100%**; $n = 184$).
- Resulted in four mental health referrals and no substance use treatment referrals at the individual outreach events.
- There were 120 referrals to social services for individuals who attended the individual events. All individual outreach event attendees ($n = 120$) were referred to receive medical care.

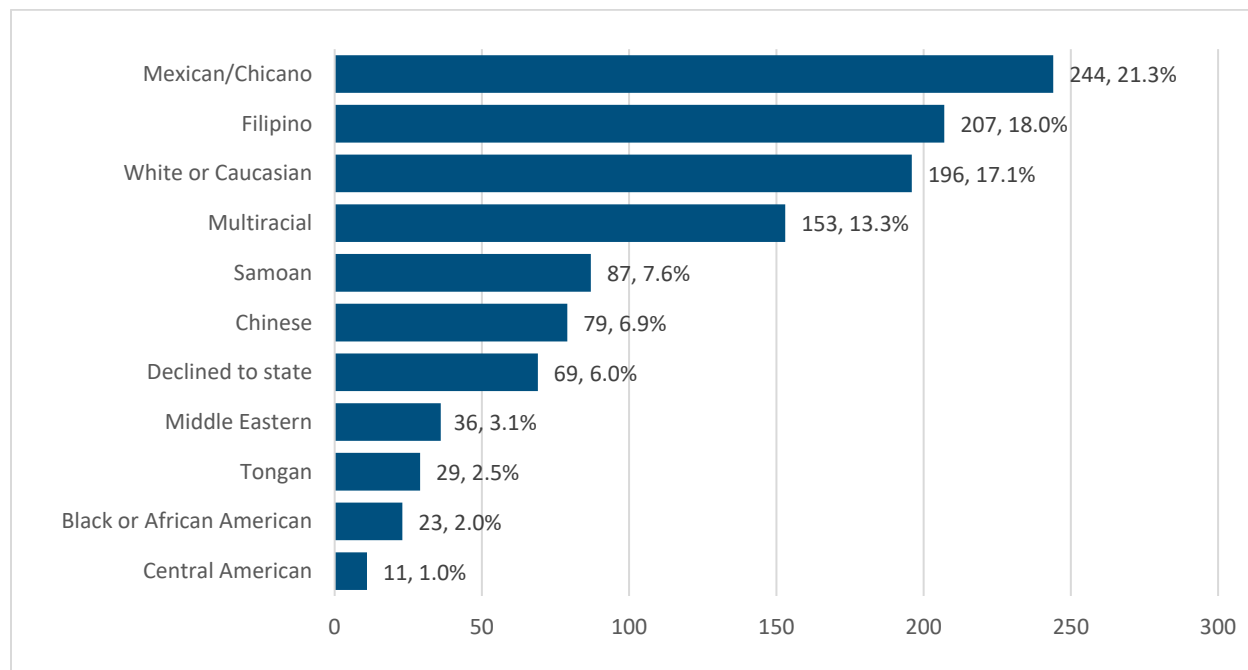
Exhibit C1. Counts and Percentages of Events by Location Type: Daly Center Peninsula Partnership Collaborative Outreach Events, FY2022–2023



Outreach event attendees

- Were female (**65.3%**; $n = 750$) and male (**31.2%**; $n = 358$). Some (**3.6%**; $n = 41$) declined to state their sex at birth.
- Identified their gender as female (**65.3%**; $n = 752$), male (**31%**; $n = 357$), female-to-male transgender (**0.1%**; $n = 1$), and not listed (**1%**; $n = 1$). Some (**3.5%**; $n = 40$) declined to state their gender.
- Identified as heterosexual (**36.0%**; $n = 413$), gay/lesbian (**4.2%**; $n = 48$), bisexual (**0.01%**; $n = 1$), queer (**0.2%**; $n = 2$), questioning (**0.2%**; $n = 2$), or other (**0.1%**, $n = 1$). 682 attendees declined to state their sexual orientation (**59.4%**).
- Included adults (26–59 years of age; **2.7%**; $n = 31$), children (15 years of age and younger; **5.7%**; $n = 65$), older adults (60 years of age and older; **0.5%**; $n = 6$), and transition-age youth (16–25 years of age; **1.6%**; $n = 18$). Almost ninety percent of attendees (**89.5%**; $n = 1028$) declined to state their age.
- Were most frequently of Mexican/Chicano (**21.3%**; $n = 244$), Filipino (**18.0%**; $n = 207$), or White/Caucasian (**17.1%**; $n = 196$) race/ethnicity (See **Exhibit C2.**)

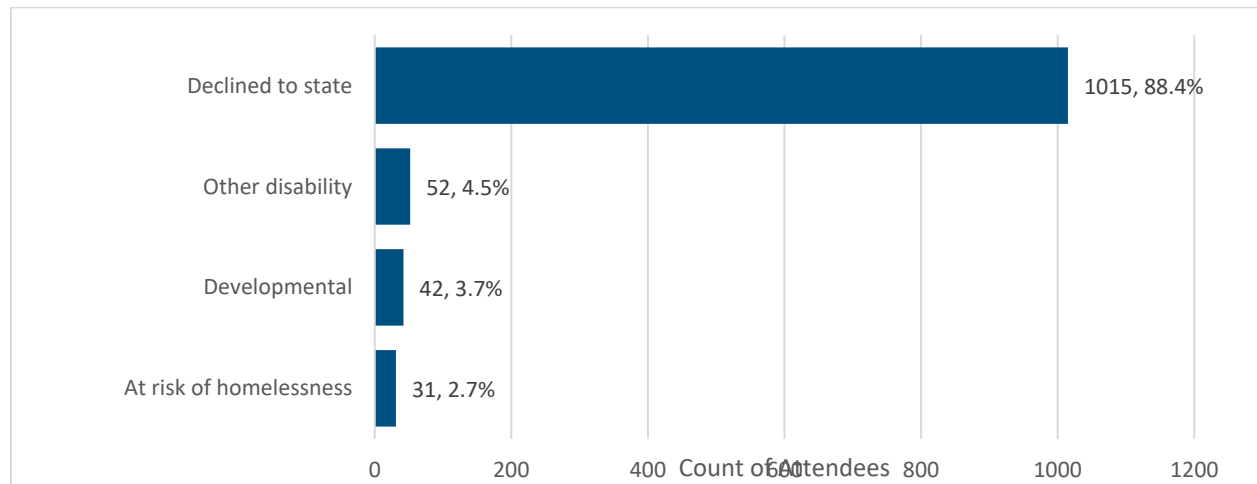
Exhibit C2. Counts and Percentages of Racial/Ethnic Categories: Daly City Peninsula Partnership Collaborative Attendees at Outreach Events, FY2022–2023



Note. Percentages add to more than 100% because attendees could select more than one race/ethnicity. These racial/ethnic categories were not displayed in the graph above due to the small n: Other race ($n = 6$), Korean ($n = 6$), South American ($n = 5$), Asian Indian/South Asian ($n = 3$), and Vietnamese ($n = 2$).

In FY2022–2023 out of the 1148 people who attended Daly Center Peninsula Partnership events, 4.5% reported other disability, 3.7% a developmental disability, and 2.7% being at risk of homelessness as one of the special needs they have. Most of these attendees (**88.4%**) declined to state being in a special population group. They also reported having a physical/mobility disability, a hearing impairment, a learning disability, chronic health conditions, and veteran status among their special needs. (See **Exhibit C3.**)

Exhibit C3. Counts and Percentages of Special Populations: Daly City Peninsula Partnership Collaborative at Outreach Events, FY2022–2023



Note. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%. These special populations were not displayed in the graph above due to the small n: Physical/mobility disability ($n = 6$), hearing impaired ($n = 6$), learning disability ($n = 4$), chronic health conditions ($n = 2$), and veteran status ($n = 1$).

Appendix D. FY2022–2023 Outreach, Daly City Youth Center

For FY2022–2023, Daly City Youth Center reported 113 outreach events, including 64 individual events and 49 group events. There were 658 attendees. Individual outreach events ranged from 3 to 120 minutes and lasted for 30 minutes on average. The group outreach events ranged from 30 to 210 minutes and lasted for 69 minutes on average.

Outreach events

- Took place at schools most of the time (**77%**, $n = 87$). Other locations for events and their respective values are shown in **Exhibit D1**.
- Were conducted in English (**62.8%**, $n = 71$), Spanish (**31%**, $n = 35$), and Tagalog (**6.2%**, $n = 7$).
- Resulted in 34 mental health referrals and no substance use treatment referrals at the individual outreach events.
- There were five referrals to social services for individuals who attended the individual events. (See **Exhibit D2**). Most of the individual outreach event attendees ($n = 64$) were not referred to a social service in FY2022–23 (**96.9%**, $n = 62$). Of the two attendees with referrals, there were two referrals to other social services, one referral to housing services, one referral to food services, and one referral to financial services.

Exhibit D1. Daly City Youth Center Locations of Outreach Events, FY2022–2023

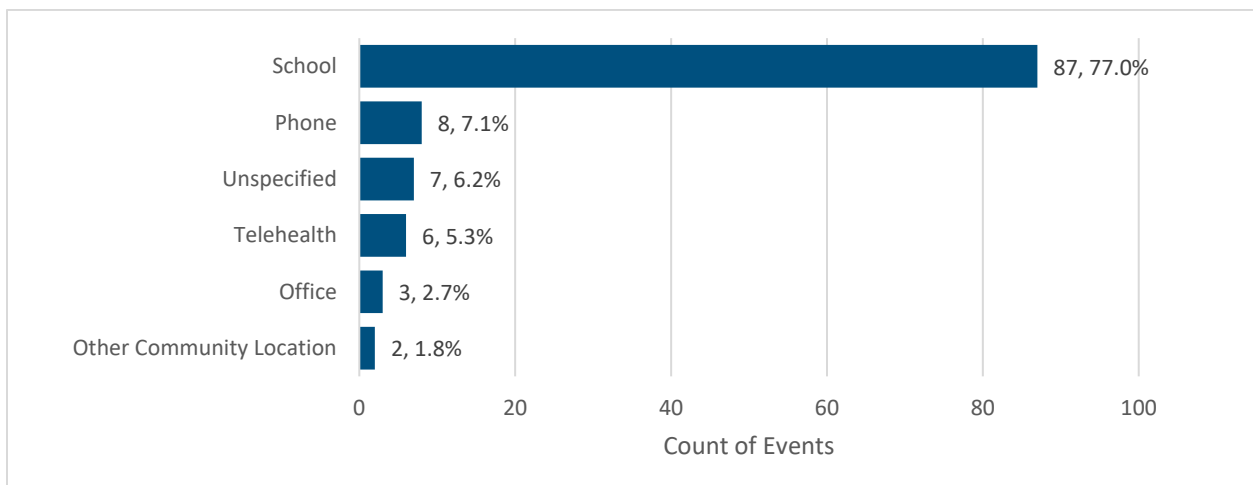
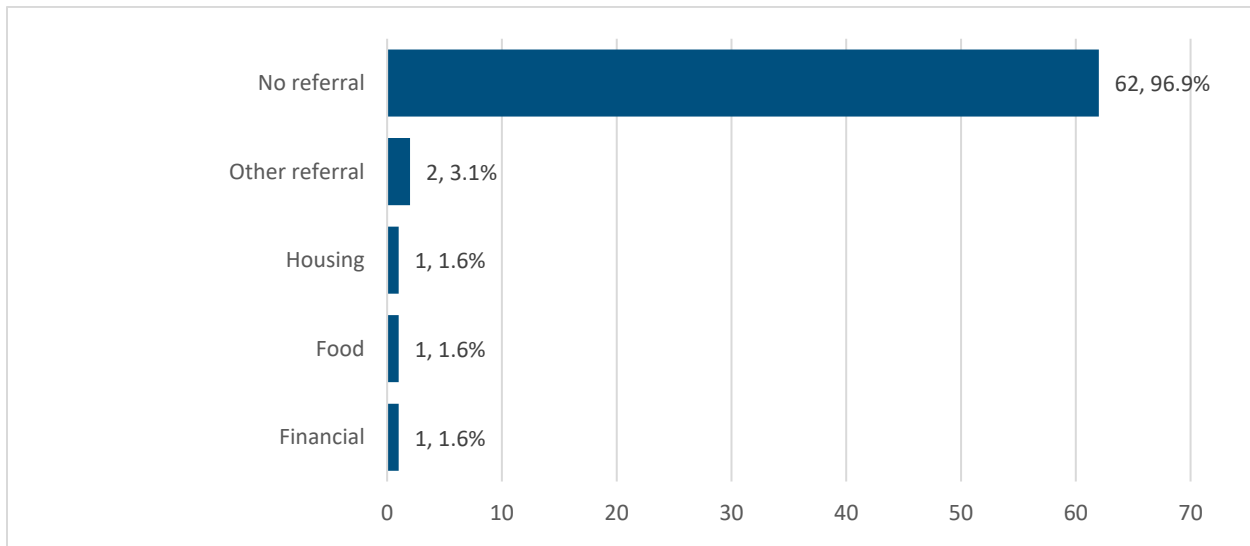


Exhibit D2. Daly City Youth Center Social Services Referrals, FY2022–2023

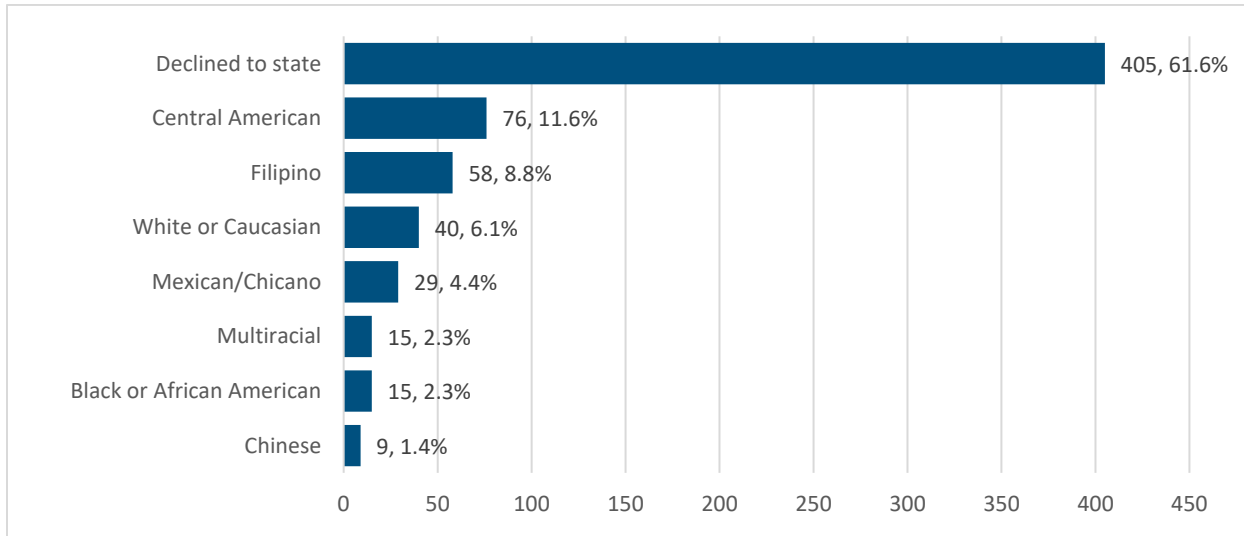


Notes. 1) Only individual outreach events ($n = 64$) offer service referrals. 2) Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%.

Demographics of Outreach event attendees

- Were female (**30.5%**, $n = 201$) and male (**30.5%**; $n = 201$). Some declined to state their sex at birth (**38.9%**; $n = 256$).
- Identified their gender as male (**22.3%**; $n = 147$) or female (**15.6%**; $n = 103$). One attendee reported another gender (**0.2%**), and 407 attendees declined to state their gender (**61.9%**).
- Identified as heterosexual (**10.8%**; $n = 71$), questioning (**1.4%**; $n = 9$), gay/lesbian (**0.2%**; $n = 1$), and bisexual (**0.3%**; $n = 2$). Most declined to state their sexual orientation (**87.2%**; $n = 574$), and some identified as a sexual orientation that was not listed (**0.2%**; $n = 1$).
- Included children (15 years of age and younger; **33.2%**; $n = 218$), transition-age youth (16–25 years of age, **19.9%**; $n = 131$), adults (26–59 years of age; **10.5%**; $n = 69$), older adults (older than 60 years of age; **2.4%**; $n = 16$). The remaining attendees (**34.0%**; $n = 224$) declined to state their age.
- Declined to state their race (**61.6%**; $n = 405$). The remaining attendees were primarily Central American (**11.6%**; $n = 76$), Filipino (**8.8%**; $n = 58$), White or Caucasian (**6.1%**; $n = 40$), Mexican/Chicano (**4.4%**; $n = 29$), multi-racial (**2.3%**; $n = 15$), Black or African-American (**2.3%**; $n = 15$), or Chinese (**1.4%**; $n = 9$). (See **Exhibit D3**.)

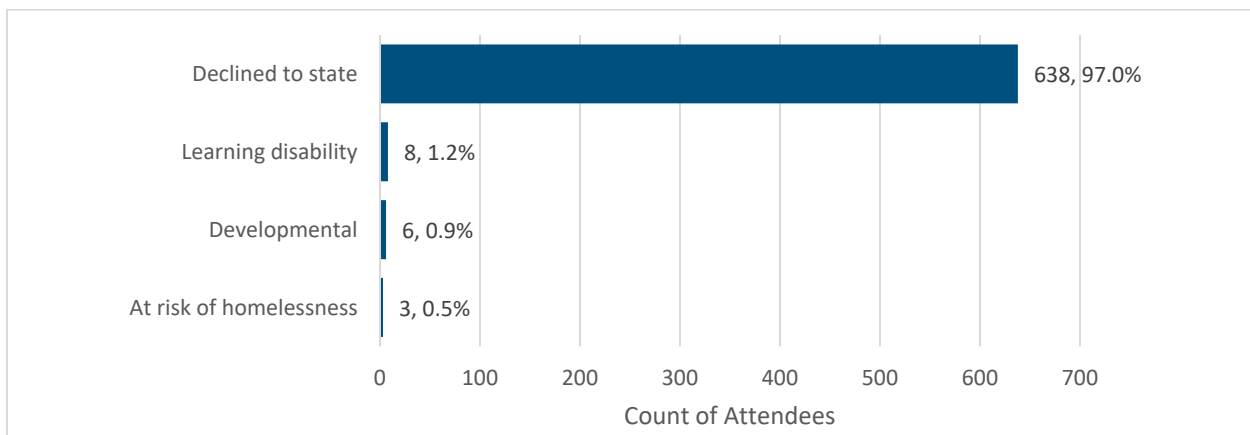
Exhibit D3. Daly City Youth Center Attendees by Top Racial/Ethnic Category, FY2022–2023



Note. Percentages add to more than 100% because attendees could select more than one race/ethnicity. These racial/ethnic categories were not displayed in the graph above due to the small n: South American ($n = 4$), Samoan ($n = 2$), Asian Indian/South Asian ($n = 2$), Middle Eastern ($n = 1$), European ($n = 1$), and American Indian, Alaskan Native, and Indigenous ($n = 1$).

In FY2022–2023, of the 658 people that attended Daly City Youth Center events, 97.0% declined to state any special population group, 1.2% reported learning disability, 0.9% reported developmental disability, and 0.5% reported being at risk for homelessness as one their special needs. (See **Exhibit D4.**) They also reported being homeless, having another disability, or having chronic health conditions among their special needs.

Exhibit D4. Counts and Percentages of Special Populations: Daly City Youth Center Attendees at Outreach Events, FY2022–2023



Note. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%. These special populations were not displayed in the graph above due to the small n: Homeless ($n = 1$), Other disability ($n = 1$), and Chronic health conditions ($n = 1$).

Appendix E. FY2022–2023 Outreach, El Concilio

For FY2022–2023, El Concilio reported 92 outreach events, all of which were individual events. There were 92 attendees. Individual outreach events ranged from 10 to 20 minutes and lasted for 12 minutes on average.

Outreach events

- Most took place in an office (**73.9%**; n = 68). Other locations of events and their respective values are shown in **Exhibit E1**.
- Were conducted in Spanish (**85.9%**; n =79) and English (**14.1%**; n = 13).
- Resulted in 31 mental health referrals and one substance use treatment referral at the individual outreach events.
- There were 197 referrals to social services for individuals who attended the individual events. (See **Exhibit E2**.) Individual outreach event attendees (n = 92) were referred to form assistance (**68.5%**; n = 63), other services (**64.1%**; n = 59), legal (**27.2%**; n = 25) services, food (**20.7%**, n = 19) services, financial (**16.3%**, n = 15) services, housing (**8.7%**, n = 8) services, medical care (**4.3%**, n = 4), health insurance (**3.3%**, n = 3), no referral (**2.2%**, n = 2), and emergency/protective services (**1.1%**, n = 1)

Exhibit E1. Counts and Percentages of Events by Location Type: El Concilio Outreach Events, FY2022–2023

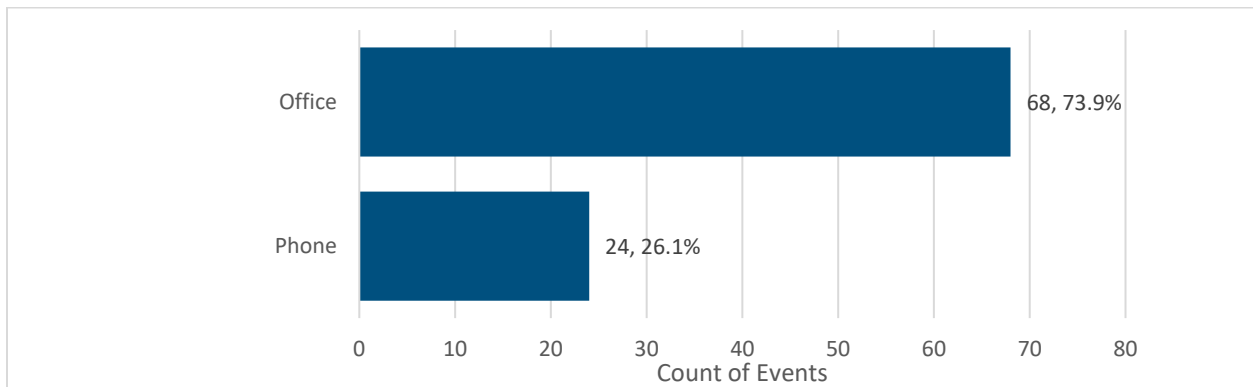
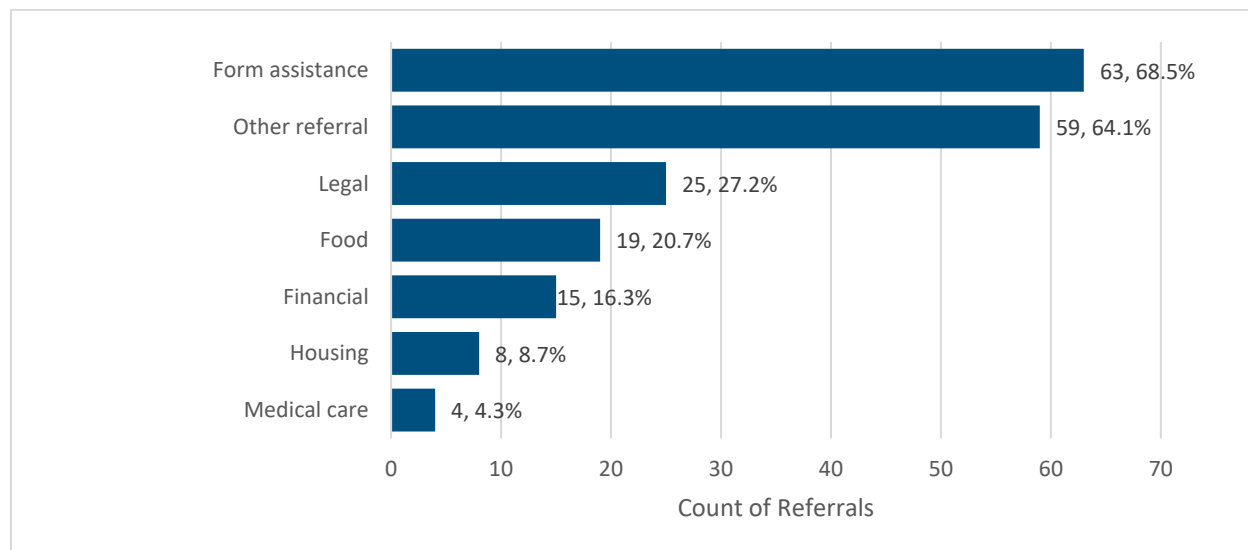


Exhibit E2. Counts and Percentages of Social Services Referrals following Individual Outreach Events: El Concilio, FY2022–2023



Notes. 1) Only individual outreach events ($n = 92$) offer service referrals.

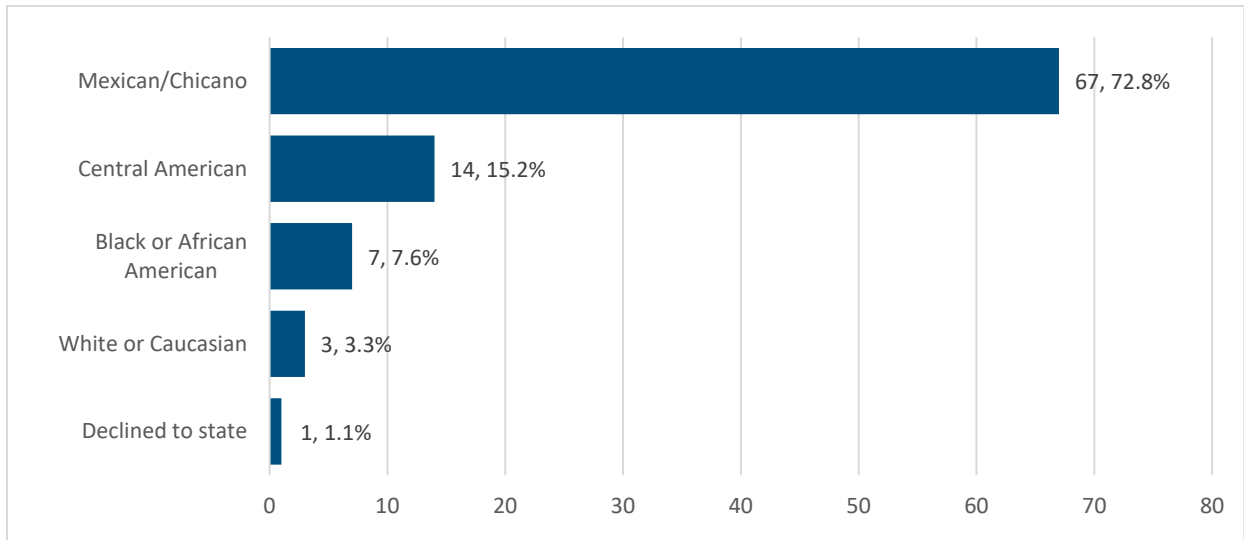
2) Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%.

3) These referral types were not displayed in the graph above due to the small n : Health insurance ($n = 3$), No referral ($n = 2$) and Emergency/Protective services ($n = 1$).

Outreach event attendees

- Most often were female (**94.6%**; $n = 87$); 15% were male (**5.4%**; $n = 5$).
- Were heterosexual (**98.9%**; $n = 91$) and bisexual (**1.1%**; $n = 1$)
- Included adults (26–59 years of age, **90.2%**; $n = 83$), and older adults (60 years, **9.8%**; $n = 9$).
- Race/ethnicities most frequently reported by outreach event attendees were Mexican/Chicano (**72.8%**; $n = 67$), Central American (**15.2%**; $n = 14$), Black or African American (**7.6%**; $n = 7$), and White or Caucasian (**3.3%**; $n = 3$). One attendee declined to state their race/ethnicity (**1.1%**). (See **Exhibit E3.**)

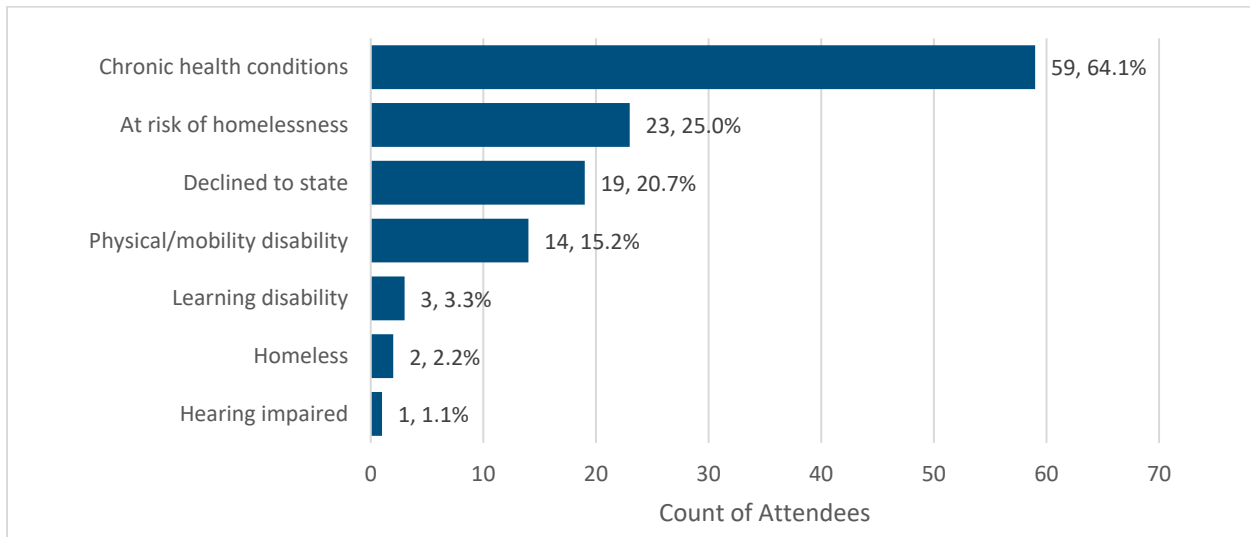
Exhibit E3. Counts and Percentages of Racial/Ethnic Categories: El Concilio Attendees at Outreach Events, FY2022–2023



Note. Percentages add to more than 100% because attendees could select more than one race/ethnicity.

In FY2022–2023, of the 92 people who attended El Concilio events, 64.1% had chronic health conditions, 25.0% were at risk for homelessness, 20.7% declined to state any special needs, and 15.2% had a physical/mobility disability. (See **Exhibit E4.**) They also reported having a learning disability, being homeless, or having a hearing impairment.

Exhibit E4. Counts and Percentages of Special Populations: El Concilio Attendees at Outreach Events, FY2022–2023



Note. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%.

Appendix F. FY2022–2023 Outreach, Free At Last

For FY2022–2023, Free At Last reported 436 outreach events, all of which were individual events. There were 436 attendees. The events ranged from 5 to 35 minutes and were for 17 minutes on average.

Outreach events

- Most frequently took place over the phone (**62.2%**; $n = 271$) and in an office (**25%**; $n = 109$), as shown in **Exhibit F1**.
- Were conducted in Spanish (**58%**; $n = 253$), English (**41.7%**; $n = 182$), and Mandarin (**0.2%**; $n = 1$).
- Resulted in 23 mental health referrals and 397 substance use referrals at the individual outreach events.
- There were 858 referrals to social services for individuals who attended the individual events. (See **Exhibit F2**.) Individual outreach event attendees ($n = 436$) were referred to medical care (**96.6%**; $n = 421$), housing (**89.9%**; $n = 392$), health insurance (**9.2%**; $n = 40$), form assistance (**0.5%**; $n = 2$), transportation (**0.2%**, $n = 1$), food (**0.2%**, $n = 1$), and legal services (**0.2%**, $n = 1$).

Exhibit F1. Counts and Percentages of Events by Location Type: Free at Last Attendees at Outreach Events, FY2022–2023

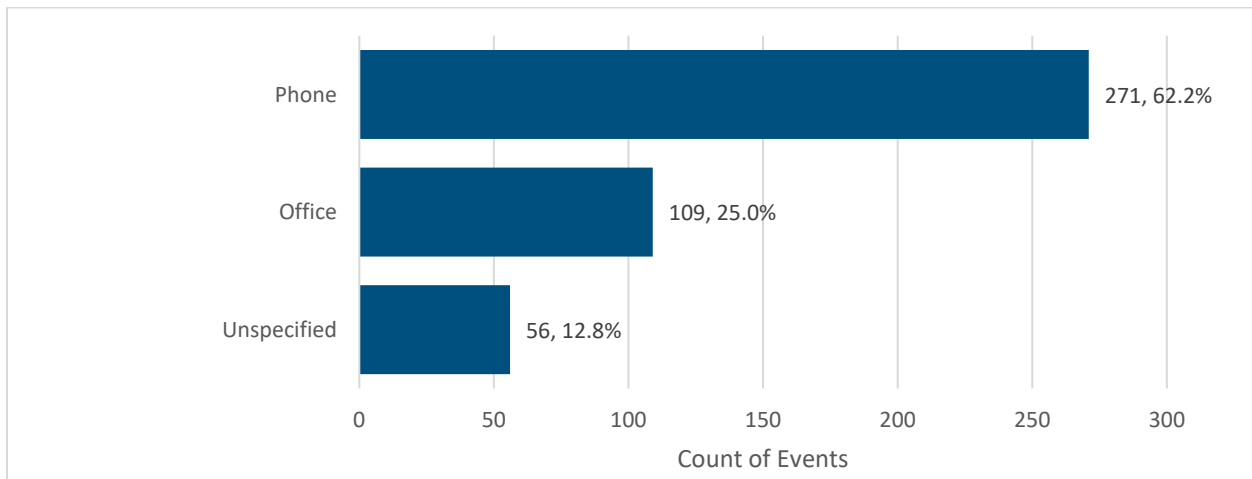
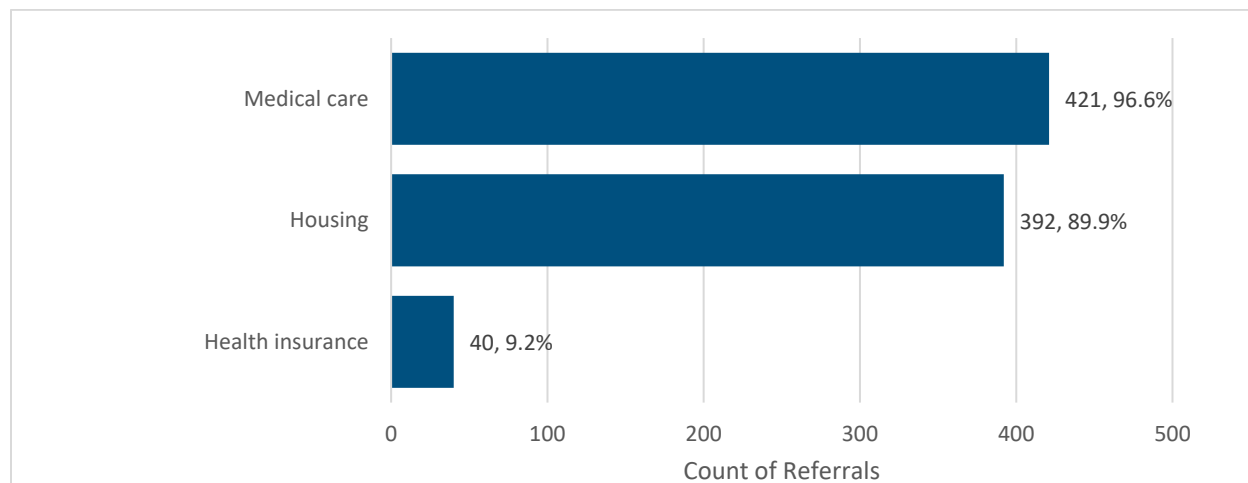


Exhibit F2. Counts and Percentages of Social Services Referrals following Individual Outreach Events: Free at Last, FY2022–2023



Notes. 1) Only individual outreach events ($n = 436$) offer service referrals.

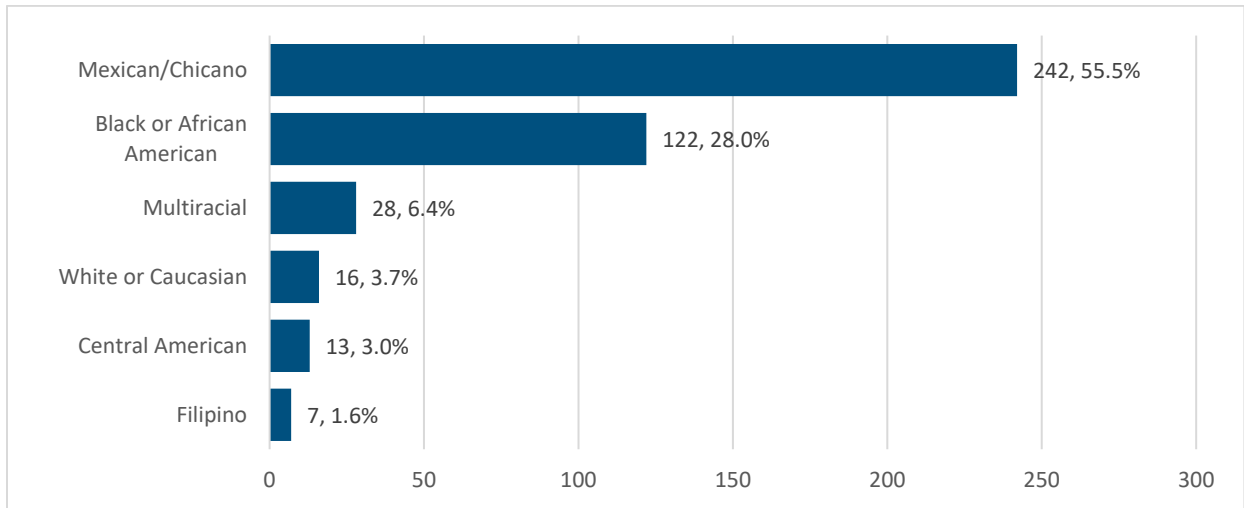
2) Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%.

3) These referral types were not displayed in the graph above due to the small n : Form assistance ($n = 2$), Transportation ($n = 1$), Legal ($n = 1$), and Food ($n = 1$).

Outreach event attendees

- Most often were male (**58.9%**; $n = 257$); 41.1% were female (**41.1%**; $n = 179$).
- Identified their gender as male most of the time (**51.4%**; $n = 224$); identified as female (**41.5%**; $n = 181$); female-to-male transgender (**0.5%**, $n = 2$); male-to-female transgender (**7.1%**, $n = 31$).
- Identified as heterosexual (**65.4%**; $n = 285$), gay/lesbian (**23.6%**; $n = 103$), bisexual (**22.7%**; $n = 99$), or pansexual (**4.1%**; $n = 18$).
- Included adults (26–59 years of age, **78.2%**; $n = 341$) transition-age youth (16–25 years of age, **16.1%**; $n = 70$), and older adults (60 years or older, **5.7%**; $n = 25$).
- Most frequently self-reported race/ethnicity category as Mexican or Chicano (**55.5%**; $n = 242$), Black or African American (**28%**; $n = 122$), or more than one race (**6.4%**; $n = 28$). (See Exhibit F3.)

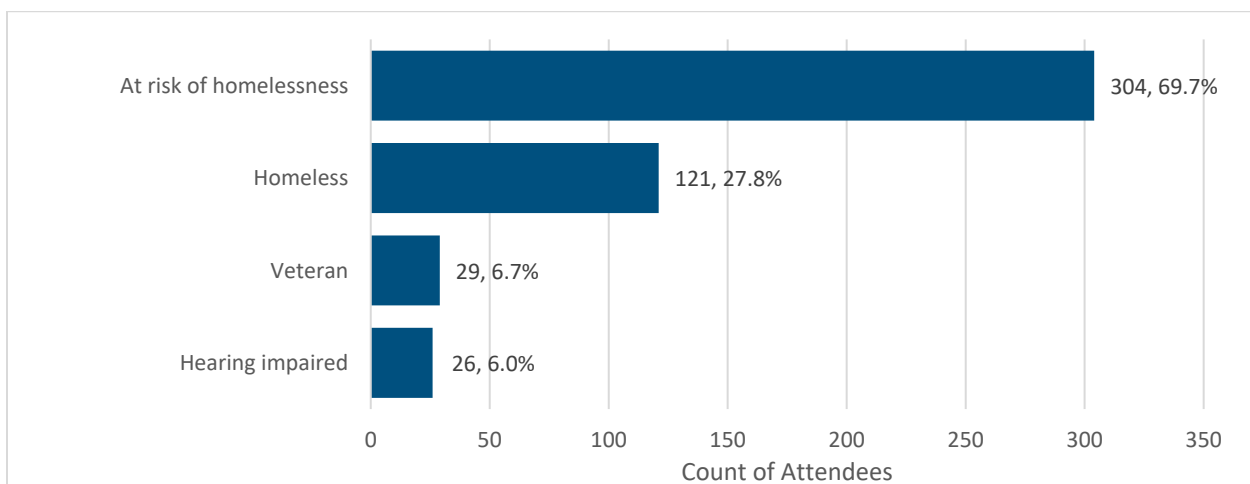
Exhibit F3. Counts and Percentages of Racial/Ethnic Categories: Free at Last Attendees at Outreach Events, FY2022–2023



Note. Percentages add to more than 100% because attendees could select more than one race/ethnicity. These racial/ethnic categories were not displayed in the graph above due to the small n: Tongan ($n = 4$), Samoan ($n = 3$) and Asian ($n = 1$).

In FY2022–2023, out of the 436 people who attended Free at Last events, 69.7% were at risk for homelessness, 27.8% were homeless, 6.7% were a veteran, and 6.0% reported having a hearing impairment. (See **Exhibit F4.**) They also reported having chronic health conditions, physical/mobility disabilities, or being visually impaired as one their special needs.

Exhibit F4. Counts and Percentages of Special Populations: Free at Last Attendees at Outreach Events, FY2022–2023



Note. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%. These special populations were not displayed in the graph above due to the small n: Declined to state ($n = 7$), chronic health conditions ($n = 5$), physical/mobility disability ($n = 3$), and visually impaired ($n = 2$).

Appendix G. FY2022–2023 Outreach, Pacifica Collaborative

For FY2022–2023, Pacifica Collaborative reported 27 outreach events, including 15 individual outreach events and 12 group outreach events. There were 1627 attendees. Individual outreach events ranged from 15 to 30 minutes and lasted for an average of 25 minutes. Group outreach events ranged from 60 to 240 minutes and lasted an average of 108 minutes.

Outreach events

- Most frequently took place at school (**59.3%**; $n = 16$), a community location (**25.9%**; $n=7$), age-specific community center (**11.1%**; $n = 3$), or virtually (**3.7%**; $n = 1$). (See **Exhibit G1**)
- Were conducted in English (**96.3%**; $n = 26$) and Spanish (**3.7%**; $n = 1$).
- Resulted in 11 mental health referrals and 1 substance use treatment referral.
- There were 17 referrals to social services for individuals who attended the individual events.. (See **Exhibit G2**). Individual outreach event attendees ($n = 12$) were referred to food (**41.7%**; $n = 5$), housing (**33.3%**; $n = 4$), transportation (**16.7%**; $n = 2$), form assistance ((**16.7%**; $n = 2$), financial (**16.7%**; $n = 2$), medical care (**8.3%**, $n = 1$), and legal (**8.3%**, $n = 1$) services.

Exhibit G1. Counts and Percentages of Events by Location Type: Pacifica Collaborative Outreach Events, FY2022–2023

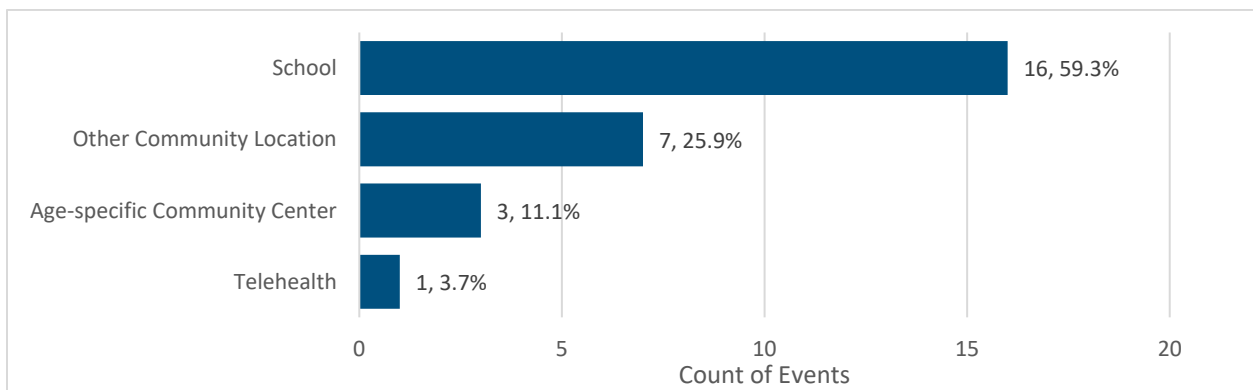
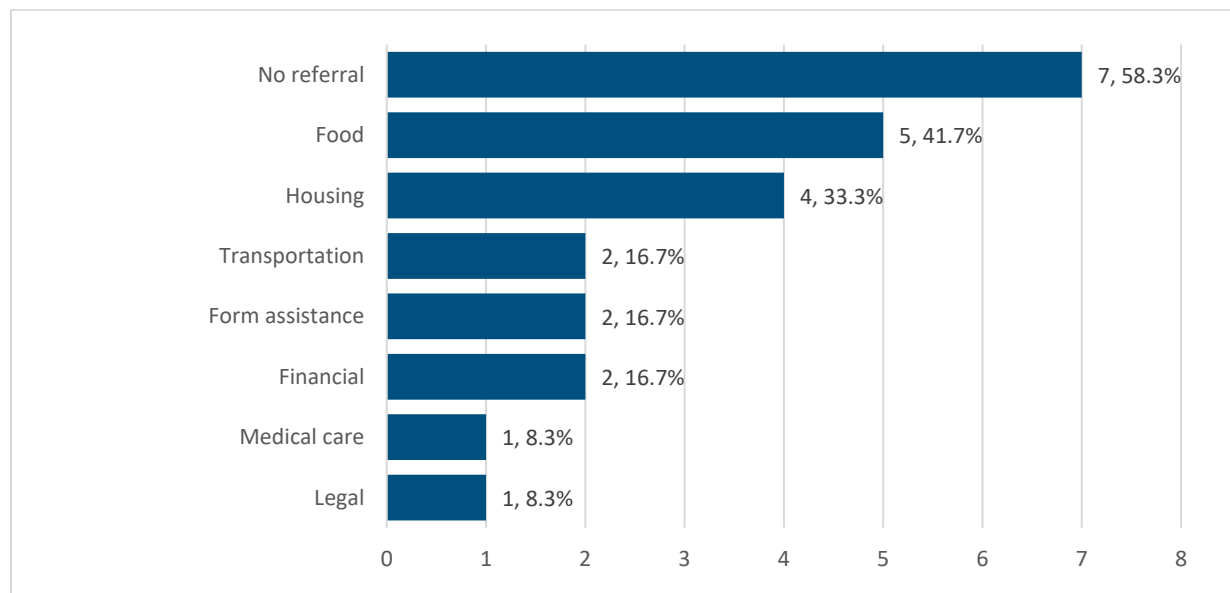


Exhibit G2. Counts and Percentages of Social Services Referrals following Individual Outreach Events: Pacifica Collaborative, FY2022–2023



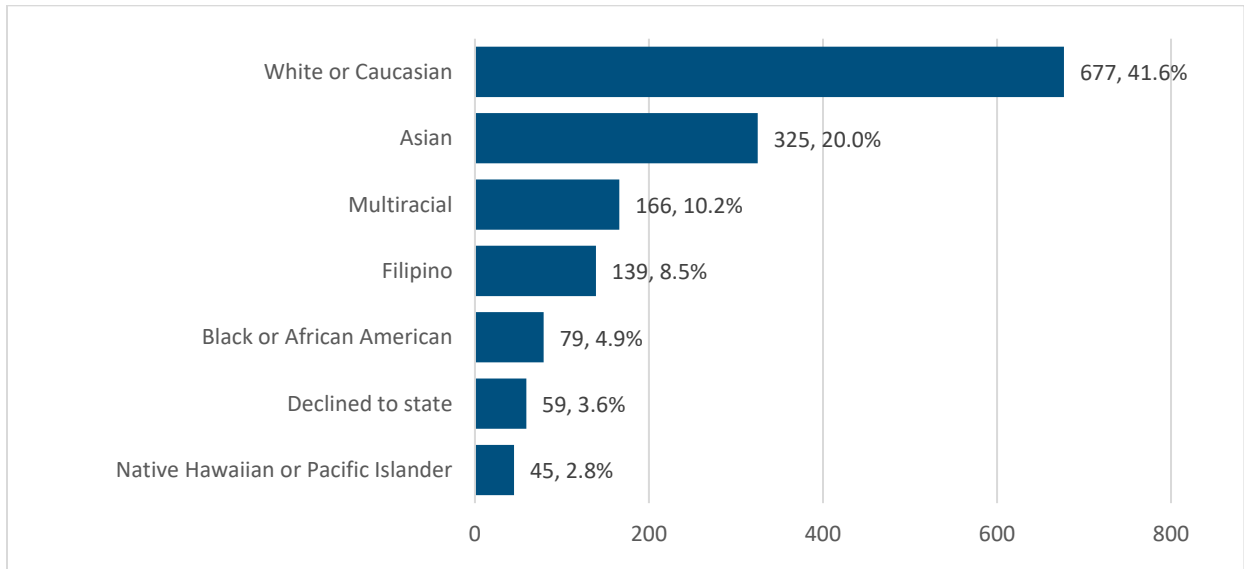
Notes. 1) Only individual outreach events (n = 12) offer service referrals.
 2) Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%.

Outreach event attendees

- Were female (**59.4%**; n =967) or male (**39.3%**; n = 640). There were 20 (**1.2%**) individuals who declined to state their sex at birth.
- Identified their gender as female (**58.4%**; n = 950), male (**38.7%**; n = 629), female to male transgender (**0.6%**; n = 9), male to female transgender (**0.4%**; n = 6), and genderqueer (**0.6%**; n = 10). There were 16 (**1.0%**) attendees who declined to state their gender.
- Identified as heterosexual (**77.7%**; n = 1264), gay/lesbian (**12.0%**; n = 195), bisexual (**3.6%**; n = 59), queer (**2.8%**; n = 45), or questioning (**0.4%**; n = 7). Almost **4%** of attendees (n = 59) declined to state their sexual orientation.
- Included adults (26–59 years of age, **46.1%**; n = 750), older adults (60 years of age and older, **29.6%**; n = 482), transition-age youth (16–25 years of age, **14.8%**; n = 240), and children and teens (0–15 years of age, **8.7%**; n = 142) There were 13 (**0.8%**) attendees who declined to state their age.

- The highest percentages of identified race/ethnicity include White or Caucasian (**41.6%**; $n = 677$), Asian (**20%**; $n = 325$), multi-racial (**10.2%**; $n=166$), or Filipino (**8.5%**; $n= 139$). (See **Exhibit G3** for the remaining identified race/ethnicity groups.)

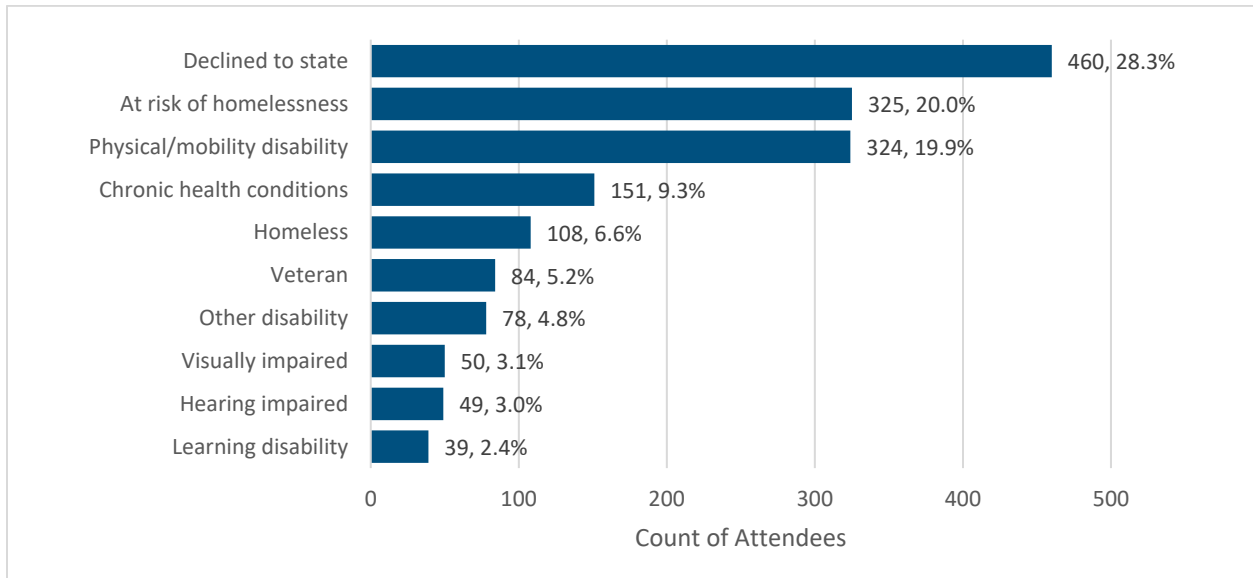
Exhibit G3. Counts and Percentages of Racial/Ethnic Categories: Pacific Collaborative Attendees at Outreach Events, FY2022–2023



Note. Percentages add to more than 100% because attendees could select more than one race/ethnicity. There were 137 clients whose racial/ethnic categories are not displayed in the graph above due to the small n . These racial/ethnic categories were not displayed in the graph above due to the small n : Mexican/Chicano ($n = 30$), Chinese ($n = 28$), American Indian Alaskan Native, or Indigenous ($n = 28$), Asian Indian/South Asian ($n = 18$), Samoan ($n = 16$), Japanese ($n = 9$), Fijian ($n = 7$), and Tongan ($n = 5$),

In FY2022–2023, of the 1627 people that attended Pacifica Collaborative events, 28.3% declined to state their special needs, 20.0% were at risk for homelessness, 19.9% reported having a physical/mobility disability, and 9.3% had chronic health conditions. (See **Exhibit G4.**) They also reported being homeless, being a veteran, having other disabilities, being visually impaired, being hearing impaired, having a learning disability, having a developmental disability, or having dementia among their special needs.

Exhibit G4. Counts and Percentages of Special Populations: Pacifica Collaborative Attendees at Outreach Events, FY2022–2023



Note. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%. These special populations were not displayed in the graph above due to the small n: Developmental disability ($n = 14$) and Dementia ($n = 7$).

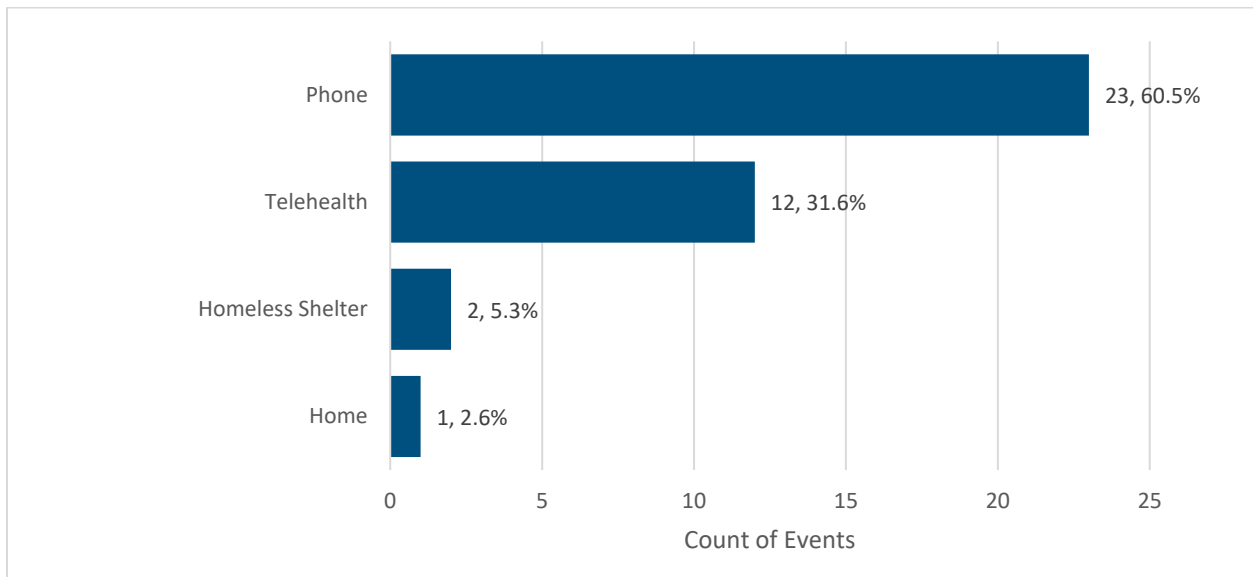
Appendix H. FY2022–2023 Outreach, StarVista

For FY2022–2023, StarVista reported 37 individual outreach events, and one group outreach event with eleven attendees, resulting in a total of 48 attendees. Individual outreach events ranged from 10 to 90 minutes and lasted for 38 minutes on average. The group outreach event lasted for 60 minutes.

Outreach events

- Most frequently took place on the phone (**60.5%**; $n = 23$) or telehealth (**31.6%**; $n=12$). Other locations for events and their respective values are shown in **Exhibit H1**.
- Were conducted in English (**60.5%**; $n = 23$) and Spanish (**39.5%**; $n= 15$).
- Resulted in 28 mental health referrals.
- There were 96 referrals to social services for individuals who attended the individual events. (See **Exhibit H2**). Individual outreach event attendees ($n = 37$) were referred to other referrals (**45.9%**; $n = 17$), food (**45.9%**; $n = 17$), housing (**40.5%**, $n = 15$), financial (**37.8%**, $n = 14$), legal (**24.3%**, $n = 9$), emergency/protective (**21.6%**, $n = 8$), medical care (**16.2%**, $n = 6$), form assistance (**13.5%**, $n = 5$), transportation (**10.8%**, $n = 4$), and health insurance (**2.7%**, $n = 1$) services.

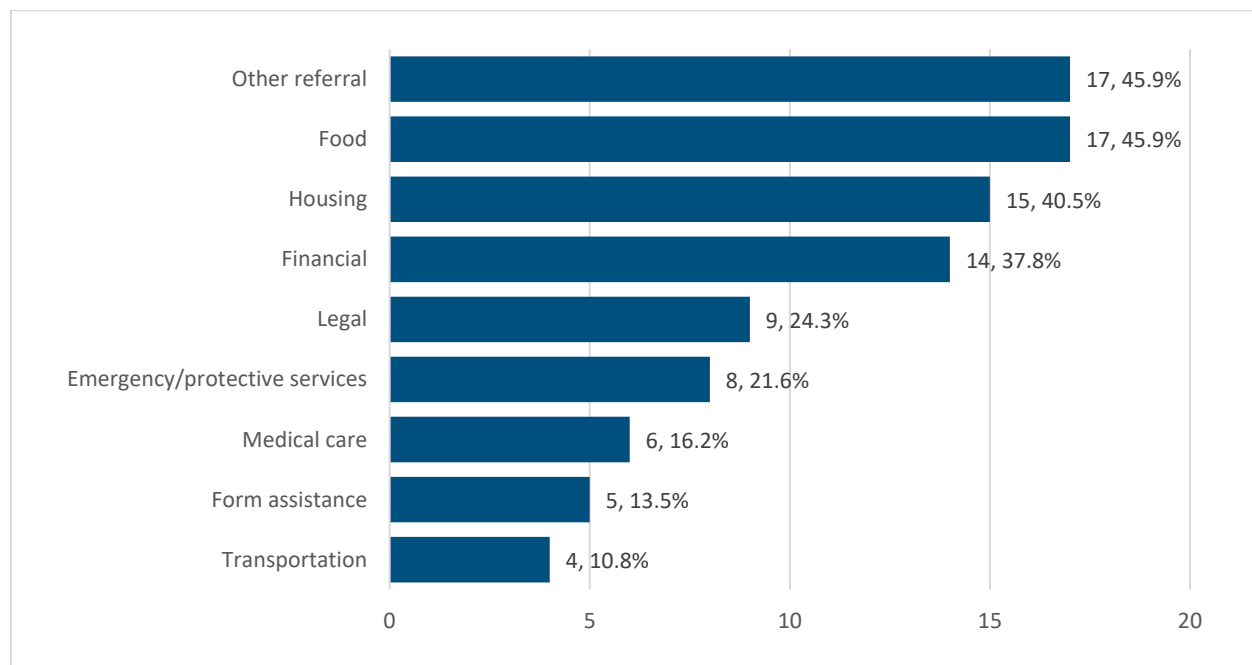
Exhibit H1. Counts and Percentages of Events by Location Type: StarVista Outreach Events, FY2022–2023



Outreach event attendees

- Were female (**77.1%**; $n = 37$) or male (**22.9%**; $n = 11$).
- Identified their gender as female (**58.3%**; $n = 28$), male (**18.8%**; $n = 9$), or declined to state their gender (**22.9%**; $n = 11$).
- Identified as heterosexual (**29.2%**; $n = 14$) or declined to state their sexual orientation (**70.8%**; $n = 34$).
- Were adults (26–59 years of age, **62.5%**; $n = 30$), were between the ages of 16-25 (**4.2%**; $n = 2$) or were under the age of 15 (**10.4%**; $n = 5$). Eleven did not indicate their age (**22.9%**).
- Were primarily other races (**39.6%**; $n = 19$), White or Caucasian (**18.8%**; $n = 9$), or Mexican/Chicano (**8.3%**; $n = 4$). (See **Exhibit H3** for all other racial/ethnic groups.)

Exhibit H2. Counts and Percentages of Social Services Referrals following Individual Outreach Events: StarVista, FY2022–2023

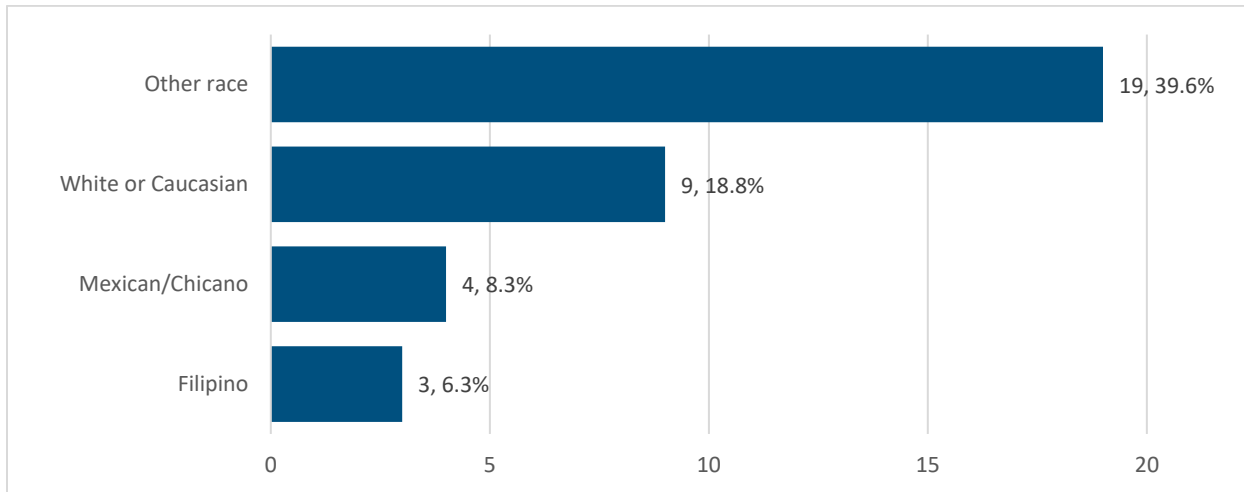


Notes. 1) Only individual outreach events ($n = 37$) offer service referrals.

2) Individual outreach events may refer an attendee to multiple social services. Therefore, the percentages may add up to more than 100%.

3) These referral types were not displayed in the graph above due to the small n : No referral ($n = 1$) and health insurance ($n = 1$).

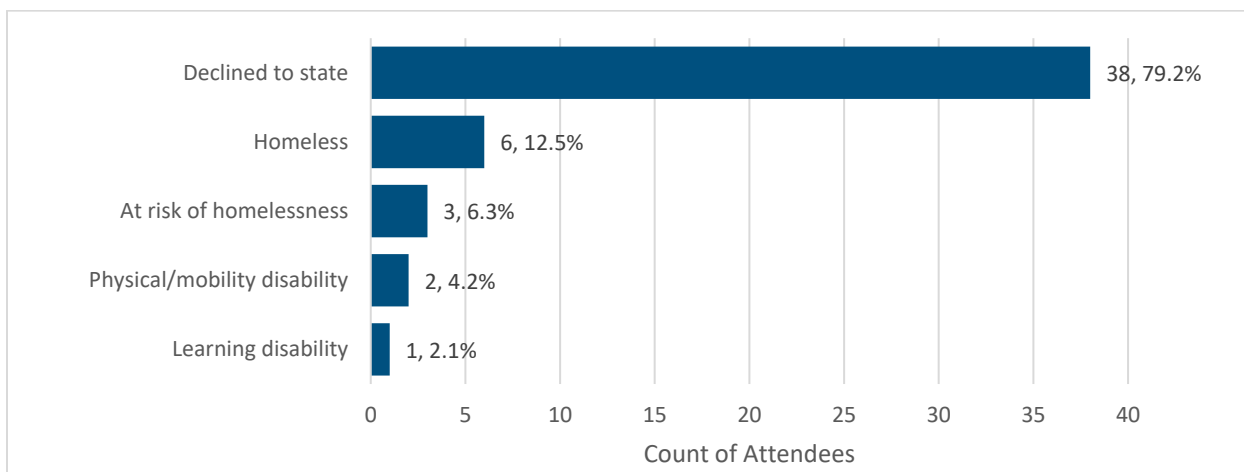
Exhibit H3. Counts and Percentages of Racial/Ethnic Categories: StarVista Attendees at Outreach Events, FY2022–2023



Note. Percentages add to more than 100% because attendees could select more than one race/ethnicity. These racial/ethnic categories were not displayed in the graph above due to the small n: Multi-racial ($n = 2$), Declined to state ($n = 2$), Samoan ($n = 2$), South American ($n = 2$), Central American ($n = 2$), and Native Hawaiian or Pacific Islander ($n = 2$), and Asian ($n = 1$).

In FY2022–2023, of the 48 people who attended StarVista events, 79.2% declined to state being in a special population, 12.5% were homeless, 6.3% reported being at risk for homelessness, 4.2% reported having a physical/mobility disability, and 2.1% had a learning disability. (See **Exhibit H4.**)

Exhibit H4. Counts and Percentages of Special Populations: StarVista Attendees at Outreach Events, FY2022–2023



Note. Attendees could select more than one special population, and therefore the percentages may add up to more than 100%.

Appendix I. Attendees by Race/Ethnicity by Collaborative, FY2018–2023

Exhibit I1. Attendees by Race/Ethnicity by Collaborative, FY2018-2023

Race/Ethnicity	EPAPMHO					NCOO				
	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23
Black	152 (23.2%)	93 (17.9%)	29 (11.8%)	44 (11.5%)	129 (13.1%)	167 (3%)	685 (5.4%)	202 (2.6%)	277 (3.4%)	157 (3.4%)
White	55 (8.4%)	18 (3.5%)	12 (4.9%)	12 (3.1%)	19 (1.9%)	1484 (27%)	2024 (16%)	2336 (29.6%)	2394 (29.8%)	1015 (22.2%)
American Indian	2 (.3%)	1 (.2%)	0 (0%)	0 (0%)	0 (0%)	56 (1%)	90 (.7%)	67 (.8%)	46 (.6%)	33 (.7%)
Middle Eastern	0 (0%)	2 (.4%)	0 (0%)	0 (0%)	0 (0%)	28 (.5%)	44 (.3%)	30 (.4%)	28 (.3%)	49 (1.1%)
Eastern European	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	2 (0%)	5 (0%)	1 (0%)	1 (0%)	0 (0%)
European	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	21 (.4%)	5 (0%)	3 (0%)	1 (0%)	3 (.1%)
Mexican	156 (23.8%)	119 (22.8%)	101 (41.2%)	187 (48.7%)	310 (31.6%)	462 (8.4%)	2302 (18.2%)	1235 (15.6%)	510 (6.3%)	392 (8.6%)
Puerto Rican	2 (.3%)	2 (.4%)	1 (.4%)	1 (.3%)	0 (0%)	10 (.2%)	44 (.3%)	36 (.5%)	2 (0%)	3 (.1%)
Cuban	1 (.2%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Central American	12 (1.8%)	19 (3.6%)	15 (6.1%)	28 (7.3%)	27 (2.7%)	32 (.6%)	127 (1%)	13 (.2%)	160 (2%)	104 (2.3%)
South American	1 (.2%)	0 (0%)	1 (.4%)	2 (.5%)	0 (0%)	15 (.3%)	27 (.2%)	67 (.8%)	6 (.1%)	11 (.2%)
Caribbean	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (.1%)	0 (0%)	5 (0%)	0 (0%)	0 (0%)	0 (0%)
Other Latino	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)
Asian	0 (0%)	1 (.2%)	1 (.4%)	0 (0%)	1 (.1%)	550 (10%)	873 (6.9%)	604 (7.6%)	647 (8.1%)	388 (8.5%)
Filipino	9 (1.4%)	4 (.8%)	0 (0%)	4 (1%)	7 (.7%)	331 (6%)	1170 (9.3%)	316 (4%)	753 (9.4%)	494 (10.8%)
Chinese	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	212 (3.9%)	936 (7.4%)	304 (3.8%)	230 (2.9%)	158 (3.4%)
Japanese	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	26 (.5%)	37 (.3%)	42 (.5%)	38 (.5%)	13 (.3%)
Korean	0 (0%)	0 (0%)	1 (.4%)	1 (.3%)	0 (0%)	12 (.2%)	39 (.3%)	25 (.3%)	7 (.1%)	6 (.1%)
South Asian	2 (.3%)	1 (.2%)	0 (0%)	0 (0%)	0 (0%)	17 (.3%)	222 (1.8%)	50 (.6%)	52 (.6%)	30 (.7%)
Vietnamese	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	11 (.2%)	84 (.7%)	4 (.1%)	1 (0%)	2 (0%)
Cambodian	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	2 (0%)	8 (.1%)	0 (0%)	0 (0%)	1 (0%)
Laotian	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)
Mien	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)
Other Asian	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)
Tongan	97 (14.8%)	30 (5.8%)	15 (6.1%)	35 (9.1%)	125 (12.7%)	47 (.9%)	89 (.7%)	88 (1.1%)	118 (1.5%)	111 (2.4%)
Samoa	57 (8.7%)	26 (5%)	19 (7.8%)	31 (8.1%)	67 (6.8%)	201 (3.7%)	503 (4%)	137 (1.7%)	192 (2.4%)	327 (7.1%)
Fijian	5 (.8%)	1 (.2%)	0 (0%)	4 (1%)	13 (1.3%)	3 (.1%)	21 (.2%)	25 (.3%)	8 (.1%)	10 (.2%)
Hawaiian	15 (2.3%)	164 (31.5%)	40 (16.3%)	1 (.3%)	246 (25.1%)	188 (3.4%)	1521 (12.1%)	174 (2.2%)	127 (1.6%)	105 (2.3%)
Guamanian	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	. (.%)
Multi	86 (13.1%)	39 (7.5%)	9 (3.7%)	31 (8.1%)	29 (3%)	369 (6.7%)	1228 (9.7%)	248 (3.1%)	325 (4%)	576 (12.6%)
Other Race	3 (.5%)	0 (0%)	1 (.4%)	0 (0%)	0 (0%)	140 (2.5%)	113 (.9%)	5 (.1%)	718 (8.9%)	40 (.9%)
Unknown Race	1 (.2%)	1 (.2%)	0 (0%)	2 (.5%)	8 (.8%)	1106 (20.1%)	412 (3.3%)	1883 (23.8%)	1392 (17.3%)	551 (12%)
Total	656	521	245	384	982	5492	12614	7899	8033	4582

Note. Percentages may not sum to 100% because of rounding. The total count for race/ethnicity reported may exceed the total number of attendees because some providers may have reported individuals who are multiracial as both multiracial and their respective race/ethnicity, leading to extra counts in some cases. The denominator for race/ethnicity percentage is the sum of all race/ethnicity data reported. N/A indicates the category was not available or discontinued during the specific fiscal year.

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