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Seniors and Adults with Disabilities from Communities of Color: Equity Analysis FY 2016-17

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Report by the San Francisco Human Services Agency – Planning Unit

INTRODUCTION

In November 2016, San Francisco voters passed legislation to establish the Dignity Fund, creating a protected funding stream for social services that support seniors, adults with disabilities, and their caregivers. As part of the Dignity Fund charter amendment, a planning and funding cycle was instituted that begins with a community needs assessment to support a subsequent four year funding plan. Both the funding and planning processes are managed by the Department of Aging and Adult Services (DAAS), the City agency tasked with administering social services to these populations.

DAAS completed the first Dignity Fund Community Needs Assessment (DFCNA) in Spring 2018. A key component of the DFCNA was an equity analysis to evaluate service utilization and resource distribution throughout the city; in particular, this equity analysis was focused on evaluating how services are (or are not) accessed by communities that have historically faced systematic barriers that inhibit opportunities and limit service utilization. One element of the equity analysis was a review of service utilization by communities of color. The DFCNA analysis, which examined rates of service participation of non-White San Franciscans in aggregate, was an important starting point for understanding the needs and barriers to access that characterized service engagement among clients of color as a whole.

This report replicates the DFCNA analysis of communities of color in greater detail, delineating service utilization trends by racial and ethnic groups and comparing them to trends among the general client population. This approach supports a more nuanced understanding of the variation in service need and access experienced by DAAS's diverse non-White clients—chiefly, Asian/Pacific Islanders, Blacks and African-Americans, and Latinos.

Key findings from this analysis include:

- While people of color access services at a higher rate than the overall population, there is considerable variation in service participation across individual racial or ethnic groups. For instance, while Asian/Pacific Islander seniors access DAAS services at a rate 1.3 times more than that of older adults generally, Latino seniors access these services at a similar rate to seniors citywide.
- African-American clients utilize DAAS services at higher rates than the overall client population. African-American clients participate in services about 1.5 times more, reflecting the importance of these services in supporting this population to live and engage in community.
- DAAS must improve engagement of Latino adults with disabilities and support their increased participation in services. Latino adults with disabilities access services at a rate over two times lower than adults with disabilities citywide, far less than rates of service engagement among any other population of color.
- DAAS should examine in greater depth the particular service needs and barriers to access of API senior and disabled clients. While API clients are high utilizers of communal, site-based programs, they are far less engaged in more diffuse home-based services relative to the general client population. Further examination of these patterns may guide strategy to improve API participation in more home-based services.
- Location of DAAS services is an important driver of trends in service participation by district. Service participation rates tended to be consistently higher in the central part of the City (i.e., Districts 3, 6 and 8) and lower in outer districts (particularly Districts 2, 4, 9, and 11), even across racial and age groups. This consistency suggests the location of DAAS service sites and providers plays an important role in shaping rates of service engagement across city districts.
- There is considerable value in analyzing data disaggregated by client race/ethnicity to inform decision-making about service development. Aggregate analysis may obscure important nuances about service needs and barriers to access that vary across individual racial/ethnic groups.

BACKGROUND: DIGNITY FUND

DIGNITY FUND COMMUNITY NEEDS ASSESSMENT

The **Dignity Fund** was established via a charter amendment passed by San Francisco voters as Proposition I in 2016. The legislation contained three major components:

- **Protected funding**: Established a funding set-aside for services that support seniors and adults with disabilities to live in and engage with their communities. Based on existing funding levels, the set-aside began with baseline funding of \$38 million, and the charter amendment requires the City to increase this funding by \$33 million over ten years.
- Planning and funding Cycle: Developed a four-year planning and funding cycle. The cycle begins with a Community Needs Assessment to assess needs and analyze equity in service provision. This assessment supports the subsequent creation of a funding plan that outlines how funding will be allocated over the next four years.
- **Oversight**: Created an Oversight and Advisory Committee to advise DAAS on administration of the Dignity Fund. This body is supported by a Service Provider Working Group that advises on the perspective and needs of community-based organizations that serve seniors and adults with disabilities.

The first Dignity Fund Community Needs Assessment (DFCNA) was completed in FY 2017-18.¹ This project involved extensive community outreach and engagement:

Community Engagement Method	Participation Levels
Community forums	11 forums (one in each supervisorial district) with
	462 attendees
Focus groups with specific populations of interest	29 focus groups with 282 participants
Population survey	1,112 responses from community members
Provider survey	266 responses service providers

FY 2017-18 DFCNA: Community Engagement

A key component of this report was an equity analysis that examined service utilization rates of populations that have historically faced systemic barriers, including: communities of color, low-income, limited English fluency, isolation, and LGBTQ identification. All of this work supported a gaps analysis and several recommendations to improve service provision to older adults, people with disabilities, and caregivers in San Francisco.

The equity analysis examining communities of color was an important starting point for understanding the service utilization of non-White San Franciscans in aggregate. A recommendation from the DFCNA was that the Communities of Color equity analysis be replicated in greater detail to examine how service utilization among each of these racial/ethnic populations, individually, compares to that of the general client population. This report builds on the original analysis by delineating service utilization trends by racial/ethnic group to provide a more in-depth understanding of the variation in service need and access experienced by DAAS's diverse non-White clients—chiefly, Asian/Pacific Islanders (API), Blacks and African-Americans (hereafter referred to as African-Americans), and Latinos.

¹ The full report and corresponding material is available on the DAAS website: http://sfdaas.org

PROFILE OF PROGRAM PARTICIPANTS OF COLOR

This section provides a brief overview of clients of color participating in community-based services funded through the DAAS Office on the Aging (OOA).²

The majority of OOA clients come from communities of color. In FY 2016-17, OOA served 24,829 unduplicated clients who identified as people of color, approximately 72% of the overall client population. In total, these clients of color account for 53,537 service enrollments (a single consumer may enroll in multiple services). The most common services accessed are Community Service Centers, Congregate Meals, and Home-Delivered Meals. This is consistent with overall OOA trends; these are some of the largest services. More information on service enrollments is provided by client population later in this report.

29,892 of the clients OOA served in FY 2016-17 were older adults—22,653 of whom identified as people of color, about 76% of the senior OOA client population. That same year, OOA served 3,120 adults with disabilities under age 60, of whom 1,987 identified as people of color, about 64% of the disabled OOA client population.

The majority of senior OOA clients were API (54%), mostly Chinese. About 20% were White, 11% were African-American, 10% were Latino, and 1% identified as another race. Race/ethnicity data was missing or unknown for approximately 4% of older adults enrolled in OOA services.

Among OOA's younger adult clients with disabilities, API, White, and African-American clients were represented more evenly, each making up approximately a quarter of the population. Latinos accounted for another 10% of these clients, and 3% identified as another race. Race/ethnicity data was missing or unknown for about 10% of adults with disabilities enrolled in OOA services.

Race/Ethnicity of Senior Clients (60+)



Race/Ethnicity of Adult Clients with Disabilities (18-59)

² OOA accounts for the majority of DAAS funding for community-based services and client enrollments. Service providers utilize a shared database to input client demographic information and enrollment information.

EQUITY ANALYSIS

This section provides an update on the equity analysis focused on service utilization by older adults and younger adults with disabilities who identify as people of color.

BACKGROUND: EQUITY ANALYSIS

The Dignity Fund aims to serve all older adults and adults with disabilities in San Francisco. However, **some populations face systemic barriers to accessing services**, which can lead to inequitable distribution of services and resources and a disproportionately decreased level of access for those populations. Furthermore, an individual's environment and community (such as a district area) may be associated with systemic barriers leading to inequitable access to services.

The purpose of the equity analysis is to establish and apply a set of standardized metrics that assess how resources are distributed among the city's seniors and adults with disabilities. This helps DAAS evaluate how well it is serving the city's diverse populations, particularly populations with equity factors, and identify possible disparities in service provision and utilization. The analysis can be repeated in future years to assess how investments have impacted service access and utilization.

Three equity analysis questions were investigated in the FY 2017-18 DFCNA. This report provides an update on the first two equity analysis research questions: the first focused on analyzing service participation among populations that experience systemic barriers that can inhibit accessing of services and resources; and the second examined geographic variations in service participation among these populations to understand how client needs and resources are distributed by city district.

Equity Analy	ysis Research Question 1 ³					
	Are populations with the presence of	Equity Factors				
ŧİİ	an equity factor utilizing services at the same rate as the population citywide?	•Low Income •Social Isolation •Communities of Color	 Limited or no English-Speaking Proficiency Sexual Orientation and Gender Identity 			
Equity Analy	ysis Research Question 2 ⁴					
How do service participation rates among populations of interest compare across districts in the city?						

EQUITY ANALYSIS METHODOLOGY

Service participation rates are standard metrics designed to measure disparities between populations, and they do not describe the volume of individuals served. Service participation is calculated as outlined in the box to the right.

Service Participation Rate per 1,000:

<u># Clients Participating in SF DAAS Services</u> x 1,000 # Eligible Population

³ Image Credit: "Equity" by Laura Amaya from theNounProject.com.

⁴ Image Credit: "Community Mapping icon" by Iconathon from theNounProject.com.

To complete the equity analysis, disparities in service participation rates are discussed in terms of the number of times a subpopulation's rate is higher or lower than the citywide rate. Comparisons are measured using a ratio of two rates, and they should be interpreted as follows:

- A ratio greater than 1 indicates that the subpopulation's rate is higher than the citywide rate.
- **A ratio less than -1** indicates that the subpopulation's rate is lower than the citywide rate.
- A ratio of one (either 1 or -1) indicates that there was no difference between the subpopulation rate and the citywide rate.

Below are examples demonstrating how to interpret comparisons between service participation rates.

Example 1: Older Adults Living Alone Compared to Citywide Older Adult Population



Example 2: Low-Income Adults with Disabilities Compared to Citywide Adult with Disabilities Population



Based on FY 2016-17 enrollment data, the DFCNA equity analysis found that DAAS is supporting approximately 242 per thousand older adults through its community partner network – that is, almost 25% of older adults access DAAS-funded community-based services. Across most equity factors, participation rates were higher among populations with the presence of an equity factor than the citywide rate. For example, low-to-moderate income older adults participate in services at a rate of 519 per thousand, meaning that DAAS is serving over half of the city's low-income seniors.

Equity Factor	Older Adults Participation Rate per 1,000	Adults with Disabilities Participation Rate per 1,000
Living Alone	293	177
Low-to-Moderate Income	519	177
English-Speaking Proficiency	402	232
Communities of Color	308	145
LGBTQ	75	Not Available
Overall	242	130

FY 2017-18 DFCNA: Summary of Service Participation Rates for Research Question 1

The findings related to clients belonging to communities of color revealed that these populations are participating in services at a higher rate than the overall citywide rate. DAAS is serving almost one-third of the city's seniors of color and about 15% of adults with disabilities from communities of color. Disaggregating these clients further by race/ethnicity will allow us to examine possible disparities in service need and access experienced by API, African-American, and Latino clients.

DATA SOURCES

This analysis serves as an extension of the FY 2017-18 DFCNA's equity analysis focused on Communities of Color. It replicates the analytical methodologies employed in the DFCNA to calculate service participation rates across the populations of interest and uses the same data sources as the original analysis for the purposes of clarity and consistency. ⁵ While this data does not reflect the most up-to-date information available regarding DAAS client enrollment or local population estimates, this approach allows readers to draw more fair and reliable comparisons between the two analyses.

This analysis was conducted using:

- Client enrollment data: Office on the Aging (FY 2016-17); and
- U.S. Census Bureau population estimates: 2015 American Community Survey Five-Year Estimates

⁵ The full report and corresponding material is available on the DAAS website: http://sfdaas.org

RESEARCH QUESTION 1: CITYWIDE SERVICE PARTICIPATION⁶

This section answers Research Question 1, examining the extent to which populations of color (Asian/Pacific Islanders, African-Americans, and Latinos) utilize services as compared to the population citywide.

CITYWIDE SERVICE PARTICIPATION: SENIORS BY RACE/ETHNICITY

In FY 2016-17, DAAS provided services to 40,889 older adults aged 60 and older through its community-based services. This represents approximately 242 older adults per one thousand older adults in San Franciscomeaning that DAAS is supporting nearly 1 in 4 of the city's seniors.

The table below shows client enrollments and service participation rates per 1,000 eligible individuals disaggregated by client race/ethnicity.⁷ Participation rates vary significantly by racial/ethnic group: African-American and API seniors participated at a higher rate, while Latino and White seniors participated at a lower rate than the senior population overall. Specifically, African-American and API older adults accessed DAAS services at a higher rate—1.5 and 1.3 times more, respectively. Latino seniors participated in services at a similar, but slightly lower, rate compared to seniors citywide. White seniors participated in services at a considerably lower rate than seniors overall, over two times less often.⁸

Client Race/Ethnicity	Total Clients Served	Service Participation Rate per 1,000	Rate Ratio
Asian/Pacific Islander 22,744		316	1.3
Black/African-American 3,856		376	1.6
Latino 3,623		218	-1.1
White 6,911		102	-2.4
Overall	40,889	242	1

- Food Pantry: Individuals at or below 200% of the federal poverty level (FPL).
- Home-Delivered Groceries: Individuals at or below 200% FPL and with self-care, independent living, or ambulatory disability.
- Home-Delivered Meals: Individuals with self-care, independent living, or ambulatory disability.
- Community Living Fund: Individuals at or below 300% FPL and with self-care, independent living, or ambulatory disability.

⁶ The charts in this section highlight select services that are accessible to the general population and had a large enough client population for reliable analysis. Asterisks (*) denote instances in which data has been withheld because cross-population comparisons cannot be reliably drawn due to the small size of the population of interest. More detail and services are included in Appendix B.

⁷ Four services have additional eligibility criteria that were factored into the analysis. See Appendix B for more detail.

⁸ More detailed, service level information on client enrollment by race/ethnicity is included in Appendix A.

The chart below shows how service participation varies across programs. Service participation among the city's older adults tends to be highest in the Department's largest services, such as Community Service Centers (15,855 clients), Congregate Meals (15,423), and Aging and Disability Resource Centers or information hubs located in each supervisorial district (9,550 clients). Participation is also high in services with specific eligibility criteria, such as Home-Delivered Meals and Home-Delivered Groceries, suggesting these services are well targeted.



Service Participation Rate per 1,000 Eligible Seniors, FY 16-17

Service Participation Rate per 1,000 Eligible Individuals

ASIAN/PACIFIC ISLANDER SENIORS

DAAS provided services to 22,744 API older adults, which represents approximately 316 per one thousand API older adults in San Francisco—meaning that DAAS is supporting about 1 in 3 of the city's API seniors.

As shown below, API seniors generally participated in services at a slightly higher rate than the city's older adults overall—about 1.3 times more frequently. Notably, however, API seniors participated at much lower rates in a few DAAS programs. They were nearly four times less likely to participate in Community Living Fund and over two times less likely to participate in Nutrition Counseling. By contrast, API older adults are about one-and-a-half times more likely to participate in Congregate Meal programs and utilize Aging and Disability Resource Centers.



API Service Participation Compared to Service Participation for All Seniors, FY 16-17

BLACK/AFRICAN-AMERICAN SENIORS

DAAS provided services to 3,856 African-American older adults, which represents approximately 376 per one thousand African-American older adults in San Francisco—meaning that DAAS is supporting over 1 in 3 of the city's African-American seniors.

As shown below, African-American seniors generally participated in services at a higher rate than the city's older adults overall—about 1.6 times more frequently. In particular, African-Americans participated in Case Management and Nutritional Counseling services at over three times the rate of city seniors overall. Notably, however, African-American older adults participated at a lower rate—nearly 2.5 times less than all seniors—in the Village Model.



Black Service Participation Compared to Service Participation for All Seniors, FY 16-17

LATINO SENIORS

DAAS provided services to 3,623 Latino older adults, which represents approximately 218 per one thousand Latino older adults in San Francisco—meaning that DAAS is supporting about 1 in 5 of the city's Latino seniors.

As shown below, Latino seniors generally participated in services at rates similar to the city's older adults overall. Latinos' participation by program varied most notably from this trend in two key instances: they participated about three times less frequently in Food Pantry services, and nearly three times more frequently in Health Promotion programs.⁹



Latino Service Participation Compared to Service Participation for All Seniors, FY 16-17

⁹ This last trend reflects that the lead agency for Health Promotion primarily serves a Latino population.

WHITE SENIORS

DAAS provided services to 6,911 White older adults, which represents approximately 102 per one thousand White older adults in San Francisco—meaning that DAAS is supporting about 1 in 10 of the city's White seniors.

As shown below, White seniors generally participated in services at a considerably lower rate—about 2.5 times less—than the city's older adults overall. Most strikingly, White older adults participated in Food Pantry services over six times less and utilized Aging and Disability Resource Centers approximately five times less than all city seniors. By contrast, they participated in the Village Model and LGBT Care Navigation services with greater frequency than citywide trends.



White Service Participation Compared to Service Participation for All Seniors, FY 16-17

CITYWIDE SERVICE PARTICIPATION: ADULTS WITH DISABILITES BY RACE/ETHNICITY

In FY 2016-17, DAAS provided services to 4,352 adults with disabilities aged 18-59 through its communitybased services. This represents approximately 130 adults with disabilities per one thousand adults with disabilities in San Francisco—meaning that DAAS is supporting over 1 in 10 of the city's disabled adults.

The table below shows client enrollments and service participation rates per 1,000 eligible individuals disaggregated by client race/ethnicity. ¹⁰ Participation rates vary significantly by racial/ethnic group: African-American and API adults with disabilities participated at a higher rate, while Latino and White adults with disabilities participated at a lower rate than the overall AWD population. Specifically, African-Americans participated 1.5 times more, and API individuals participated 1.3 times more than all adults with disabilities. By contrast, Latino and White AWDs participated in services at considerably lower rates, about 2.2 and 2 times less, respectively, than disabled adults overall.¹¹

Client Race/Ethnicity Total Clients Serve		Service Participation Rate per 1,000	Rate Ratio
Asian/Pacific Islander 1,123		169	1.3
Black/African-American 996		201	1.5
Latino 402		58	-2.2
White 855		63	-2.0
Overall	4,352	130	1

FY 2016-17: Citywide Service Participation for Adults with Disabilities by Race/Ethnicity

- Food Pantry: Individuals at or below 200% of the federal poverty level (FPL).
- Home-Delivered Groceries: Individuals at or below 200% FPL and with self-care, independent living, or ambulatory disability.
- Home-Delivered Meals: Individuals with self-care, independent living, or ambulatory disability.
- Community Living Fund: Individuals at or below 300% FPL and with self-care, independent living, or ambulatory disability.

¹¹ More detailed, service level information on client enrollment by race/ethnicity is included in Appendix A.

¹⁰ Four services have additional eligibility criteria that were factored into the analysis. See Appendix B for more detail.

The chart below shows how service participation varies across programs. Service participation among the city's adults with disabilities tends to be highest in the Department's largest services including Community Service Centers (1,045 clients), Aging and Disability Resource Centers or information hubs located in each supervisorial district (994 clients), and Congregate Meals (793). Participation rates are also higher in services with specific eligibility criteria, including Home-Delivered Meals and Home-Delivered Groceries.



Service Participation Rate per 1,000 Eligible Adults with Disabilities, FY 16-17

Service Participation Rate per 1,000 Eligible Individuals

Source: Office on the Aging, FY 2016-17;

2015 American Community Survey Five-Year Estimates

ASIAN/PACIFIC ISLANDER ADULTS WITH DISABILITIES

DAAS provided services to 1,123 API adults with disabilities, which represents approximately 169 per one thousand API adults with disabilities in San Francisco—meaning that DAAS is supporting about 1 in 6 of the city's API disabled adults.

As shown below, API adults with disabilities generally participated in services at a slightly higher rate than the city's adults with disabilities overall—about 1.3 times more frequently. In particular, API adults with disabilities used Aging and Disability Resource Centers and Congregate Meal services about two times more. Notably, however, they accessed many home-based services, such as Home-Delivered Meals, Community Living Fund, Home-Delivered Groceries, and Case Management at lower rates than the overall population.



API Service Participation Compared to Service Participation for All AWDs, FY 16-17

BLACK/AFRICAN-AMERICAN ADULTS WITH DISABILITIES

DAAS provided services to 996 African-American adults with disabilities, which represents approximately 201 per one thousand African-American adults with disabilities in San Francisco—meaning that DAAS is supporting about 1 in 5 of the city's African-American disabled adults.

As shown below, African-American adults with disabilities generally participated in services about 1.5 times more than the city's adults with disabilities overall. This trend is consistent across many services, with participation rate highest for Home-Delivered Meals.



Black Service Participation Compared to Service Participation for All AWDs, FY 16-17

LATINO ADULTS WITH DISABILITES

DAAS provided services to 402 Latino adults with disabilities, which represents approximately 58 per one thousand Latino adults with disabilities in San Francisco—meaning that DAAS is supporting about 1 in 20 of the city's Latino disabled adults.

As shown below, Latino adults with disabilities generally participated in services at a considerably lower rate than the city's adults with disabilities overall—about 2.2 times less frequently. They access all services at a lower rate than the overall population. Their utilization is particularly low in Aging and Disability Resource Centers (nearly three times less) and Congregate Meal and Community Service Center services (over two times less than all disabled adults).



Latino Service Participation Compared to Service Participation for All AWDs, FY 16-17

WHITE ADULTS WITH DISABILITIES

DAAS provided services to 885 White adults with disabilities, which represents approximately 63 per one thousand White adults with disabilities in San Francisco—meaning that DAAS is supporting about than 1 in 15 of the city's White disabled adults.

As shown below, White adults with disabilities generally participated in services at a considerably lower rate than the city's adults with disabilities overall—about two times less frequently. Most notably, White adults with disabilities used Aging and Disability Resource Centers over four times less, and Congregate Meals about 2.6 times less than all disabled adults. By contrast, they participated slightly more frequently LGBT Care Navigation programming.



White Service Participation Compared to Service Participation for All AWDs, FY 16-17

RESEARCH QUESTION 2: SERVICE PARTICIPATION BY DISTRICT¹²

This section answers Research Question 2, examining the extent to which populations of color (Asian/Pacific Islanders, African-Americans, and Latinos) utilize services at different rates across city districts.

SERVICE PARTICIPATION BY DISTRICT: SENIORS BY RACE/ETHNICITY

The following section examines service participation among San Francisco seniors in FY 2016-17 by city district. It bears noting that because U.S. Census estimates for the local population by race/ethnicity and age were only available for older adults aged 65 years and older, this analysis underestimates the eligible DAAS client population and generally overestimates service participation rates.¹³ For this reason, the analysis that follows should be used only to compare senior service participation across districts rather than as an estimate of actual overall service participation rates, which are described earlier in this report.

As shown below, participation rates are higher in Districts 3, 6, and 8 than the citywide rate. Perhaps unsurprisingly, service rates tend to be lower in San Francisco's outer districts—including Districts 1, 2, 4, 7, 10, and 11. In particular, service utilization rates are low in Districts 1, 2, 4, and 9. This may be due in part to the location of site-based services with a high volume of clients, such as Community Service Centers, in more central, heavily-trafficked regions of the city.



Source: Office on the Aging, FY 2016-17;

²⁰¹⁵ American Community Survey Five-Year Estimates

¹² The charts in this section illustrate district-level variation in service participation rates for DAAS client populations by race/ethnicity. See Appendix C for data tables that correspond to these charts. ¹³ Refer to the FY 2017-18 DFCNA for a more detailed discussion of methodology.

ASIAN/PACIFIC ISLANDER SENIORS



2015 American Community Survey Five-Year Estimates

API Participation across Districts

The green bars above show how API service participation varies across city districts. Compared to the citywide API population, API older adults in Districts 3 and 6 participated in services about two and nearly three times more, respectively. By contrast, API older adults in Districts 1, 7, 8, and 9 participated at a notably lower rate—about or over two times less than the citywide trend for API seniors.

API Participation within Districts

Comparing service participation rates between API seniors (in green) and all seniors (in teal) within a given district provides a way to examine how racial disparities in service participation are distributed throughout the city. API older adults participate in services at similar or higher rates than all seniors in nearly every district, with the exceptions of Districts 6 and 8. In District 6, API older adults participate in DAAS services about 1.4 times less than all seniors in that district. Similarly, in District 8, API seniors participate 1.5 times less than District 8 overall.

BLACK/AFRICAN-AMERICAN SENIORS



2015 American Community Survey Five-Year Estimates

African-American Participation across Districts

The red bars above show how African-American service participation varies across city districts. African-American seniors participated in DAAS services and programs at remarkably high rate in District 6—over three times more—than African-American seniors citywide.¹⁴ African-Americans in Districts 1, 7, 9, and 11 participated considerably less than citywide trend for African-American older adults, ranging anywhere from over four to about two times less frequently.

African-American Participation within Districts

Comparing service participation rates between African-American (in red) and all seniors (in teal) within a given district provides a way to examine where racial disparities occur in the city. As is the case citywide, African-American seniors participate in services at similar or higher rates than the general older adult population in almost every district. Districts 1 and 7 buck this trend. In District 1, African-Americans are over two times less likely to participate in services than seniors in that district generally. African-American older adults engage in services in District 7 about 1.5 times less than all seniors in that district.

¹⁴ Readers may note that African-American service participation rate in District 6 exceeds 1,000—meaning that client participation in this district is over 100% participation. This value is a result of the methodology for assigning service participation at site-based services (e.g., Community Service Centers) to the district in which the service site is located, rather than the district in which clients reside. District 6 is home to many of these hubs that serve a high volume of clients from all over the city, not just residents of that district. This service trend in turn drives the service participation rate in the district above 100%.

LATINO SENIORS



2015 American Community Survey Five-Year Estimates

Latino Participation across Districts

The orange bars above show how Latino service participation varies across city districts. Latino older adults in District 8 participated in services at a much higher rate—approximately four times more—than Latino seniors citywide.¹⁵ By contrast, in Districts 1, 2, and 7, they participated at a notably lower rate than the citywide trend for Latino older adults, ranging from over two to nearly six times less frequently.

Latino Participation within District

Comparing service participation rates between Latinos (in orange) and all seniors (in blue) within a given district provides a way to examine how racial disparities in service participation are distributed throughout the city. Latino older adults participate in services at notably lower rates than all seniors in Districts 2, 4, and 7. In Districts 4 and 7, they participate about two times less than older adults in those districts. In District 2, Latino seniors utilize services four times less frequently than the overall senior population. By contrast, in District 8, Latinos participate in services at nearly three times the rate seniors generally access services in this district. The uniquely high rate of Latino service participation in District 8 is likely because one of the major Community Service Centers in this district serves a primarily Latino population, drawing clients from all over the city, including neighboring districts like District 9.

¹⁵ Readers may note that Latino service participation rate in District 8 exceeds 1,000—meaning that client participation in this district is over 100% participation. Similar to the instance of African-American participation in District 6 in the previous chart, this value is a result of the methodology for assigning service participation at site-based services to the district in which the service site is located and services are administered, rather than the district in which clients reside.

WHITE SENIORS



Participation Rate per 1,000 White Seniors for All Services, by Race and District

Source: Office on the Aging, FY 2016-17; 2015 American Community Survey Five-Year Estimates

White Participation across Districts

The blue bars above show how White service participation varies across city districts. White seniors in District 6 participated in services over three times more than White older adults citywide. In Districts 2, 4, and 7, they participated about two times less than the citywide trend for White seniors.

White Participation within District

Comparing service participation rates between White (in blue) and all seniors (in teal) within a given district provides a way to examine where in the city racial disparities in participation occur. As is the case for White service participation relative to all seniors citywide, White older adults participate at considerably lower rates than seniors overall in every district of the city. Low service utilization by White seniors is especially pronounced in Districts 2, 3, and 7, where they participated in DAAS services at over three times less than seniors generally in each of those districts.

SERVICE PARTICIPATION BY DISTRICT: ADULTS WITH DISABILITIES BY RACE/ETHNICITY¹⁶

The following section examines service participation among San Francisco adults with disabilities in FY 2016-17 by city district. It bears noting that because U.S. Census estimates for the local population by race/ethnicity and age were only available for adults with disabilities between the ages of 18 and 64, this analysis overestimates the eligible DAAS client population and generally underestimates service participation rates. For this reason, the analysis that follows should be used only to compare service participation among adults with disabilities across districts rather than as an estimate of actual service participation rates, which are described earlier in this report.

As shown below, adults with disabilities participated in DAAS services more in Districts 3, 6, and 7, and participated in services less in Districts 1, 9, and 11, in comparison to the citywide rate. As with senior clients, this trend may be due in part to the location of site-based services with a high volume of clients, such as Community Service Centers in more central, heavily-trafficked regions of the city.



Source: Office on the Aging, FY 2016-17; 2015 American Community Survey Five-Year Estimates

¹⁶ The charts in this section illustrate district-level variation in service participation rates for DAAS client populations by race/ethnicity. See Appendix C for data tables that correspond to these charts.

ASIAN/PACIFIC ISLANDER ADULTS WITH DISABILITIES



2015 American Community Survey Five-Year Estimates

API Participation across Districts

The green bars above show how API service participation varies across city districts. API adults with disabilities in Districts 3 and 6 participated in services over one-and-a-half times more than API adults with disabilities citywide. By contrast, API older adults in Districts 1, 2, 8, 9, and 10 participated at a notably lower rate—about or over two times less than the citywide trend.

API Participation within Districts

Comparing service participation rates between API (in green) and all adults with disabilities (in purple) within a given district provides a way to examine how racial disparities in service participation are distributed throughout the city. The API population participates in services at similar or higher rates than all seniors in nearly every district, with the exceptions of Districts 7, 8, and 10. Most notably, API adults with disabilities participate in DAAS services about 1.6 times less than all seniors in District 7.

BLACK/AFRICAN-AMERICAN ADULTS WITH DISABILITIES



2015 American Community Survey Five-Year Estimates

African-American Participation across Districts

The red bars above show how African-American service participation varies across city districts. African-American adults with disabilities in District 4 participated in DAAS services and programs at higher rate nearly two times more—than African-American AWDs citywide. This is primarily driven by a small population of African-American adults with disabilities living in this district rather than particularly large scale enrollment in this district. By contrast, African-Americans in Districts 1, 9, and 11 participated at particularly lower rates than the population citywide.

African-American Participation within Districts

Comparing service participation rates between African-American (in red) and all adults with disabilities (in purple) within a given district provides a way to examine how racial disparities in service participation are distributed throughout the city. The African-American population participates in services at similar or higher rates than all adults with disabilities in nearly every district, with the exceptions of Districts 1 and 7.

LATINO ADULTS WITH DISABILITIES



Participation Rate per 1,000 Latino AWDs for All Services,

Source: Office on the Aging, FY 2016-17; 2015 American Community Survey Five-Year Estimates

Latino Participation across Districts

The orange bars above show how Latino service participation varies across city districts. Latino adults with disabilities participated in services at a higher rate in Districts 7 and 8 — over two times more—than Latino adults with disabilities citywide. However, they participated at nearly two times less the citywide rate in Districts 9, 10, and 11. In particular, their participation is low in District 1: about 3.5 times less than disabled Latino adults citywide.

Latino Participation within Districts

Comparing service participation rates between Latino (in orange) and all adults with disabilities (in purple) within a given district provides a way to examine how racial disparities in service participation are distributed throughout the city. The Latino population participates in services at lower rates in nearly every district, with the exception of Districts 2, 4, 9, and 8. In particular, their participation is low compared to the overall utilization rate in District 10: Latino adults with disabilities access services about 3.8 times less than the overall population of adults with disabilities in this district. Similarly, they are about two and a half to three times less likely to use services in Districts 1, 6, and 7.

WHITE ADULTS WITH DISABILITIES

As shown below, White adults with disabilities in District 6 participated in services about two times as often as White AWDs citywide. In Districts 2 and 5, they participated about two times less than the citywide trend.



²⁰¹⁵ American Community Survey Five-Year Estimates

White Participation across Districts

The blue bars above show how White service participation varies across city districts. White adults with disabilities participated in services at a higher rate in District 6: 118 per thousand compared to a citywide rate of 59 per thousand or about two times as often as Whites citywide. Participation in particularly low in Districts 2 and 5 – about two times less the citywide rate.

White Participation within Districts

Comparing service participation rates between White (in blue) and all adults with disabilities (in purple) within a given district provides a way to examine how racial disparities in service participation are distributed throughout the city. The White population participates in services at lower rates in every district. This is particularly pronounced in District 7, where they are almost five times less likely to use services than the overall disabled adult population, and Districts 3 and 10, where they are three times less likely to use services.

FINDINGS/RECOMMENDATIONS

This analysis of FY 2016-17 enrollment and equity analysis trends has found that while clients of color, in aggregate, access most DAAS programs and services at a higher rate than the general population, there is considerable variation in service participation across individual racial or ethnic groups. This analysis has also shown that service utilization varies, with some predictability, across San Francisco's geography for clients of all ages and racial/ethnic backgrounds.

This research demonstrates the utility of performing analysis of DAAS's program data disaggregated by client race and ethnicity. When the city's senior and disabled adult populations belonging to communities of color are considered only in aggregate, significant variation in the experiences of clients from different racial/ethnic backgrounds may be obscured. Analysis that disaggregates client race/ethnicity supports a more nuanced understanding of the differences between API, African-American, Latino, and other clients of color, especially with respect to their diverse service needs and barriers to access. Additionally, where possible, it is valuable to examine areas of possible racial or ethnic disparity at their intersection with geography, income level, English fluency and other factors. Additional strategic analyses of these intersections can enrich understanding of factors that may mitigate or exacerbate differential client outcomes and inform strategies for ensuring racially equitable access and participation in City-funded opportunities for connection, engagement, and support.

In its ongoing evaluation of existing services and development of new programs, the Department should consider the following findings:

Latino adults with disabilities participate in services at much lower rates than disabled adults overall.

Latino adults with disabilities access services at a rate over two times lower than adults with disabilities citywide. DAAS should invest in expanding and/or developing new services to serve more of the city's Latino adults with disabilities. The equity analysis shows that DAAS serves Latino seniors at rates comparable to—or even better than—the city's older adult population across a variety of programs. This suggests that the Department has the capacity to provide culturally appropriate services tailored to Latino clients that are known to and valued by this community. DAAS should consider how to leverage their successes in serving this population to enhance connection to services among Latino adults with disabilities, while keeping in mind the particular needs and barriers to access experienced by adults with disabilities.

While API older adults and adults with disabilities participate at high rates in site-based community services, they access home-based programs that support independent community living far less frequently than the general client population.

API clients utilize site-based, communal services such as Aging and Disability Resource Centers, Community Service Centers, and Congregate Meals, at or above the rate of the general senior and disabled adult populations. By contrast, these clients participate in DAAS services that engage clients individually or in the home—such as Community Living Fund, Home-Delivered Meals, and Case Management—at lower rates than the general DAAS population, ranging from 1.5 to 4 times less frequently.

DAAS should examine in greater depth the particular service needs of API older adults and adults with disabilities and probe what factors may drive API clients' differential rates of participation in communal, sitebased programs and home-based, one-on-one services. To the extent that API clients do express need for home-based services that support independent living in the community but experience unique cultural or linguistic barriers to access those services, DAAS may need to strategize around capacity building in these service areas to better meet the needs of this population. Insofar as API clients' high rates of engagement in site-based, community-oriented programs reflect their desire for meaningful social connection with their peers, DAAS may leverage the Department's successes in these models and seek to expand communal programming to other service areas, as appropriate and where feasible.

African-American older adults and adults with disabilities access DAAS services at higher rates than the general client population.

African-American seniors and adults with disabilities utilize services at higher rates than the overall populations (about 1.6 times more and 1.5 times more, respectively). Both seniors and adults with disabilities in this population are high utilizers of Home-Delivered Meals, Community Service Centers, Case Management, and Congregate Meal services. African-American older adults also access Nutritional Counseling, Community Living Fund, and Home-Delivered Groceries at higher rates than the overall senior population. African-American adults with disabilities use Aging and Disability Resource Centers at higher rates than the general population of disabled adults.

These trends in high service participation among City's African-American population reflect the breadth of this population's needs and the Department's relative success in engaging individuals in valued programs and services. DAAS should sustain its commitment to serving this population and consider how to capitalize on its engagement of vulnerable African-American clients to connect them to other needed services and social supports.

Location of DAAS service sites and providers throughout San Francisco remains a primary driver of variations in service participation by district.

While there is some variation in service participation by district and race/ethnicity, these differences are not as pronounced as one might expect given the distribution of racial, ethnic, and cultural enclaves throughout the city. Similar to the overall population findings of the 2017-18 DFCNA, service participation rates across racial and age groups tends to be higher in the central part of the City (i.e., Districts 3, 6 and 8) and lower in outer districts (particularly Districts 2, 4, and 11). This consistency in cross-district participation trends—even across different racial/ethnic categories and age groups—underscores how the location of DAAS service sites and providers is a key driver of differential rates of service engagement across city districts.

DAAS should explore how to better incorporate geographic analysis into its program planning and the broader design of its service network to ensure clients' equitable access to necessary services, no matter where they live. The geographic analysis in this report provides a possible model for identifying where racial/ethnic disparities in service utilization are most pronounced, and for guiding targeted strategies to improve vulnerable populations' engagement with DAAS services citywide.

APPENDIX A. SERVICE ENROLLMENT BY POPULATION

·	Client Race/Ethnicity					
Services	ΑΡΙ	Black	Latino	White	Other/ Unknown	All
Adult Day Services	92	10	9	54	4	169
Aging and Disability Resource Center	6,332	652	664	746	1,156	9,550
Alzheimer's Day Care	48	6	5	40	4	103
Case Management	343	230	162	394	102	1,231
Community Living Fund	31	42	33	82	50	238
Community Service Centers	8,520	1,514	1,966	3,012	843	15,855
Congregate Meals	10,237	1,404	1,613	1,784	385	15,423
Emergency Short-Term Home Care	65	18	8	79	3	173
Food Pantry	947	88	62	79	42	1,218
Health Promotion	303	54	220	244	74	895
Home-Delivered Groceries	796	257	140	217	71	1,481
Home-Delivered Meals	1,115	1,097	564	1,877	135	4,827
Housing Subsidy	11	16	6	43	6	82
LGBT Care Navigation	5	4	6	51	30	96
Money Management	3	71	5	18	7	104
Nutritional Counseling	194	297	107	474	55	1,127
SF Connected	728	152	170	313	645	2,008
Village Model	192	17	9	391	109	718
Grand Total	22,744	3,856	3,623	6,911	3,755	40,889

FY 2016-17 Enrollment: Unduplicated Older Adult Clients by Service

Correitore	Client Race/Ethnicity					
Services	ΑΡΙ	Black	Latino	White	Other/ Unknown	All
Aging and Disability Resource Center	371	234	77	93	219	994
Case Management	24	43	16	36	63	182
Community Living Fund	19	35	24	41	14	133
Community Service Centers	358	257	117	209	104	1,045
Congregate Meals	321	219	69	126	58	793
Emergency Short-Term Home Care	1	0	0	0	0	1
Food Pantry	4	0	0	1	0	5
Health Promotion	1	3	0	2	1	7
Home-Delivered Groceries	48	95	39	62	64	308
Home-Delivered Meals	91	330	111	343	12	887
Housing Subsidy	2	14	7	33	11	67
LGBT Care Navigation	2	3	8	23	7	43
Money Management	4	18	2	12	2	38
Nutritional Counseling	0	4	6	3	0	13
SF Connected	43	39	39	56	100	277
Grand Total	1,123	996	402	855	976	4,352

FY 2016-17 Enrollment: Unduplicated Adult Clients with Disabilities by Service

APPENDIX B. CITYWIDE SERVICE PARTICIPATION RATES

Services	Total Served	Eligible Population	Service Participation	Service Participation
		Lighter optimition	Rate	Rate per 1,000
Adult Day Services	169	169,189	0.1%	1
Aging and Disability Resource Center	9,550	169,189	6%	56
Alzheimer's Day Care	103	169,189	0.06%	0.6
Case Management	1,231	169,189	0.7%	7
Community Living Fund	238	27,503	0.9%	9
Community Service Centers	15,855	169,189	9%	94
Congregate Meals	15,423	169,189	9%	91
Emergency Short-Term Home Care	173	169,189	0.1%	1
Food Pantry	1,218	57,266	2%	21
Health Promotion	895	169,189	0.5%	5
Home-Delivered Groceries	1,481	21,581	7%	69
Home-Delivered Meals	4,827	42,776	11%	108
Housing Subsidy	82	169,189	0.05%	0.5
LGBT Care Navigation	96	169,189	0.1%	0.6
Money Management	104	169,189	0.06%	0.6
Nutritional Counseling	1,127	169,189	0.7%	7
SF Connected	2,008	169,189	1%	12
Village Model	718	169,189	0.4%	4
Grand Total	40,889	169,189	24%	242

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Older Adults

Services	Total Served	Eligible Population	Service Participation Rate	Service Participation Rate per 1,000	City Service Participation Rate per 1,000	Rate Ratio
Adult Day Services	92	71,999	0.1%	1	1.0	1.3
Aging and Disability Resource Center	6,332	71,999	9%	88	56	1.6
Alzheimer's Day Care	48	71,999	0.07%	0.7	0.6	1.1
Case Management	343	71,999	0.5%	5	7	-1.5
Community Living Fund	31	13,134	0.2%	2	9	-3.8
Community Service Centers	8,520	71,999	12%	118	94	1.3
Congregate Meals	10,237	71,999	14%	142	91	1.6
Emergency Short-Term Home Care	65	71,999	0.09%	0.9	1.0	-1.1
Food Pantry	947	38,527	2%	25	21	1.2
Health Promotion	303	71,999	0.4%	4	5	-1.2
Home-Delivered Groceries	796	11,499	7%	69	69	1.0
Home-Delivered Meals	1,115	17,858	6%	62	108	-1.7
Housing Subsidy	11	71,999	0.02%	0.2	0.5	-3.3
LGBT Care Navigation	5	71,999	0.01%	0.1	0.6	*
Money Management	3	71,999	0.00%	0.04	0.6	*
Nutritional Counseling	194	71,999	0.3%	3	7	-2.6
SF Connected	728	71,999	1%	10	12	-1.2
Village Model	192	71,999	0.3%	3	4	-1.5
Grand Total	22,744	71,999	32%	316	242	1.3

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Asian/Pacific Islander Older Adults

Services	Total Served	Eligible Population	Service Participation Rate	Service Participation Rate per 1,000	City Service Participation Rate per 1,000	Rate Ratio
Adult Day Services	10	10,263	0.1%	1	1.0	-1.0
Aging and Disability Resource Center	652	10,263	6%	64	56	1.1
Alzheimer's Day Care	6	10,263	0.06%	0.6	0.6	*
Case Management	230	10,263	2.2%	22	7	3.2
Community Living Fund	42	3,175	1.3%	13	9	1.5
Community Service Centers	1,514	10,263	15%	148	94	1.6
Congregate Meals	1,404	10,263	14%	137	91	1.5
Emergency Short-Term Home Care	18	10,263	0.2%	2	1.0	1.8
Food Pantry	88	5,946	1%	15	21	-1.4
Health Promotion	54	10,263	0.5%	5	5	1.1
Home-Delivered Groceries	257	2,947	9%	87	69	1.3
Home-Delivered Meals	1,097	4,162	26%	264	108	2.4
Housing Subsidy	16	10,263	0.2%	2	0.5	3.1
LGBT Care Navigation	4	10,263	0.04%	0.4	0.6	*
Money Management	71	10,263	0.7%	7	0.6	11.5
Nutritional Counseling	297	10,263	2.9%	29	7	4.1
SF Connected	152	10,263	1%	15	12	1.2
Village Model	17	10,263	0.2%	2	4	-2.4
Grand Total	3,856	10,263	38%	376	242	1.6

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Black/African-American Older Adults

Services	Total Served	Eligible Population	Service Participation Rate	Service Participation Rate per 1,000	City Service Participation Rate per 1,000	Rate Ratio
Adult Day Services	9	16,586	0.05%	0.5	1.0	*
Aging and Disability Resource Center	664	16,586	4%	40	56	-1.4
Alzheimer's Day Care	5	16,586	0.03%	0.3	0.6	*
Case Management	162	16,586	1%	10	7	1.4
Community Living Fund	33	3,670	0.9%	9	9	-1.0
Community Service Centers	1,966	16,586	12%	119	94	1.3
Congregate Meals	1,613	16,586	10%	97	91	1.1
Emergency Short-Term Home Care	8	16,586	0.05%	0.5	1.0	*
Food Pantry	62	9,185	1%	7	21	-3.1
Health Promotion	220	16,586	1.3%	13	5	2.7
Home-Delivered Groceries	140	3,176	4%	44	69	-1.6
Home-Delivered Meals	564	4,865	12%	116	108	1.1
Housing Subsidy	6	16,586	0.04%	0.4	0.5	*
LGBT Care Navigation	6	16,586	0.04%	0.4	0.6	*
Money Management	5	16,586	0.03%	0.3	0.6	*
Nutritional Counseling	107	16,586	0.6%	6	7	-1.1
SF Connected	170	16,586	1%	10	12	-1.2
Village Model	9	16,586	0.05%	0.5	4	*
Grand Total	3,623	16,586	22%	218	242	-1.1

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Latino Older Adults

Services	Total Served	Eligible Population	Service Participation Rate	Service Participation Rate per 1,000	City Service Participation Rate per 1,000	Rate Ratio
Adult Day Services	54	67,789	0.08%	0.8	1	-1.3
Aging and Disability Resource Center	746	67,789	1%	11	56	-5.1
Alzheimer's Day Care	40	67,789	0.06%	0.6	0.6	-1.0
Case Management	394	67,789	0.6%	6	7	-1.2
Community Living Fund	82	10,748	0.8%	8	9	-1.2
Community Service Centers	3,012	67,789	4%	44	94	-2.1
Congregate Meals	1,784	67,789	3%	26	91	-3.5
Emergency Short-Term Home Care	79	67,789	0.1%	1	1	1.2
Food Pantry	79	23,846	0.3%	3	21	-6.3
Health Promotion	244	67,789	0.4%	4	5	-1.4
Home-Delivered Groceries	217	9,416	2%	23	69	-3.0
Home-Delivered Meals	1,877	15,216	12%	123	108	1.1
Housing Subsidy	43	67,789	0.06%	0.6	0.5	1.3
LGBT Care Navigation	51	67,789	0.08%	0.8	0.6	1.3
Money Management	18	67,789	0.03%	0.3	0.6	-2.3
Nutritional Counseling	474	67,789	0.7%	7	7	-1.0
SF Connected	313	67,789	0.5%	5	12	-2.6
Village Model	391	67,789	0.6%	6	4	1.4
Grand Total	6,911	67,789	10%	102	242	-2.4

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for White Older Adults

Services	Total Served Eligible Population		Service Participation Rate	Service Participation Rate per 1,000
Aging and Disability Resource Center	994	33,463	3%	30
Case Management	182	33,463	0.5%	5
Community Living Fund	133	14,080	0.9%	9
Community Service Centers	1,045	33,463	3%	31
Congregate Meals	793	33,463	2%	24
Emergency Short-Term Home Care	1	33,463	0.00%	0.03
Food Pantry	5	18,240	0.03%	0.3
Health Promotion	7	33,463	0.02%	0.2
Home-Delivered Groceries	308	12,031	3%	26
Home-Delivered Meals	887	20,004	4%	44
Housing Subsidy	67	33,463	0.2%	2
LGBT Care Navigation	43	33,463	0.1%	1
Money Management	38	33,463	0.1%	1
Nutritional Counseling	13	33,463	0.04%	0.4
SF Connected	277	33,463	0.8%	8
Grand Total	4,352	33,463	13%	130

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Adults with Disabilities

Services	Total Served	Eligible Population	Service Participation Rate	Service Participation Rate per 1,000	City Service Participation Rate per 1,000	Rate Ratio
Aging and Disability Resource Center	371	6,664	6%	56	30	1.9
Case Management	24	6,664	0.4%	4	5	-1.4
Community Living Fund	19	2,946	0.6%	6	9	-1.5
Community Service Centers	358	6,664	5%	54	31	1.7
Congregate Meals	321	6,664	5%	48	24	2.0
Emergency Short-Term Home Care	1	6,664	0.02%	0.2	0.03	*
Food Pantry	4	4,074	0.1%	1	0.3	*
Health Promotion	1	6,664	0.02%	0.2	0.2	*
Home-Delivered Groceries	48	2,601	2%	18	26	-1.4
Home-Delivered Meals	91	4,156	2%	22	44	-2.0
Housing Subsidy	2	6,664	0.03%	0.3	2	*
LGBT Care Navigation	2	6,664	0.03%	0.3	1	*
Money Management	4	6,664	0.06%	0.6	1	*
Nutritional Counseling	0	6,664	0%	0	0.4	*
SF Connected	43	6,664	0.6%	6	8	-1.3
Grand Total	1,123	6,664	17%	169	130	1.3

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Asian/Pacific Islander Adults with Disabilities

Services	Total Served	Eligible Population	Service Participation Rate	Service Participation Rate per 1,000	City Service Participation Rate per 1,000	Rate Ratio
Aging and Disability Resource Center	234	4,967	5%	47	30	1.6
Case Management	43	4,967	0.9%	9	5	1.7
Community Living Fund	35	3,110	1.1%	11	9	1.2
Community Service Centers	257	4,967	5%	52	31	1.7
Congregate Meals	219	4,967	4%	44	24	1.8
Emergency Short-Term Home Care	0	4,967	0%	0	0.03	*
Food Pantry	0	4,025	0%	0	0.3	*
Health Promotion	3	4,967	0.06%	0.6	0.2	*
Home-Delivered Groceries	95	3,027	3%	31	26	1.2
Home-Delivered Meals	330	3,553	9%	93	44	2.1
Housing Subsidy	14	4,967	0.3%	3	2	1.4
LGBT Care Navigation	3	4,967	0.06%	0.6	1	*
Money Management	18	4,967	0.4%	4	1	3.3
Nutritional Counseling	4	4,967	0.08%	0.8	0.4	*
SF Connected	39	4,967	0.8%	8	8	-1.1
Grand Total	996	4,967	20%	201	130	1.5

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Black/African-American Adults with Disabilities

Services	Total Served	Eligible Population	Service Participation Rate	Service Participation Rate per 1,000	City Service Participation Rate per 1,000	Rate Ratio
Aging and Disability Resource Center	77	6,902	1%	11	30	-2.7
Case Management	16	6,902	0.2%	2	5	-2.2
Community Living Fund	24	3,246	0.7%	7	9	-1.3
Community Service Centers	117	6,902	2%	17	31	-1.8
Congregate Meals	69	6,902	1%	10	24	-2.4
Emergency Short-Term Home Care	0	6,902	0%	0	0.03	*
Food Pantry	0	4,707	0%	0	0.3	*
Health Promotion	0	6,902	0%	0	0.2	*
Home-Delivered Groceries	39	2,730	1%	14	26	-1.8
Home-Delivered Meals	111	3,843	3%	29	44	-1.5
Housing Subsidy	7	6,902	0.1%	1	2	*
LGBT Care Navigation	8	6,902	0.1%	1	1	*
Money Management	2	6,902	0.03%	0.3	1	*
Nutritional Counseling	6	6,902	0.09%	0.9	0.4	*
SF Connected	39	6,902	0.57%	6	8	-1.5
Grand Total	402	6,902	6%	58	130	-2.2

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Latino Adults with Disabilities

Services	Total Served	Eligible Population	Service Participation Rate	Service Participation Rate per 1,000	City Service Participation Rate per 1,000	Rate Ratio
Aging and Disability Resource Center	93	13,475	0.7%	7	30	-4.3
Case Management	36	13,475	0.3%	3	5	-1.9
Community Living Fund	41	5,111	0.8%	8	9	-1.2
Community Service Centers	209	13,475	2%	16	31	-2.0
Congregate Meals	126	13,475	1%	9	24	-2.6
Emergency Short-Term Home Care	0	13,475	0%	0	0.03	*
Food Pantry	1	7,207	0.01%	0.1	0.3	*
Health Promotion	2	13,475	0.01%	0.1	0.2	*
Home-Delivered Groceries	62	4,520	1%	14	26	-1.9
Home-Delivered Meals	343	7,013	5%	49	44	1.1
Housing Subsidy	33	13,475	0.2%	2	2	1.2
LGBT Care Navigation	23	13,475	0.2%	2	1	1.3
Money Management	12	13,475	0.09%	0.9	1	-1.2
Nutritional Counseling	3	13,475	0.02%	0.2	0.4	*
SF Connected	56	13,475	0.4%	4	8	-2.0
Grand Total	855	13,475	6%	63	130	-2.0

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for White Adults with Disabilities

APPENDIX C. SERVICE PARTICIPATION BY DISTRICT

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Client Race/Ethnicity	D1	D2	D3	D4	D5	D6	D7	D8	D9	D10	D11	City
Asian/Pacific Islander	292	357	728	370	359	646	268	298	227	325	400	442
Black/African-American	116	473	567	325	382	1,688	196	645	290	579	248	524
Latino	158	59	243	107	226	549	116	1,265	273	262	230	333
White	152	73	143	92	127	454	79	161	164	116	103	146
All Seniors	235	228	573	206	350	901	288	471	197	336	247	355

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Older Adults (Age 65+) by District and Race/Ethnicity

FY 2016-17: Service Participation Rates per 1,000 Eligible Individuals for Adults with Disabilities (Age 18-64) by District and Race/Ethnicity

Client Race/Ethnicity	D1	D2	D3	D4	D5	D6	D7	D8	D9	D10	D11	City
Asian/Pacific Islander	75	49	257	112	92	206	158	79	71	73	99	136
Black/African-American	26	105	243	316	142	211	167	96	60	192	72	165
Latino	15	83	92	51	42	67	109	117	32	30	30	53
White	36	19	60	34	28	118	51	54	32	35	34	59
All Adults with Disabilities	44	53	193	51	86	176	246	105	39	115	48	108