

San Mateo County Behavioral Health and Recovery Services (SMC BHRS) Provider Outreach Annual Report FY 2021–2022

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Executive Summary

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 in excess of \$1 million. The Community Services and Supports (CSS) component of MHSA was created to provide direct services to individuals with severe mental illness and 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). Each of these organizations provide outreach and engagement activities throughout 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) 2021–2022 (July 1, 2021, through June 30, 2022). We also present historical data since FY 2014–2015 to show how attendance has changed over time. The appendices provide the same information at the provider level.

Total Attendance

For FY 2021–2022, SMC BHRS providers reported that there were 7,961 attendees at all outreach events, which reflects a 6.2% increase in total attendance compared with FY 2020–2021 (which saw 7,499 attendees). The attendance at individual outreach events increased by 302 attendees in FY 2021–2022 compared with FY 2020–2021. During FY 2021–2022, SMC providers reached 7,144 attendees across 174 group outreach events, while during FY 2020–2021, providers reached 6,984 attendees across 115 group outreach events.

Demographic Characteristics of Outreach Attendees

NCOC

There were 7,577 attendees at NCOC outreach events. Among attendees at NCOC outreach events, the most common age group was children (29%). Almost half of the attendees were female (47%). The three largest racial/ethnic groups were White (30%), Filipino (9%), or Other race (9%). Seventeen percent of attendees declined to state their race or ethnicity. Of those reporting special population status (i.e., homeless, at risk for homelessness, vision impaired, hearing impaired, veterans), 33% of attendees reported being at risk for homelessness, and 15% of attendees reported being homeless.

EPAPMHO

There were 384 attendees at EPAPMHO outreach events. Most attendees were adults (76%) and females (57%). The greatest proportion of attendees by race/ethnicity were Mexican (49%), followed by Black (11%). Of those reporting special population status, 38% were at risk for being homeless and 21% were homeless.

Outreach Event Characteristics

NCOC

NCOC individual outreach events ranged from 5 minutes to 2.5 hours and averaged 35 minutes. Outreach events took place in schools (32%) and over the phone (28%). Almost all individual outreach events were conducted in English (99.5%).

NCOC group outreach events ranged from 5 minutes to 6.2 hours and averaged 75 minutes. Of the 173 group outreach events, most were conducted in schools (54%) or virtually (28%). Most group outreach events were conducted in English (95%), followed by Spanish (5%).

NCOC individual outreach events resulted in mental health referrals (21%) and substance use referrals (4%). Providers made 1,081 referrals for 443 NCOC individual outreach attendees. The top four types of referrals made for attendees were in medical care (22%), food (16%), financial services (10%), and cultural, nontraditional care (10%).

EPAPMHO

EPAPMHO individual outreach events lasted from 10 to 30 minutes and averaged 16 minutes. Most outreach events took place over the phone (50%) or in offices (32%). More than half were held in Spanish (59%).

There was one EPAPMHO group outreach event that lasted 30 minutes. This event occurred in an office and was conducted in Tongan.

EPAPMHO individual outreach events resulted in mental health referrals (26%) and substance use referrals (37%). Providers made 627 referrals for 374 attendees. The top three types of referrals were for medical care (28%), housing (26%), and form assistance (11%).

Recommendations

We have the following recommendations based on FY 2021–2022 data. These recommendations fall under two umbrellas: those aimed at enhancing outreach and those intended to improve data collection.

Enhance Outreach

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 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, as the Mexican population was the largest racial/ethnic population attending these events. Similarly, other EPAPMHO individual outreach events were offered in Tongan and Samoan, as participants indicated that these languages 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.

Continue to offer non-office locations for group and individual outreach events. Data shows 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 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 help 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 in excess of \$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: (1) Full-Service Partnerships, (2) General Systems Development Funds, and (3) 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 underserved adults; Latino, African American, and Pacific Islander communities; and people who identify as lesbian, gay, bisexual, transgender, and questioning (LGBTQ) in East Palo Alto. NCOC caters to rural and/or ethnic communities (Chinese, Filipino, Latino, Pacific Islander) and LGBTQ 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 providing 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 FY 2021–2022 (July 1, 2021, through June 30, 2022). 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 the data and calculates aggregated counts and percentages to describe outreach activities.

This report focuses on EPAPMHO and NCOC outreach events that occurred during FY 2021–2022. We also present historical data from FY 2014–2015, FY 2015–2016, FY 2016–2017, FY 2017–2018, FY 2019–2020, FY 2020–2021, and FY 2021–2022 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.

Overall Outreach

During FY 2021–2022, SMC BHRS outreach providers reported that there were 7,961 attendees at outreach events—817 attendees reached through individual outreach events and 7,144 attendees reached across 174 group outreach events. An individual outreach event include a single attendee, while group outreach events include 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 FY 2021–2022.

Exhibit 1. Outreach Attendees, by Collaborative, Provider, and Event Type, FY 2021–2022

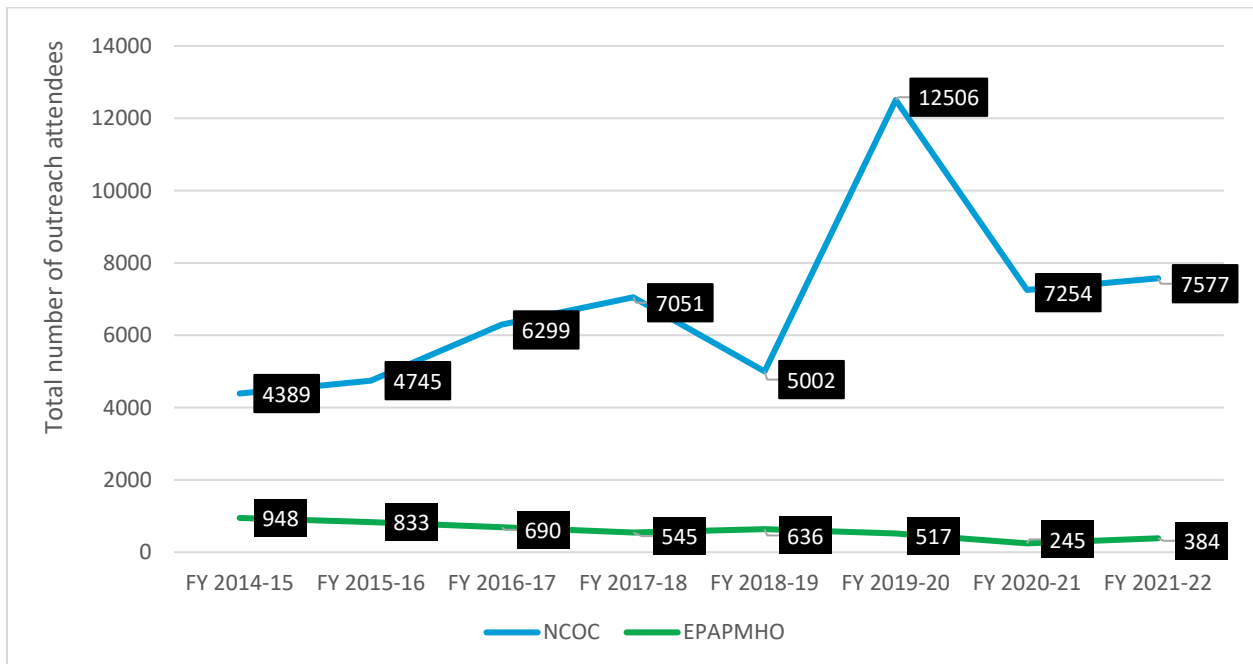
Provider organization	Number of individual outreach attendees	Number of attendees at group outreach events	Total attendees reported across all events
North County Outreach Collaborative (NCOC)			
Asian American Recovery Services	191	356	547
Daly City Peninsula Partnership Collaborative	110	748	858
Daly City Youth Health Center	128	2,797	2,925
Pacifica Collaborative	14	3,207	3,221
Star Vista	0	26	26
Total (NCOC)	443	7,134	7,577
East Palo Alto Partnership for Mental Health Outreach (EPAPMHO)			
Anamatangi Polynesian Voices	54	10	64
El Concilio	149	0	149
Free At Last	171	0	171
Total (EPAPMHO)	374	10	384
Total (NCOC and EPAPMHO)	817	7144	7961

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

The NCOC is expected to serve a larger proportion of the outreach collaborative effort, as NCOC 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.

The Number of individual outreach attendees number of NCOC outreach attendees increased annually from 2014 to 2020, with the exception of FY 2018–2019. In 2019–2020, the number of NCOC attendees increased significantly due to the COVID-19 pandemic. The COVID-19 regional stay-at-home order was issued on March 16, 2020, and services provided from March to June 2020 showed an increase in outreach, as 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 (FY 2019–2020) by distributing food during the events. A higher attendance at these events may contribute to an overall increase seen in FY 2019–2020. The number of EPAPMHO outreach attendees decreased from FY 2014 to FY 2021 but increased from FY 2020–2021 to FY 2021–2022. **Exhibit 2** shows the trends in the number of outreach attendees over the years for both collaboratives.

Exhibit 2. Total Outreach Attendees, by Collaborative, FY 2014–2022



Note. 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 top five racial/ethnic groups served by individual or group outreach in each year for the past 5 fiscal years (i.e., FY 2017–2018, FY 2018–2019, FY 2019–2020, FY 2020–2021, and FY 2021–2022), within each collaborative. A table with the entire breakdown of racial/ethnic groups from FY 2017 to FY 2022 is presented in Appendix I.

Exhibit 3a. Percentage of Racial/Ethnic Groups Served by NCOC, FY 2017–2018 to FY 2021–2022

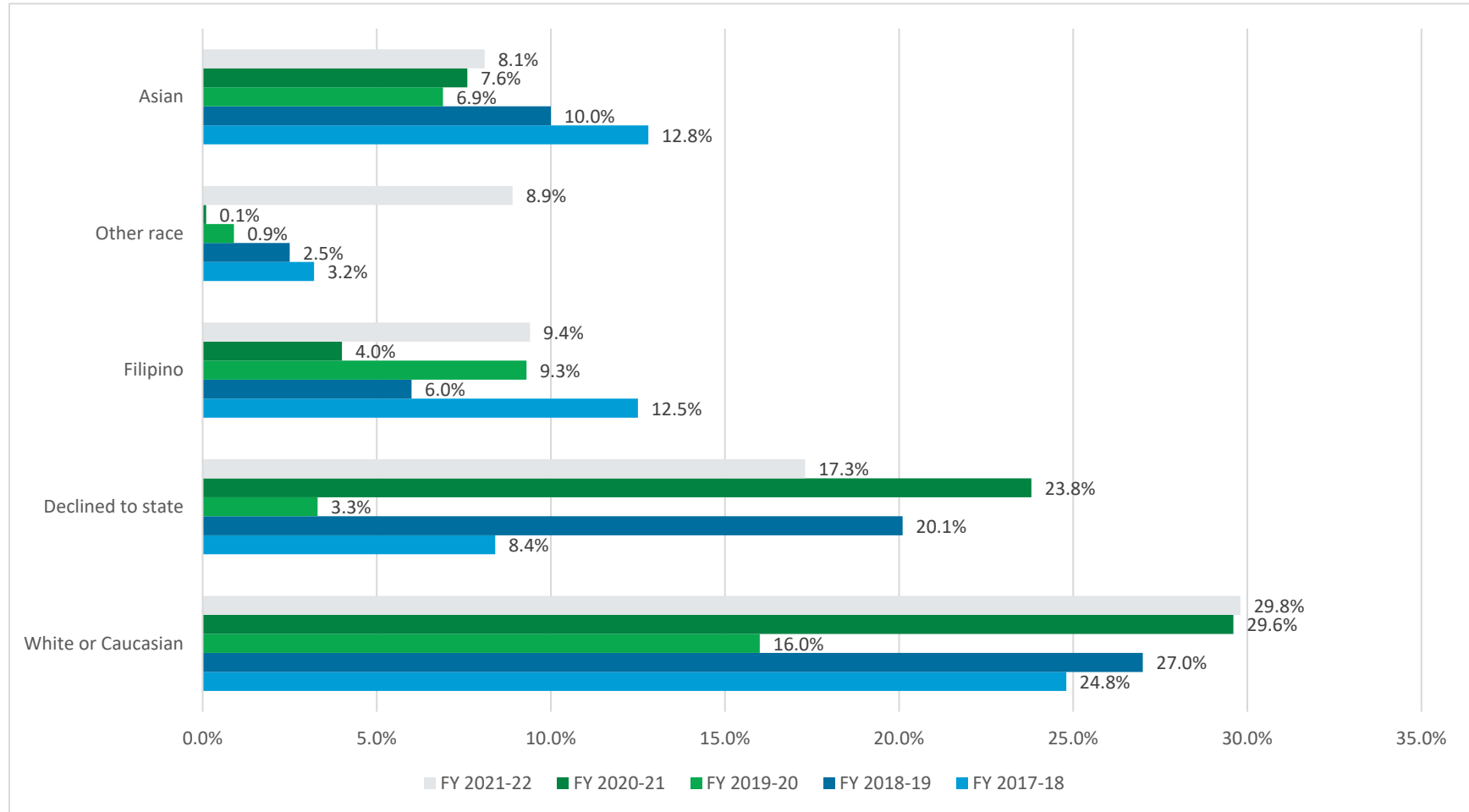
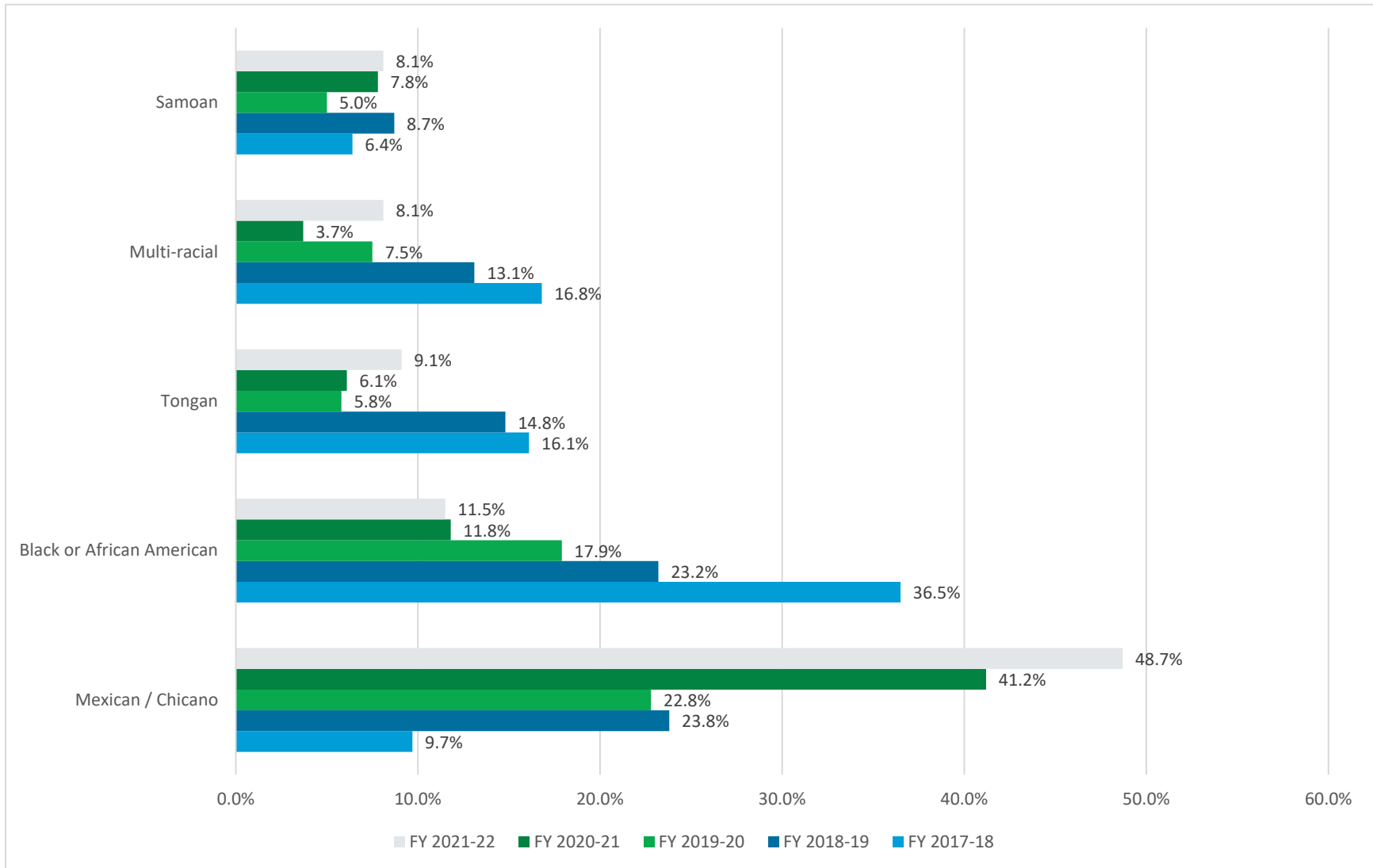


Exhibit 3b. Percentage of Racial/Ethnic Groups Served by EPAPMHO, FY 2017–2018 to FY 2021–2022



The NCOC has seen an increase in outreach numbers this year compared to FY2020–2021 (see **Exhibit 2**), and there are a few key differences in the racial/ethnic demographics of the outreach attendees. For example, more attendees decided to state their race/ethnicity this year compared with FY 2020–2021. Therefore, we see a decrease in those declining to state their race/ethnicity and an increase in the attendees specifying a particular race.

The EPAPMHO has also seen an increase in outreach numbers this year compared with FY 2020–2021 (see **Exhibit 2**), and there are a few key differences in the racial/ethnic demographics of the outreach attendees. From FY 2020–2021 to FY 2021–2022, there has been an observed decrease in attendance by Black and multiracial attendees at these events. However, there has been an increase in attendees self-reporting their race/ethnicity as Mexican, Tongan, multiracial, and Samoan.

Exhibit 4a presents the percentages of mental health and substance use referrals by NCOC from FY 2017–2018 through FY 2021–2022. Compared with FY 2020–2021, the number of mental health referrals decreased by 29% in FY 2021–2022 and reached levels similar to those seen before the COVID-19 pandemic. The number of substance use referrals also declined during this time frame.

Exhibit 4a. Percentage of Mental Health/Substance Use Referrals by NCOC, FY 2017–2018 to FY 2021–2022

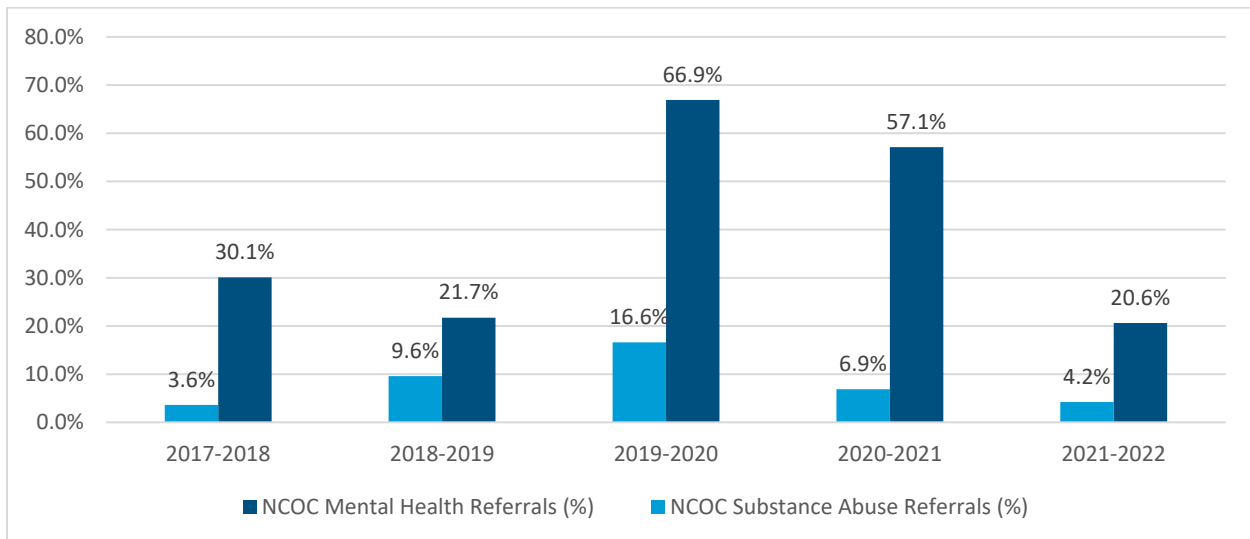
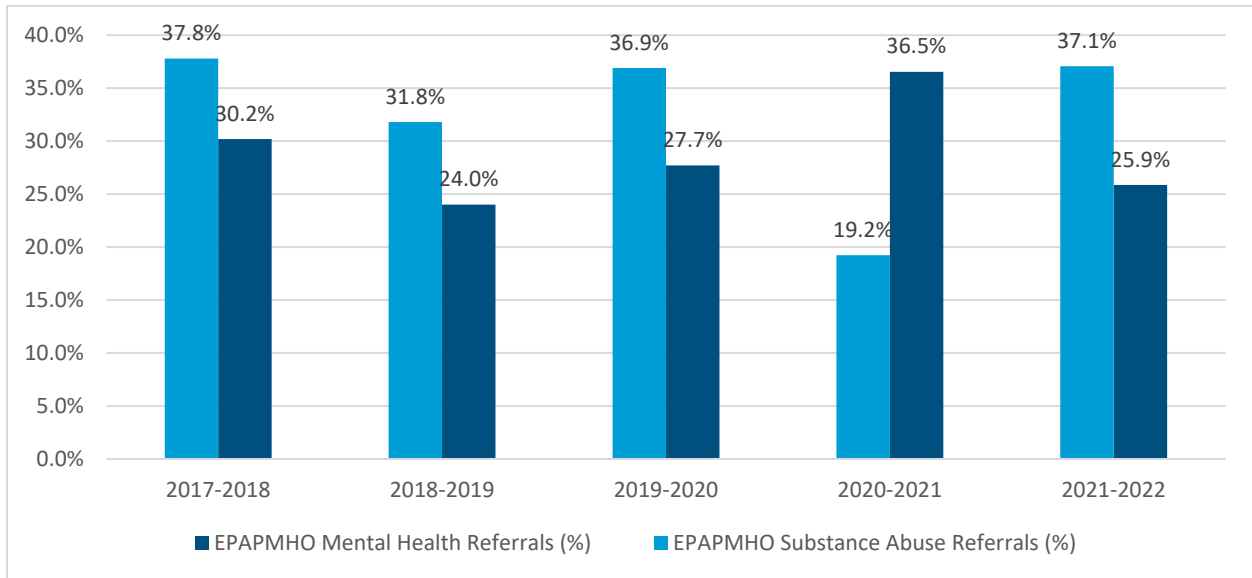


Exhibit 4b presents the percentages of mental health and substance use referrals by EPAPMHO from FY 2017–2018 through FY 2021–2022. Compared with FY 2020–2021, the number of mental health referrals decreased by 10.6% this year. The number of substance use referrals increased during this time frame.

Exhibit 4b. Percentage of Mental Health/Substance Use Referrals by EPAPMHO, FY 2017–2018 to FY 2021–2022



Exhibits 5a and 5b present referrals to social services from FY 2017–2018 through FY 2021–2022 for each collaborative. The percentages represent the percentage of total attendee referrals to social services.

- NCOC had 1,081 referrals to social services in FY 2021–2022 compared with 866 referrals in FY 2020–2021, 1,101 referrals in FY 2019–2020, 330 referrals in FY 2018–2019, and 592 referrals in FY 2017–2018. In FY 2020–2021, EPAPMHO had 627 referrals to social services compared with 367 referrals in FY 2020–2021, 563 referrals in FY 2019–2020, 921 referrals in FY 2018–2019, and 727 referrals in FY 2017–2018.
- In FY 2021–2022, NCOC saw decreases in food, legal, and housing assistance compared with the prior year. In particular, the referrals for housing were the lowest seen since FY 2017–2018. On the other hand, the percentage of referrals to medical care, financial assistance, and cultural, nontraditional care increased in FY 2021–2022 compared with the previous year, indicating that residents continued to face challenges pertaining to health, employment, and cultural, nontraditional forms of care.
- In FY 2021–2022, EPAPMHO had decreases in the percentage of referrals for form, legal, food, and health insurance assistance. The percentage of referrals for medical care and housing assistance increased.

Exhibit 5a. Referrals to Social Services Made by NCOC, FY 2017–2018 to FY 2021–2022

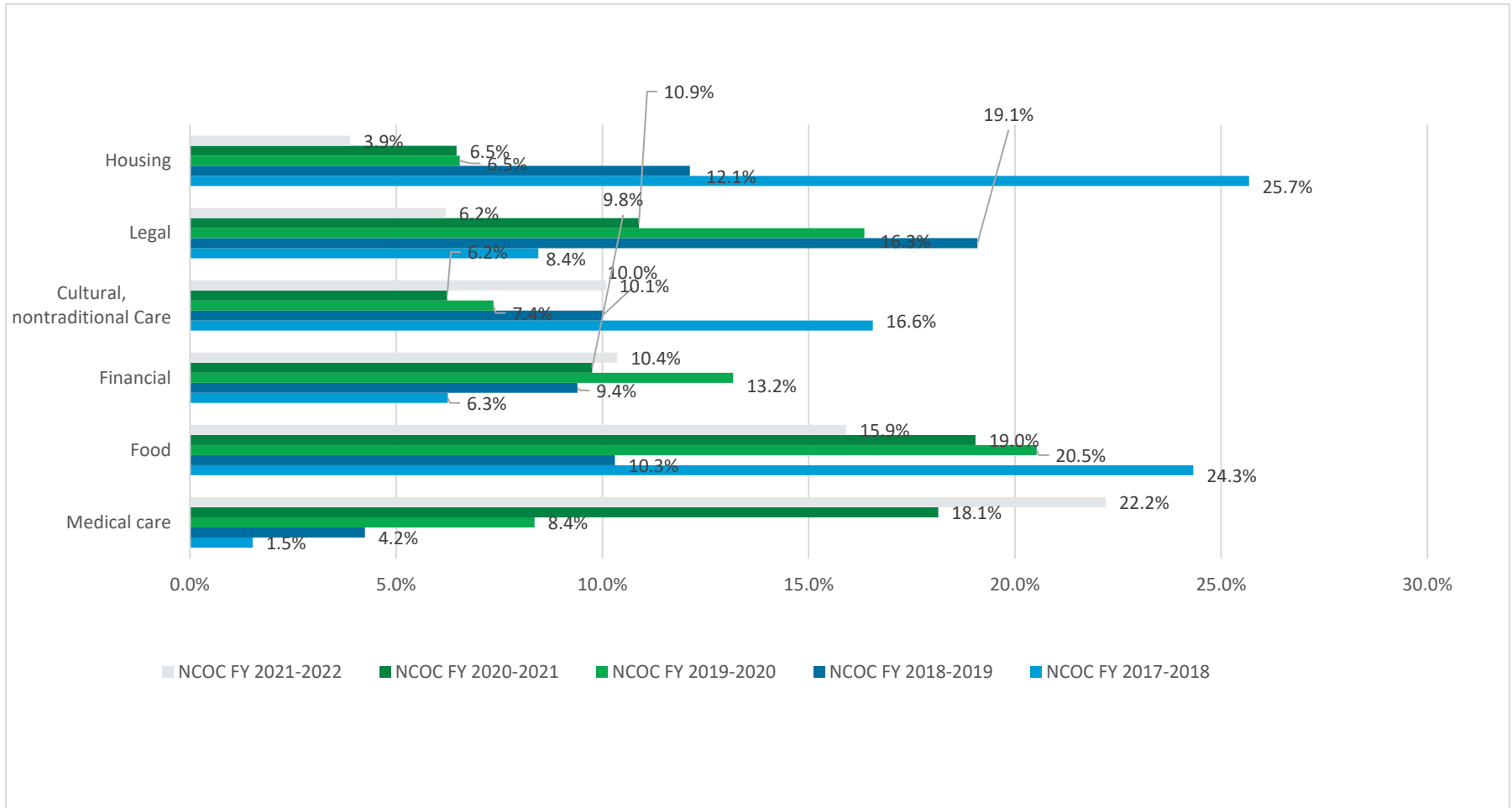
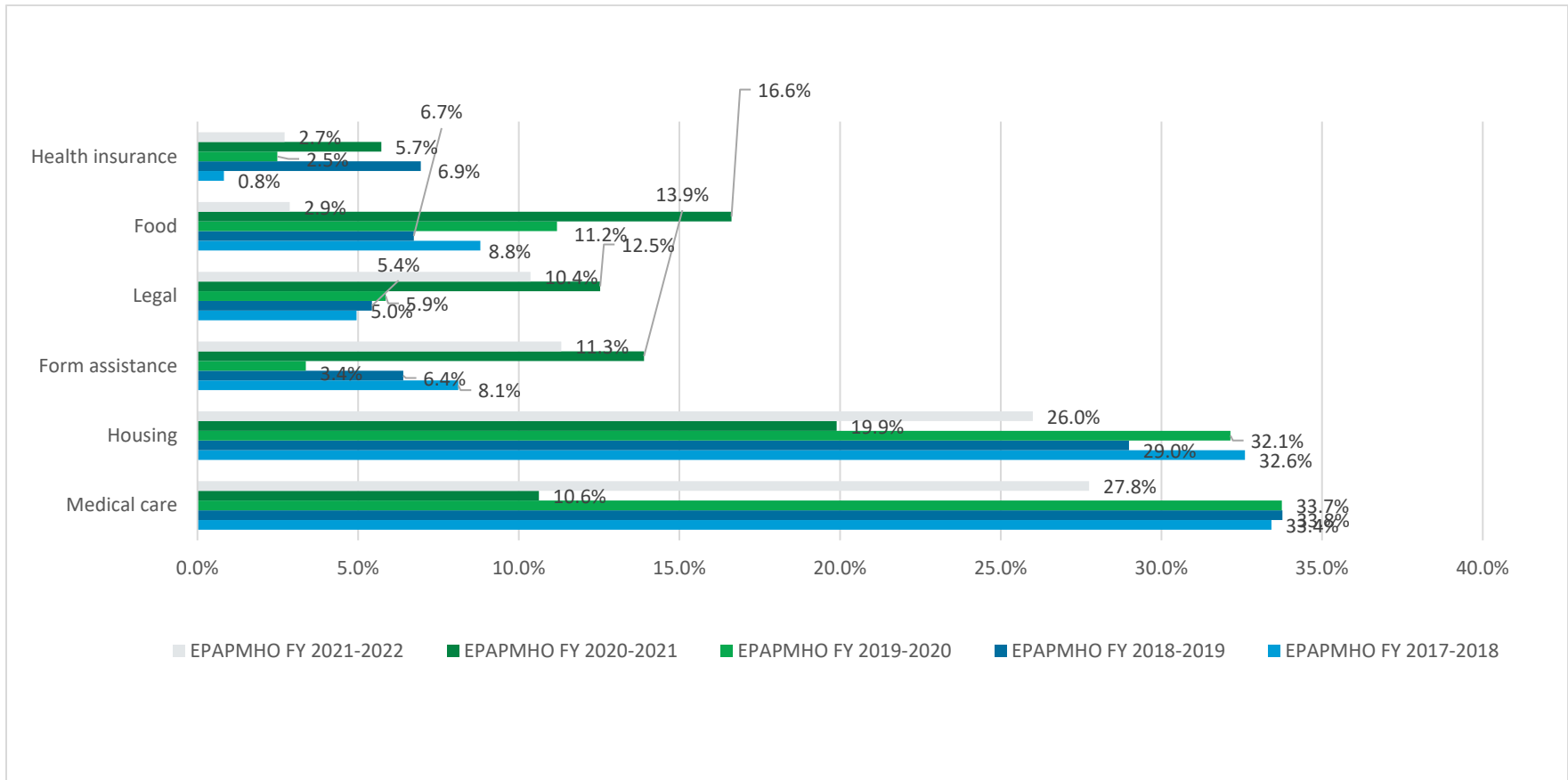


Exhibit 5b. Referrals to Social Services Made by EPAPMHO, FY 2017–2018 to FY 2021–2022



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

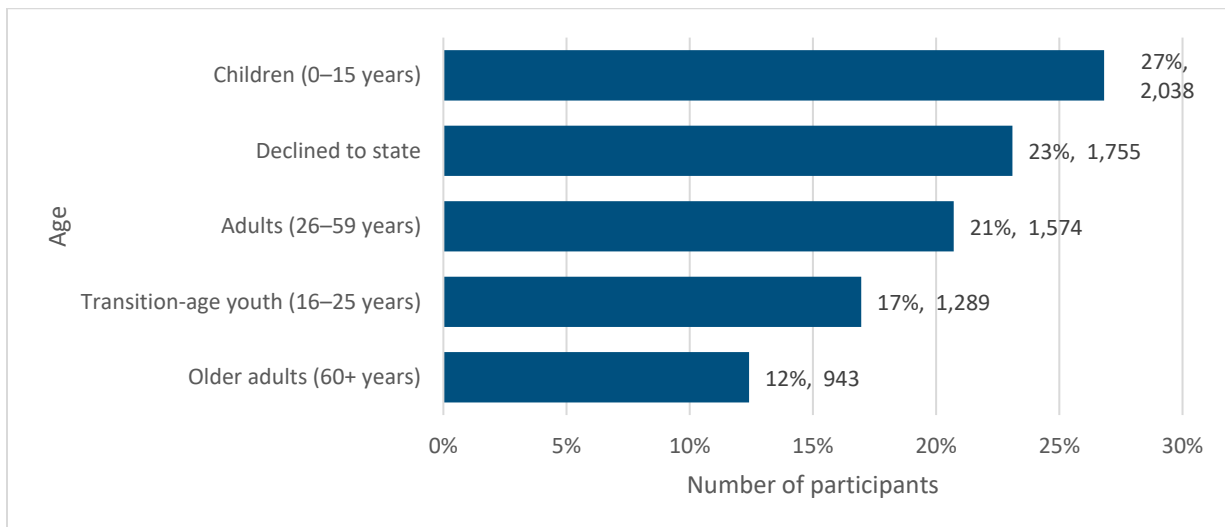
NCOC

This section provides details about 7,577 attendees at NCOC group and individual outreach events across the five provider organizations in FY 2021–2022.

Demographics

Age: Attendees across NCOC outreach events were children (0–15 years of age; 27%), adults (26–59 years of age; 21%), transition-age youth (16–25 years of age; 17%), and older adults (60 years of age and older; 12%) in FY 2021–2022. Twenty-three 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.

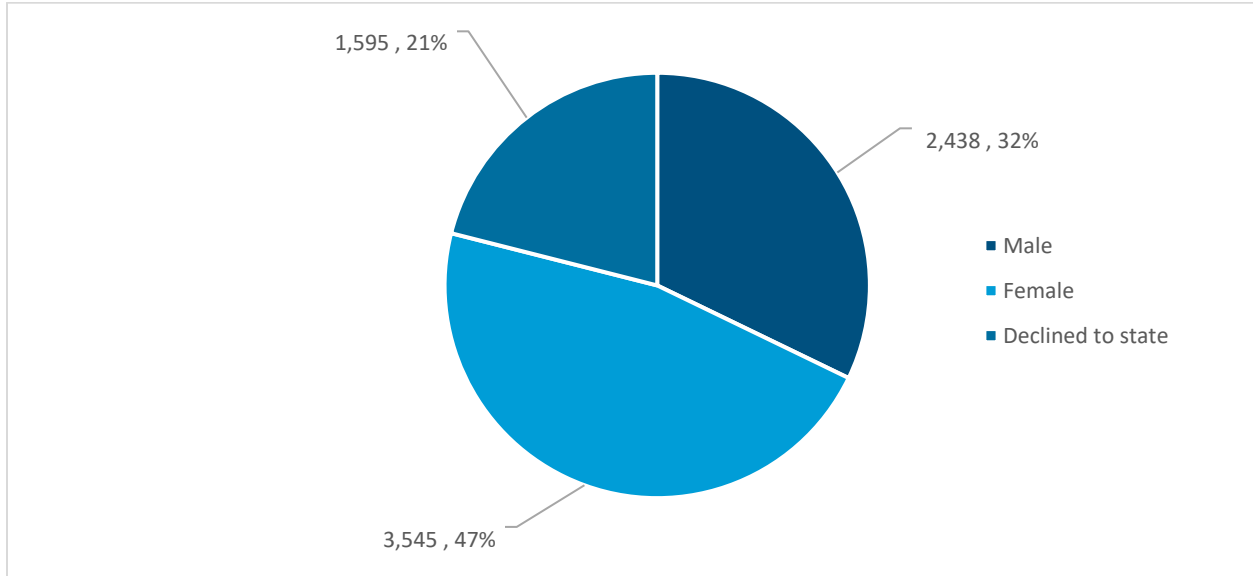
Exhibit 6. Age of Total Outreach Attendees Served by NCOC, FY 2021–2022



Note. Percentages may not sum to 100% because of rounding. The denominator for age percentage is the sum of all age data reported. 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. The denominator for age percentage is the sum of all age data reported.

Sex at birth: Exhibit 7 shows the sex at birth of attendees across NCOC group and individual outreach events for FY 2021–22. Attendees indicated their sex at birth as female (47%), male (32%), or they declined to state their sex at birth.

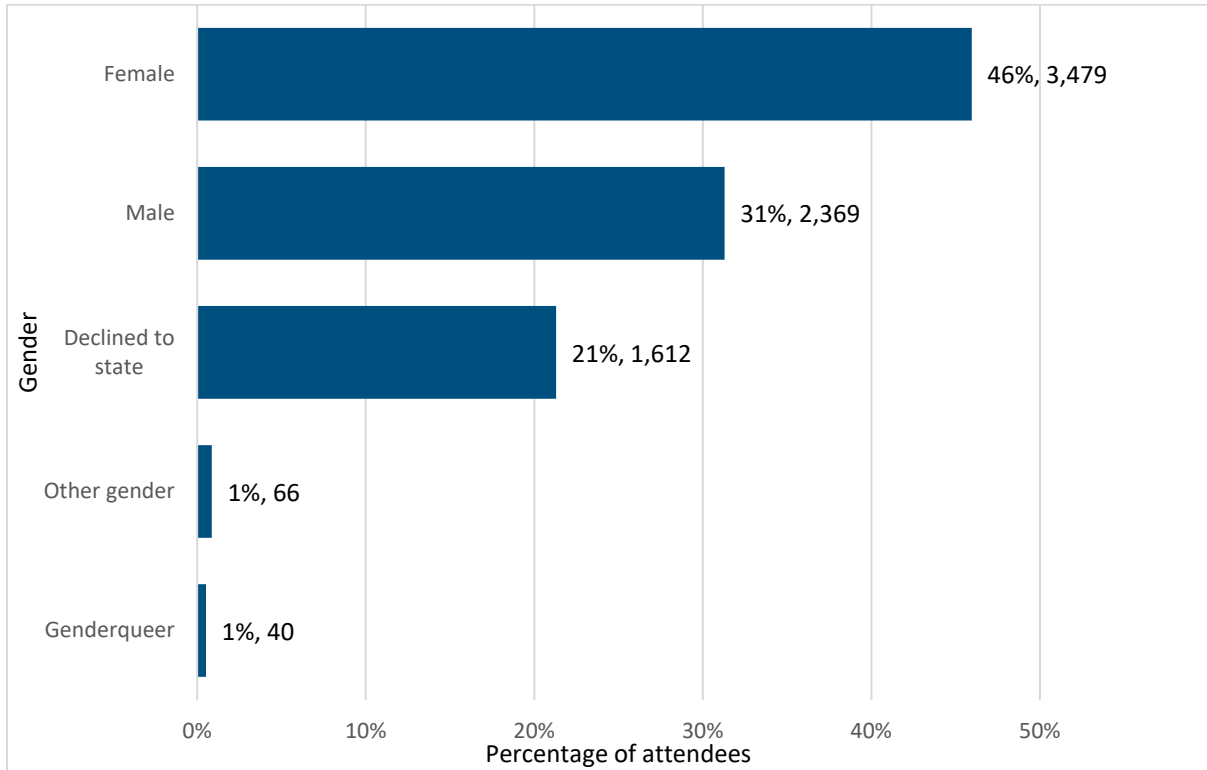
Exhibit 7. Sex at Birth of Outreach Attendees Served By NCOC, FY 2021–2022



Note. 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. The denominator for sex percentage is the sum of all sex data reported.

Gender: Exhibit 8 shows the gender of attendees across NCOC group and individual outreach events for FY 2021–22. Attendees identified themselves as female (46%), male (31%), other gender (1%), or genderqueer (1%). Twenty-one percent declined to state their gender.

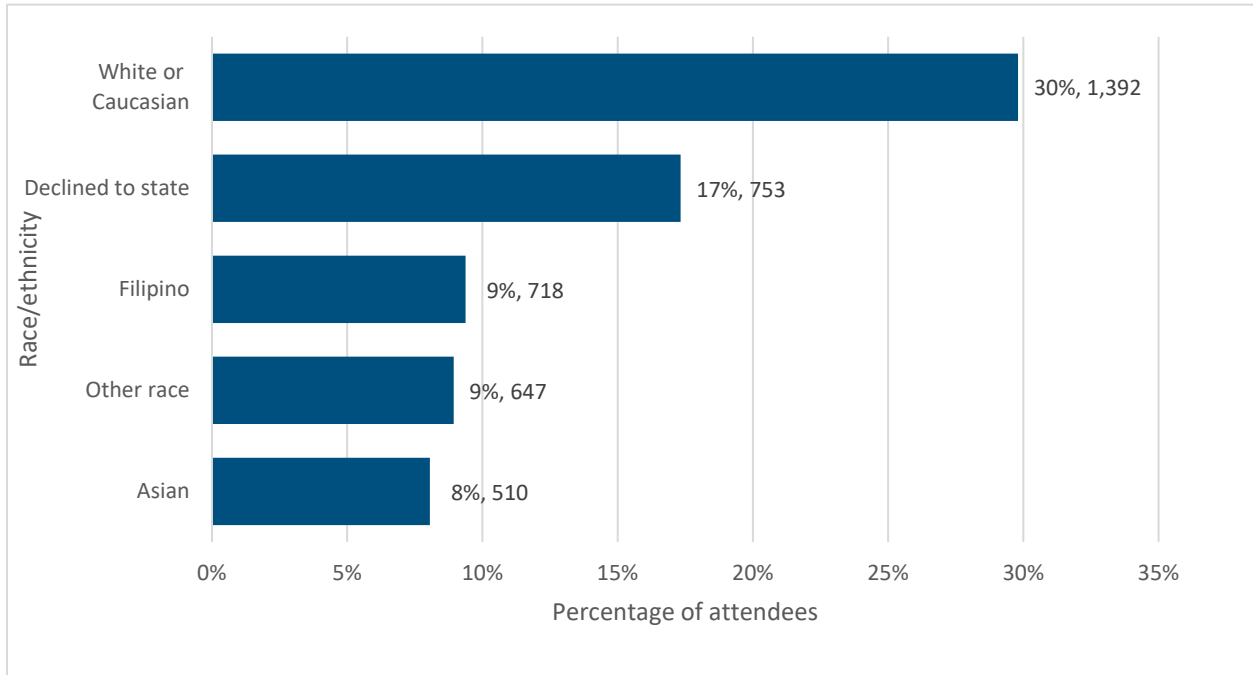
Exhibit 8. Gender of Outreach Attendees Served By NCOC, FY 2021–2022



Note. Percentages may not sum to 100% because of rounding. The total count for gender may exceed the total number of attendees because some providers may have reported individuals in two or more gender groups, leading to extra counts in some cases. The denominator for gender percentage is the sum of all gender data reported.

Race and ethnicity: In FY 2021–2022, the three largest racial/ethnic groups represented by all NCOC attendees were White (30%), Filipino (9%), and Asian (8%). Nine percent of the attendees were Other race and ethnicity, and 17% declined to state their race. See **Exhibit 9** for the number and percentage of attendees representing each reported racial/ethnic group.

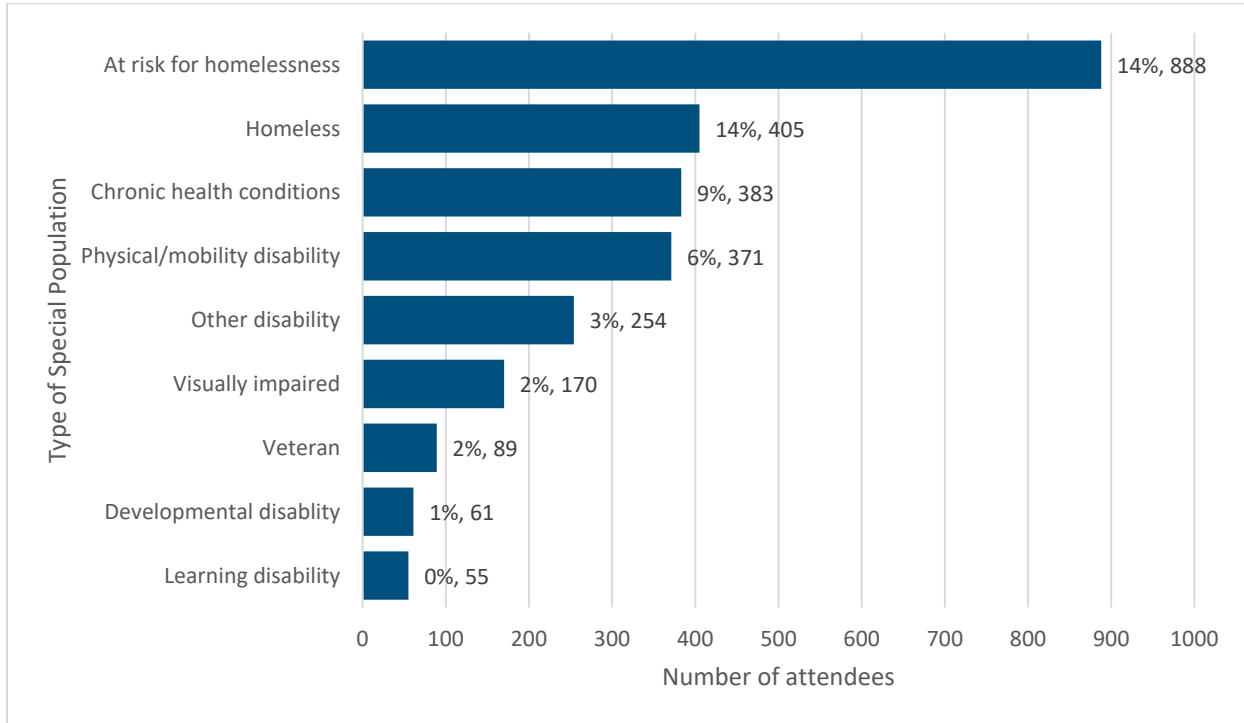
Exhibit 9. Race and Ethnicity of Outreach Attendees Served By NCOC, FY 2021–2022



Note. The denominator for race/ethnicity percentage is the sum of all race/ethnicity data reported. The total count for race/ethnicity may exceed the total number of attendees because some providers may have reported individuals in two or more racial/ethnic groups, leading to extra counts in some cases. The denominator for race/ethnicity percentage is the sum of all race/ethnicity data reported.

Special populations: Of the attendees indicating they were part of special populations, 33% were at risk for homelessness, 15% were homeless, 14% had chronic health conditions, 14% had a physical/mobility disability, 9% had other disabilities, 6% were visually impaired, 3% were veterans, 2% percent had a developmental disability, and 2% had a learning disability. Refer to **Exhibit 10** for the number and percentage of attendees representing each special population in FY 2021–2022.

Exhibit 10. Special Populations Served By NCOC, FY 2021–2022



Note. Attendees could be included in more than one special population. Percentages may not sum to 100% because of rounding. The denominator for special population group is the sum of all special population data reported.

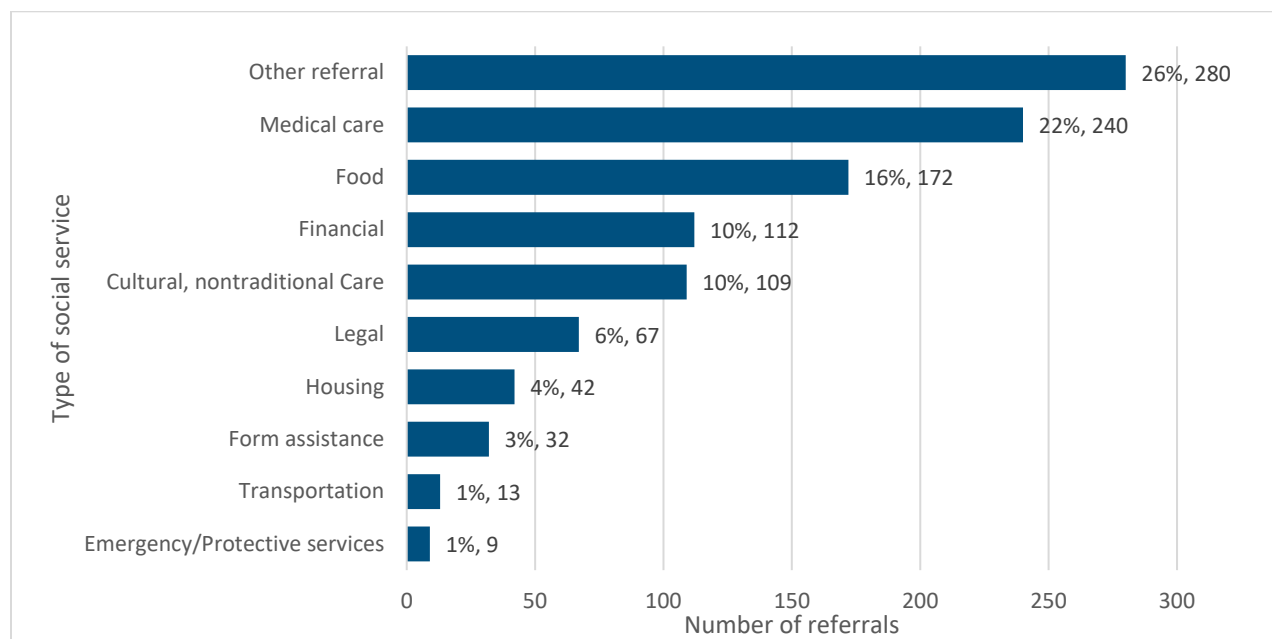
Additional Outreach Characteristics (Individual Outreach Events Only)

Previous contact: One in every three individual outreach events (33%) were conducted with attendees who had attended an outreach event previously.

Mental health/substance use referrals: NCOC individual outreach events resulted in mental health referrals (21%) and substance use referrals (4%) in FY 2021–2022.

Referrals to social services: Providers made 1,081 referrals for 443 NCOC individual outreach attendees. The top four types of referrals made for attendees were “other” category (26%), medical care (22%), food (10%), and financial services (10%). Participants also obtained referrals for cultural, nontraditional care as well as legal assistance and housing assistance. About 1% were referred to transportation or emergency/protective services. **Exhibit 11** summarizes the number and percentage of attendees receiving a given type of referral in FY 2021–2022.

Exhibit 11. Referrals to Social Services, FY 2021–2022



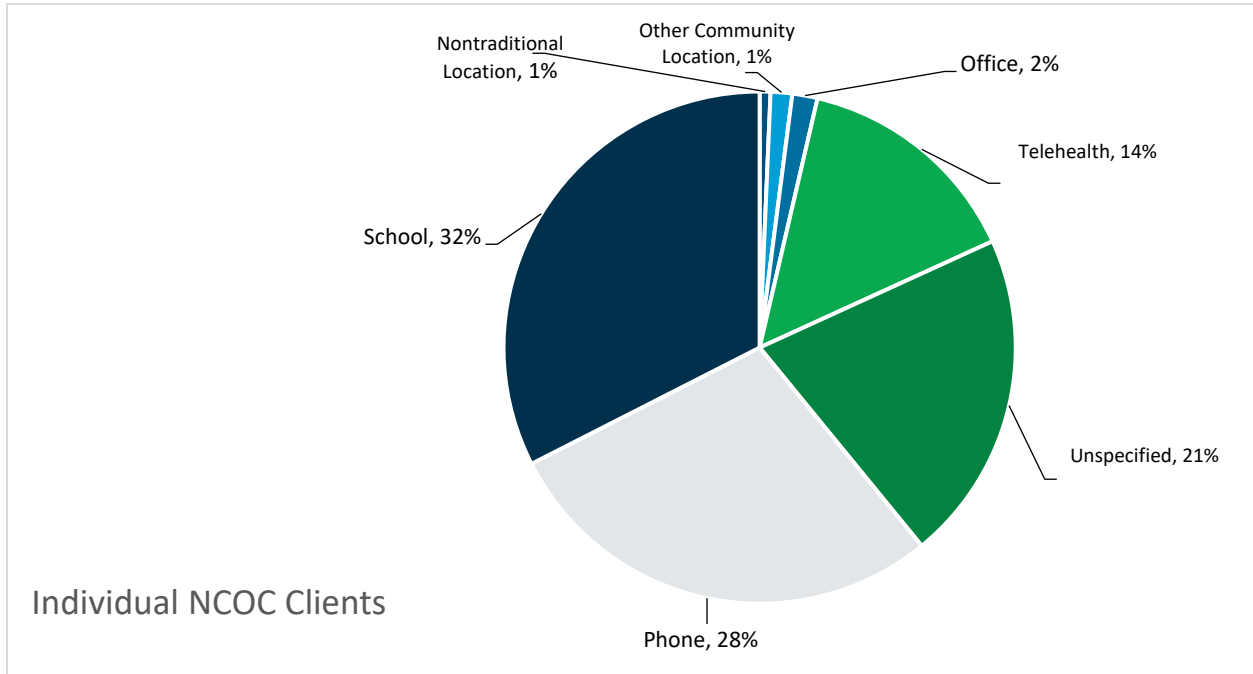
Note. Percentages may not sum to 100% because of rounding. Attendees could choose more than one category. The denominator for referral group is the sum of all referral data reported. Other referrals include services related to COVID-19 testing and vaccinations, the Home Energy Assistance Program (HEAP), and mental health services.

Event Characteristics

Location: Exhibits 12 and 13 present the locations for individual and group outreach events in FY 2021–2022. NCOC individual outreach events occurred primarily at school (32%) or over the phone (8%) in FY 2021–2022. Group outreach events occurred primarily at school (54%), at nontraditional locations (6%), via telehealth (28%), and at other community locations (8%). 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

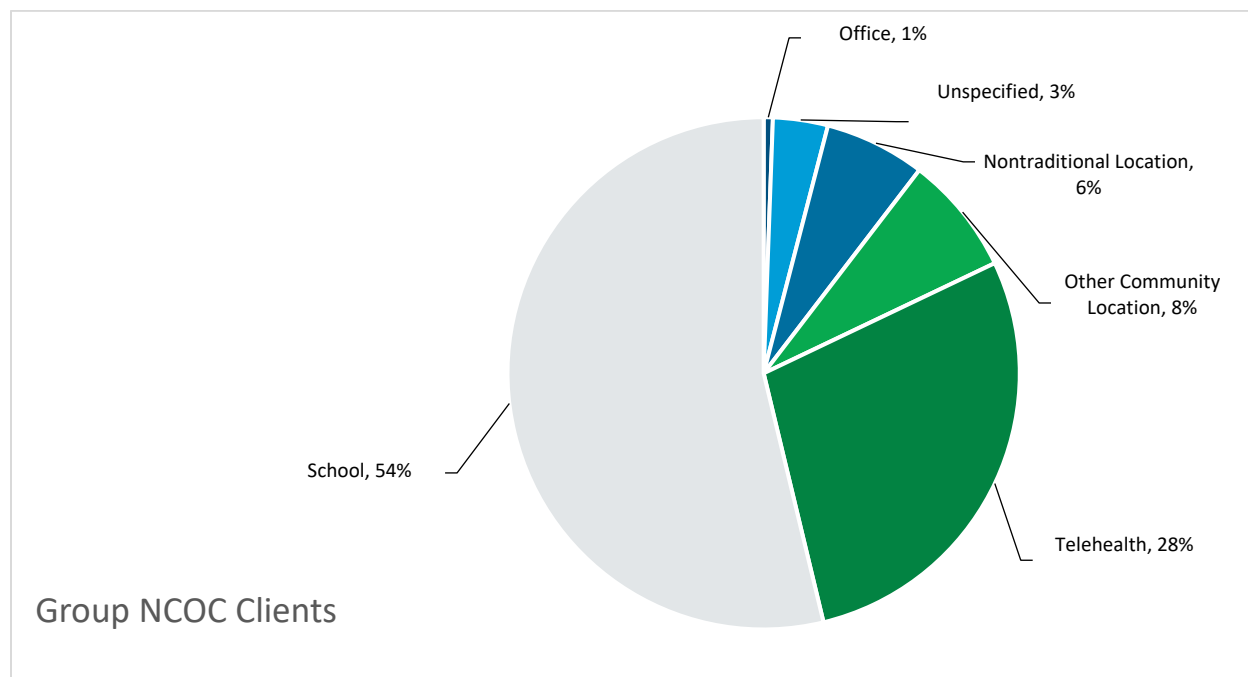
locations” category includes all the locations that were reported that make up less than 10% of the total locations reported.

Exhibit 12. Locations of NCOC Individual Outreach Events, FY 2021–2022



Note. Percentages may not sum to 100% because of rounding.

Exhibit 13. Locations of NCOC Group Outreach Events, FY 2021–2022



Note. Percentages may not sum to 100% because of rounding. Attendees could choose more than one category. The denominator for location percentage is the sum of all location data reported.

Length of contact: For FY 2021–2022, the individual outreach events ranged from 5 to 148 minutes and lasted 35 minutes on average. The average length of NCOC group outreach events ranged from 5 to 371 minutes and lasted 75 minutes on average.

Language used: NCOC individual outreach events were conducted in English (99.5%) and Spanish (0.5%) in FY 2021–2022. NCOC group outreach events were conducted in English (95%) and Spanish (5%) in FY 2021–2022.

Preferred language: Exhibits 14 and 15 present breakdowns of the preferred languages at individual and group outreach events in FY 2021–2022. NCOC individual outreach attendees preferred English (91%), other languages (9%), Tongan (2%), Samoan (2%), Spanish (2%), Cantonese (1%), and Tagalog (1%). NCOC group outreach attendees preferred English (86%), other languages (14%), and Spanish (6%).

Exhibit 14. Preferred Languages of NCOC Individual Outreach Attendees, FY 2021–2022

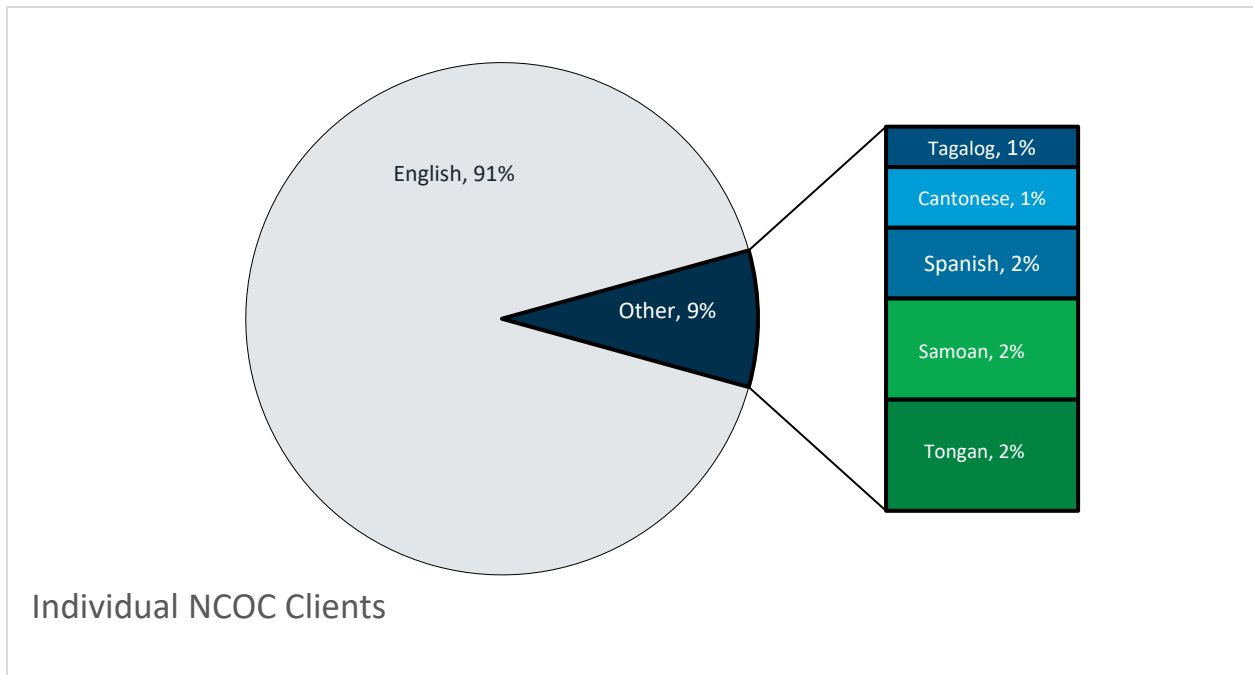
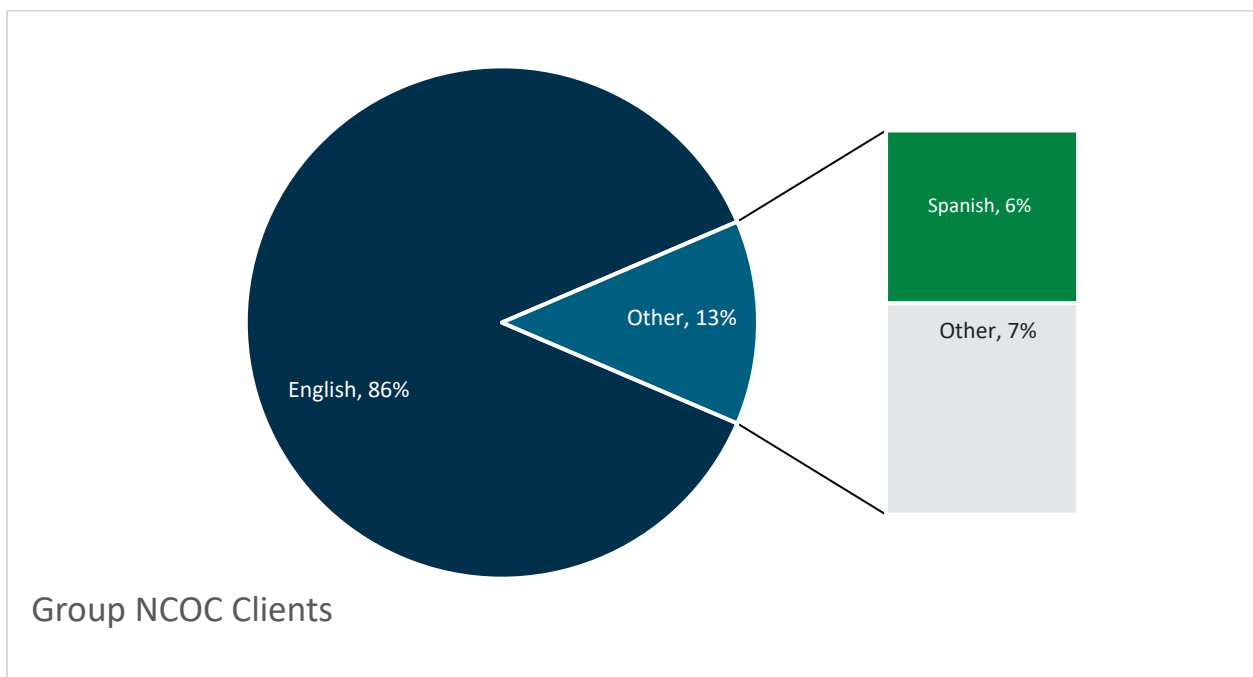


Exhibit 15. Preferred Languages of NCOC Group Outreach Attendees, FY 2021–2022



Note. Percentages may not sum to 100% because of rounding. The denominator for preferred language percentage is the sum of all preferred language data reported.

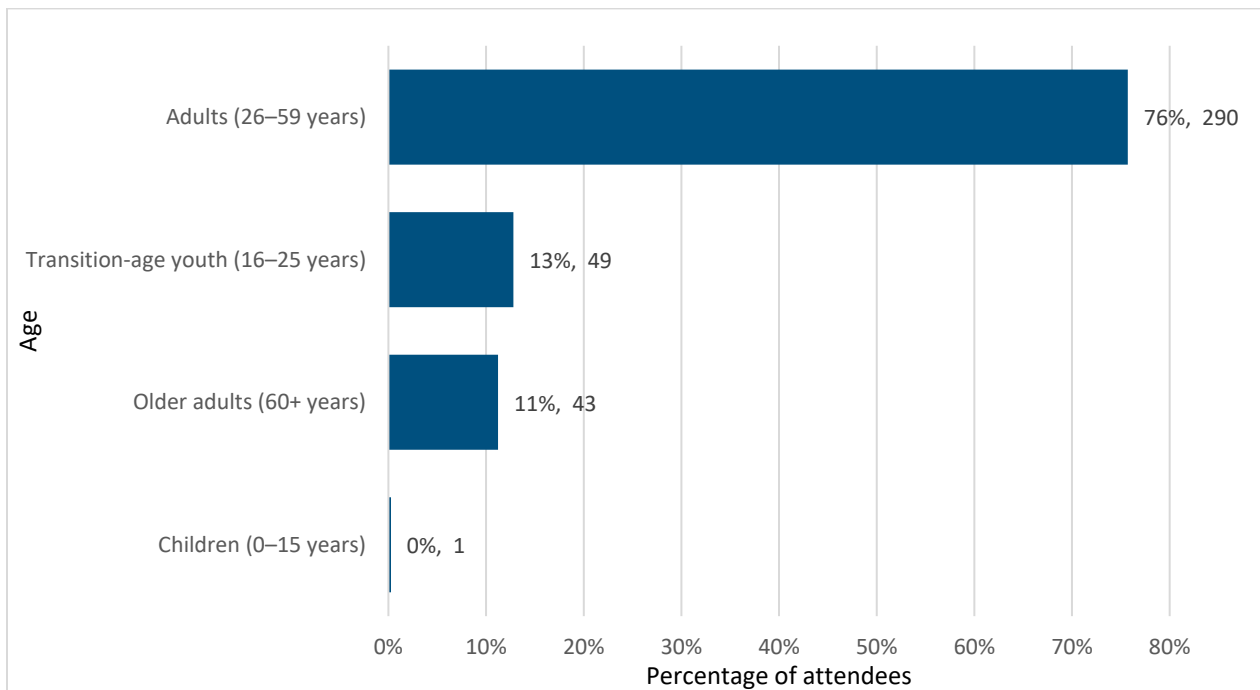
EPAPMHO

This section provides details about 384 attendees at EPAPMHO group and individual outreach events across three provider organizations in FY 2021–2022.

Demographics

Age: Of the EPAPMHO FY 2020–2021 individual and group outreach attendees, 76% were adults (26–59 years of age), 13% were transition-age youth (16–25 years of age), 11% were older adults (60+ years of age and older), and less than 1% were children (0–15 years of age). See **Exhibit 16** for the number and percentage of outreach attendees representing each reported age group.

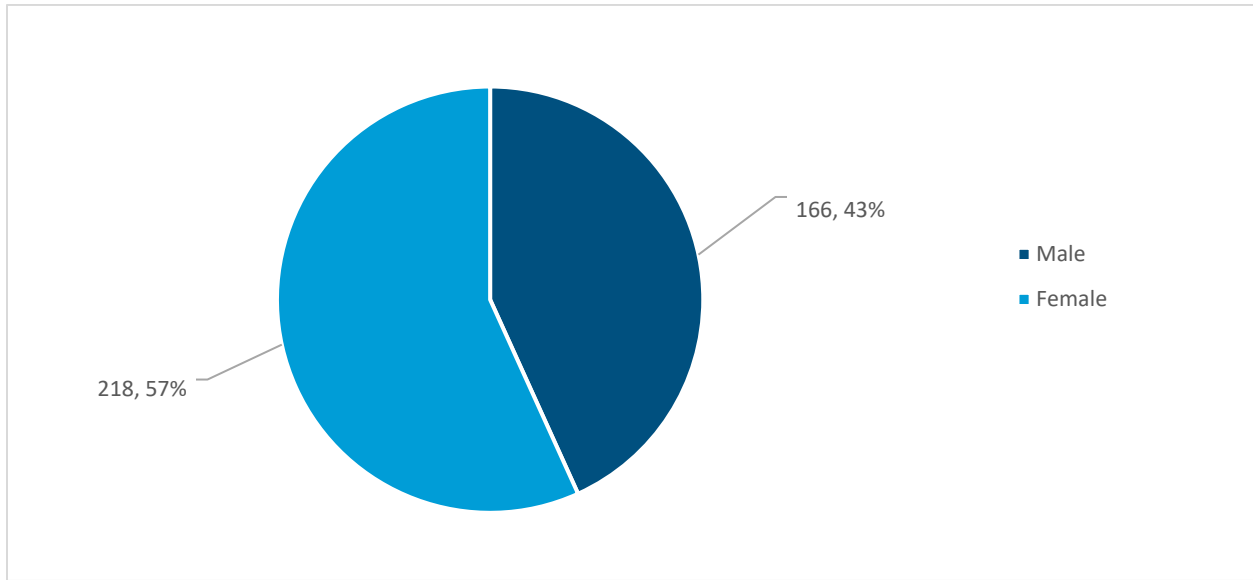
Exhibit 16. Age of Outreach Attendees Served By EPAPMHO, FY 2021–2022



Note. Percentages may not sum to 100% because of rounding. The denominator for age percentage is the sum of all age data reported.

Sex at birth: Attendees across EPAPMHO outreach events indicated their sex at birth as female (57%) or male (43%). See **Exhibit 17** for the number and percentage of outreach attendees reporting sex at birth.

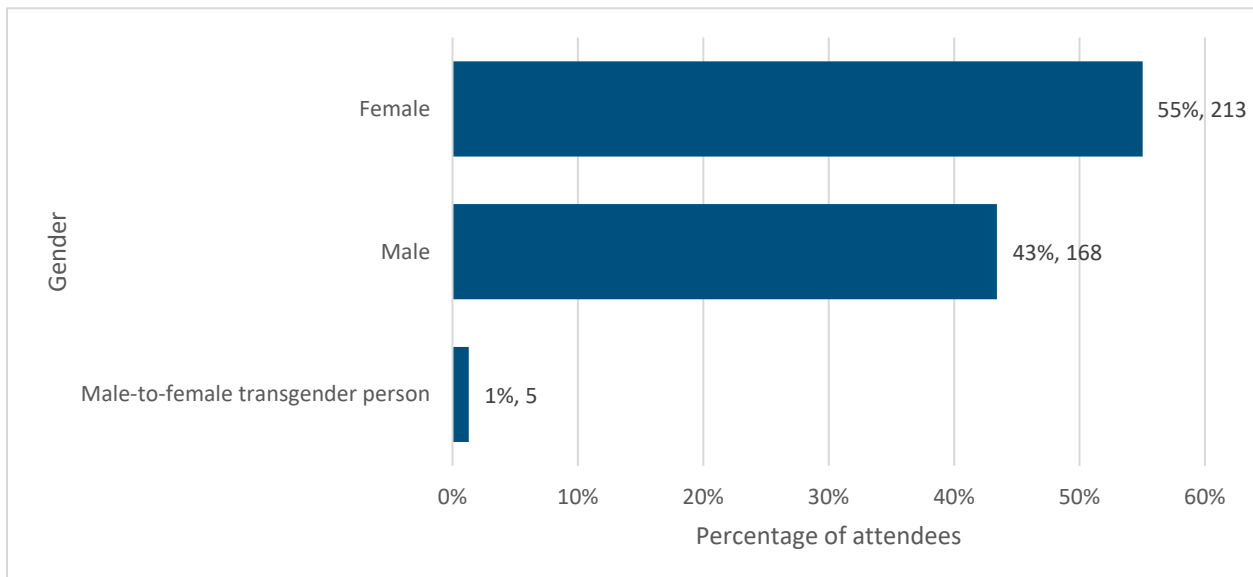
Exhibit 17. Sex at Birth of Outreach Attendees Served By EPAPMHO, FY 2021–2022



Note. Percentages may not sum to 100% percent because of rounding. The denominator for sex percentage is the sum of all sex data reported.

Gender: Attendees across EPAPMHO individual and group outreach events identified themselves primarily as female (55%), male (43%), or male-to-female transgender person (1%). See **Exhibit 18** for the number and percentage of individual and group outreach attendees representing each reported gender.

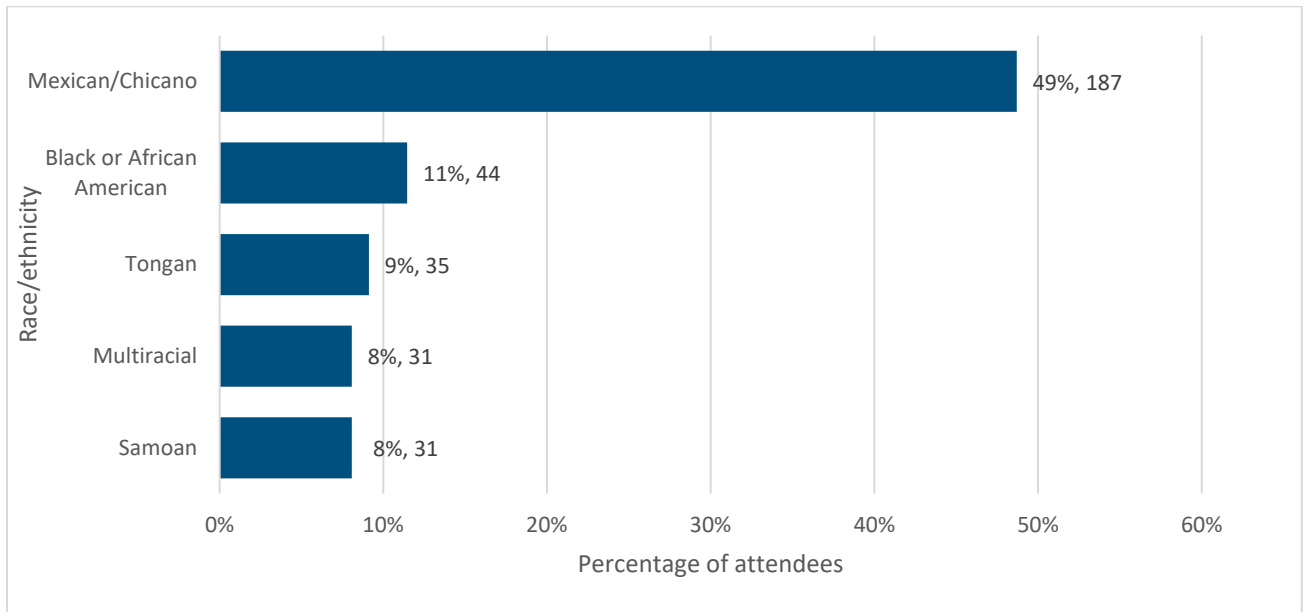
Exhibit 18. Gender of Outreach Attendees Served By EPAPMHO, FY 2021–2022



Note. Percentages may not sum to 100% because of rounding. The total count for gender may exceed the total number of attendees because some providers may have reported individuals in two or more gender groups, leading to extra counts in some cases. The denominator for gender percentage is the sum of all gender data reported.

Race and ethnicity: In FY 2021–2022, the four largest racial/ethnic groups represented by all EPAPMHO attendees were Mexican (49%), African American (11%), Tongan (9%), and Samoan (8%). Eight percent of the attendees were multiracial. See **Exhibit 19** for the number and percentage of attendees representing each reported racial/ethnic group.

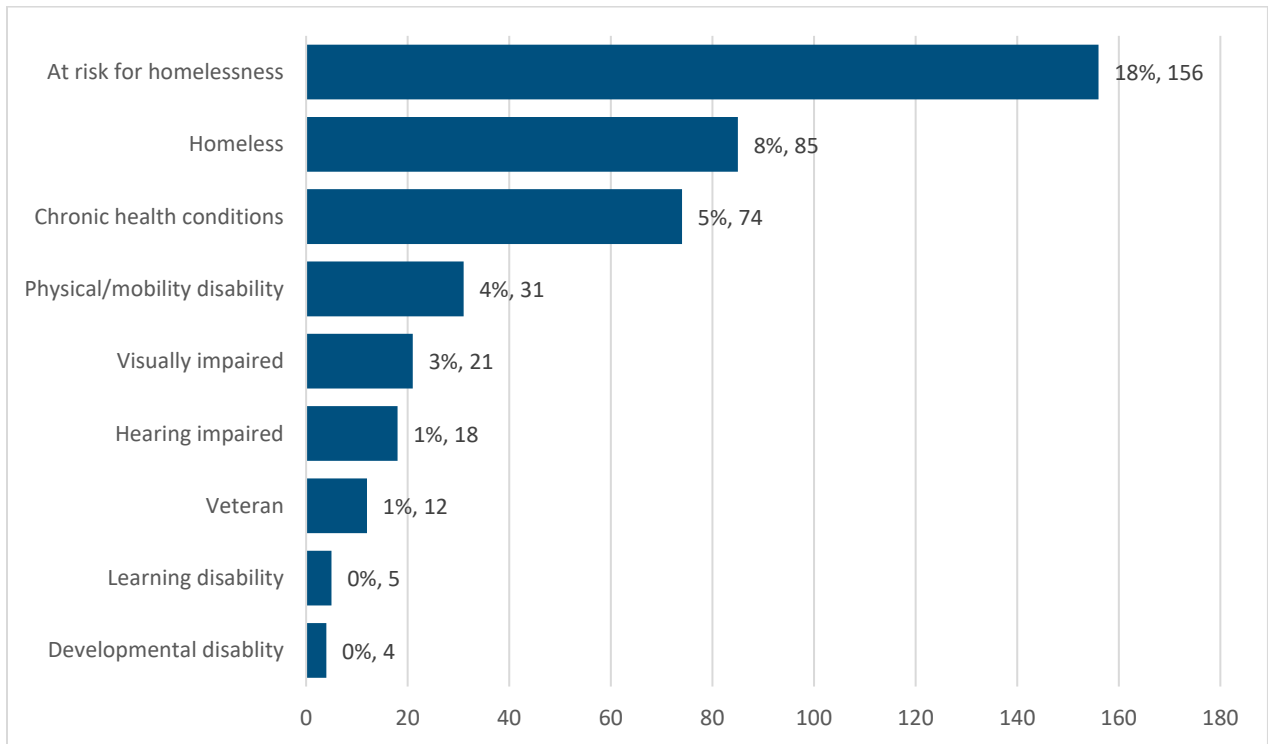
Exhibit 19. Race and Ethnicity of Outreach Attendees Served By EPAPMHO, FY 2021–2022



Note. 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/ethnicities, leading to extra counts in some cases. The denominator for race/ethnicity percentage is the sum of all race/ethnicity data reported.

Special populations: Of the special populations, 38% were at risk for homelessness, 21% were homeless, 18% had chronic health conditions, 8% had a physical/mobility disability, 5% were visually impaired, 4% were hearing impaired, 3% were veterans, 1% had a learning disability, and 1% had a developmental disability. Refer to **Exhibit 20** for the number and percentage of attendees representing each special population in FY 2021–2022.

Exhibit 20. Special Populations Served by EPAPMHO, FY 2021–2022



Note. Attendees could be included in more than one special population. The denominator for special population group is the sum of all special population data reported.

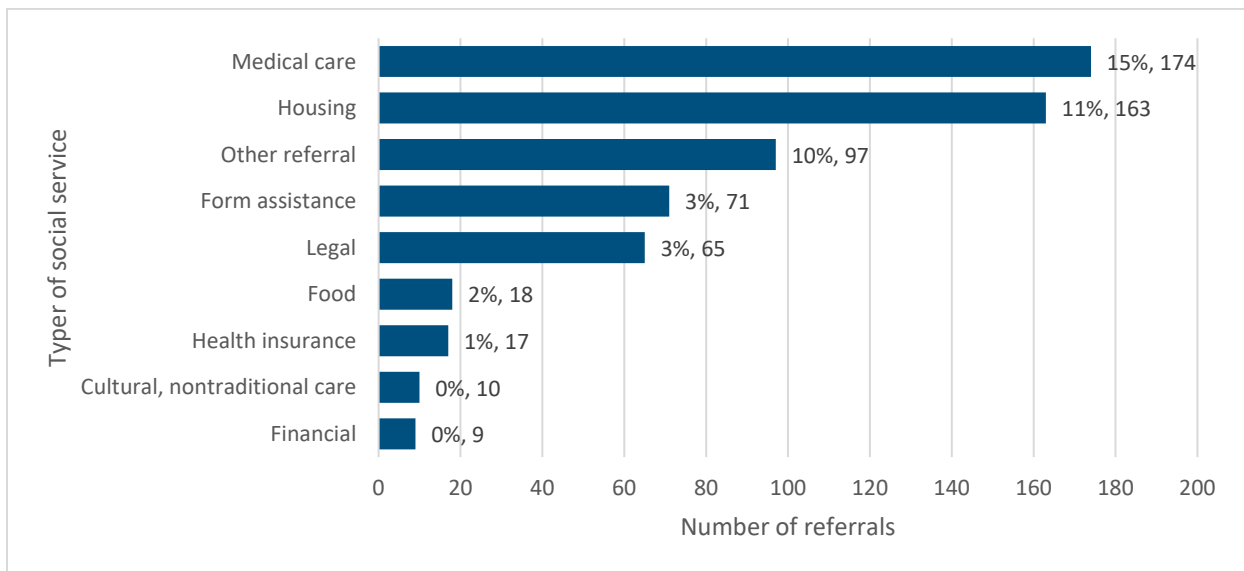
Additional Outreach Characteristics (Individual Outreach Events Only)

Previous contact: Seventeen percent of individual outreach events were conducted with attendees who had a previous outreach contact with EPAPMHO.

Mental health/substance use referrals: EPAPMHO individual outreach events resulted in mental health referrals (26%) and substance use referrals (37%) in FY 2021–2022.

Referrals to social services: Providers made 627 referrals to 374 EPAPMHO individual outreach attendees. The top four types of referrals made for attendees were for medical care (15%), housing (11%), other referrals (10%), and form assistance (3%). **Exhibit 21** summarizes the number and percentage of attendees receiving a given type of referral.

Exhibit 21. Referrals to Social Services, FY 2021–2022

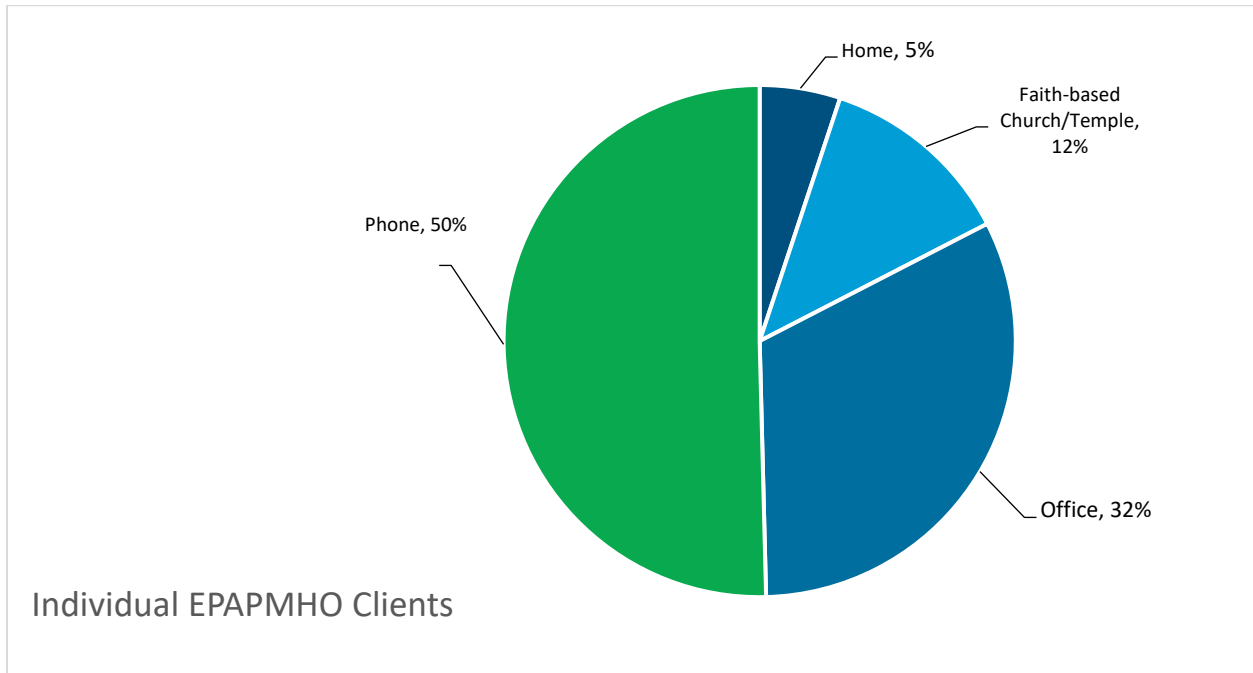


Note. Percentages may not sum to 100% because of rounding. Attendees could choose more than one category. The denominator for referral group is the sum of all referral data reported.

Event Characteristics

Location: EPAPMHO individual outreach events occurred over the phone (50%), in offices (32%), at faith-based churches/temples (12%), or at home (5%). **Exhibit 22** presents individual outreach event locations. The only EPAPMHO group outreach event occurred in an office.

Exhibit 22. Location of EPAPMHO Individual Outreach Events, FY 2021–2022



Length of contact: In FY 2021–2022, the individual outreach events lasted from 10 to 30 minutes and averaged 16 minutes. The only group outreach events lasted 30 minutes.

Language used: EPAPMHO individual outreach events were conducted in Spanish (59%), English (27%), Tongan (7%), and Samoan (6%). The single group outreach event was conducted in Tongan.

Preferred language: EPAPMHO individual outreach attendees preferred Spanish (60%), English (26%), other languages (14%), Tongan (7%), and Samoan (6%). Attendees at the EPAPMHO group outreach events preferred Tongan (50%) and Samoan (50%). **Exhibits 23 and 24** present breakdowns of preferred languages at individual and group outreach events in FY 2021–2022.

Exhibit 23. Preferred Languages of EPAPMHO Individual Outreach Attendees, FY 2021–2022

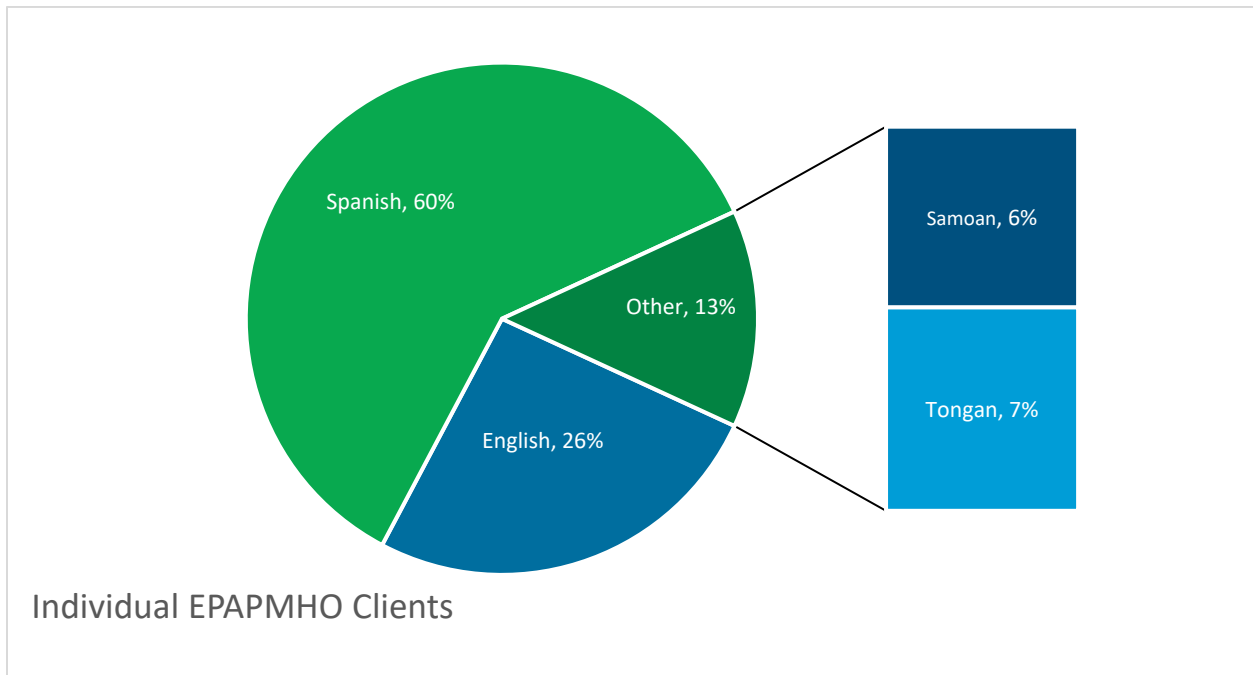
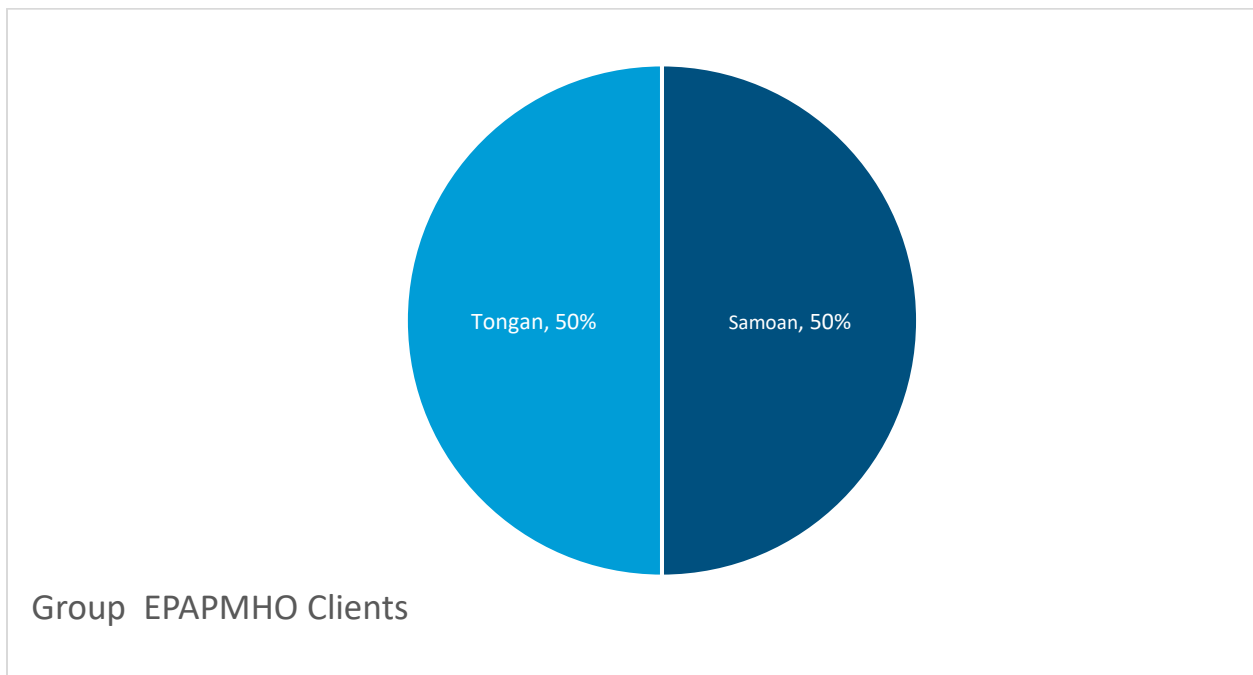


Exhibit 24. Preferred Languages of EPAPMHO Group Outreach Attendees, FY 2021–2022



Appendix A. FY 2021–2022 Outreach, Anamatangi Polynesian Voices

For FY 2021–2022, Anamatangi Polynesian Voices reported 55 outreach events, which included 54 individual events and 1 group event. There were 64 attendees, and all individual and group events lasted 30 minutes.

Outreach events

- Most frequently took place in an office (**47.3%**; $n = 26$). Other locations for events and their respective percentages are shown in **Exhibit A1**.
- Were conducted in Tongan (49.1%; $n = 27$), Samoan (43.6%; $n = 24$), and English (7.3%; $n = 4$).
- Resulted in 52 mental health referrals and 1 substance use referral.
- Resulted in 75 social services referrals. (See Exhibit A2.) An individual outreach event can have more than one referral, so the total number of other referrals exceeds the number of outreach events. Referrals were made primarily to legal (42.7%; $n = 32$); form assistance (16.0%, $n = 12$); cultural, nontraditional care (13.3%, $n = 10$); and food (9.3%; $n = 7$) services.

Exhibit A1. Locations of Anamatangi Polynesian Voices Outreach Events, FY 2021–2022

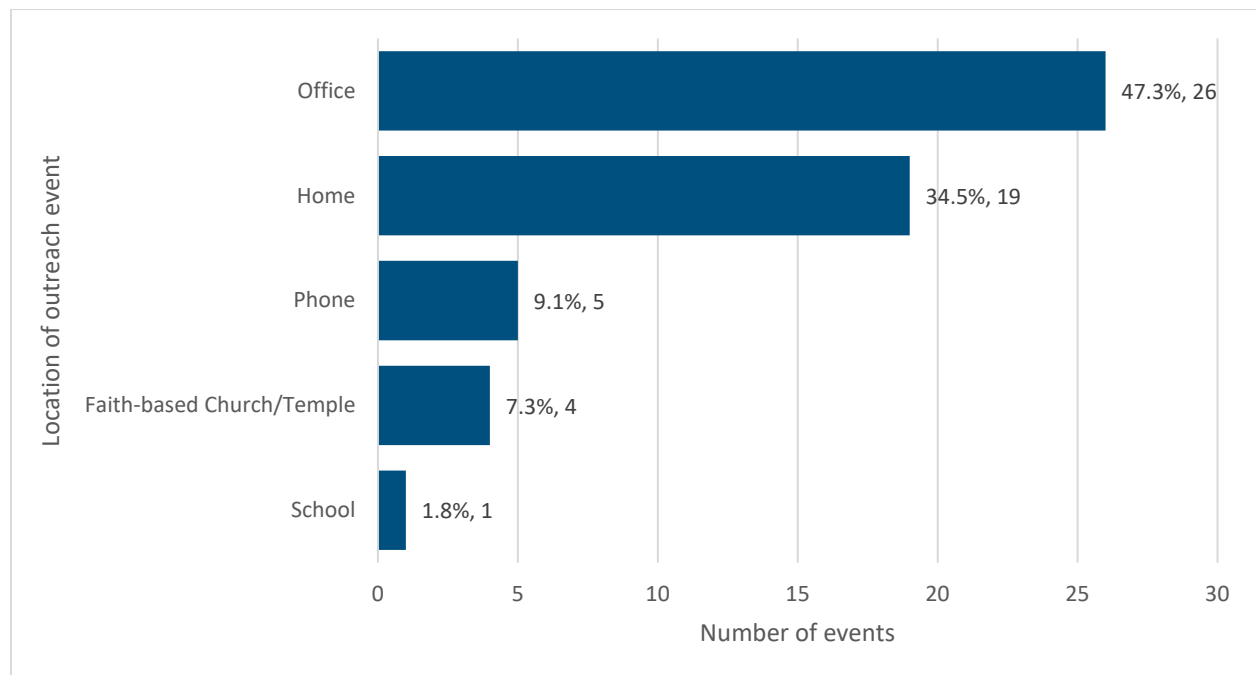
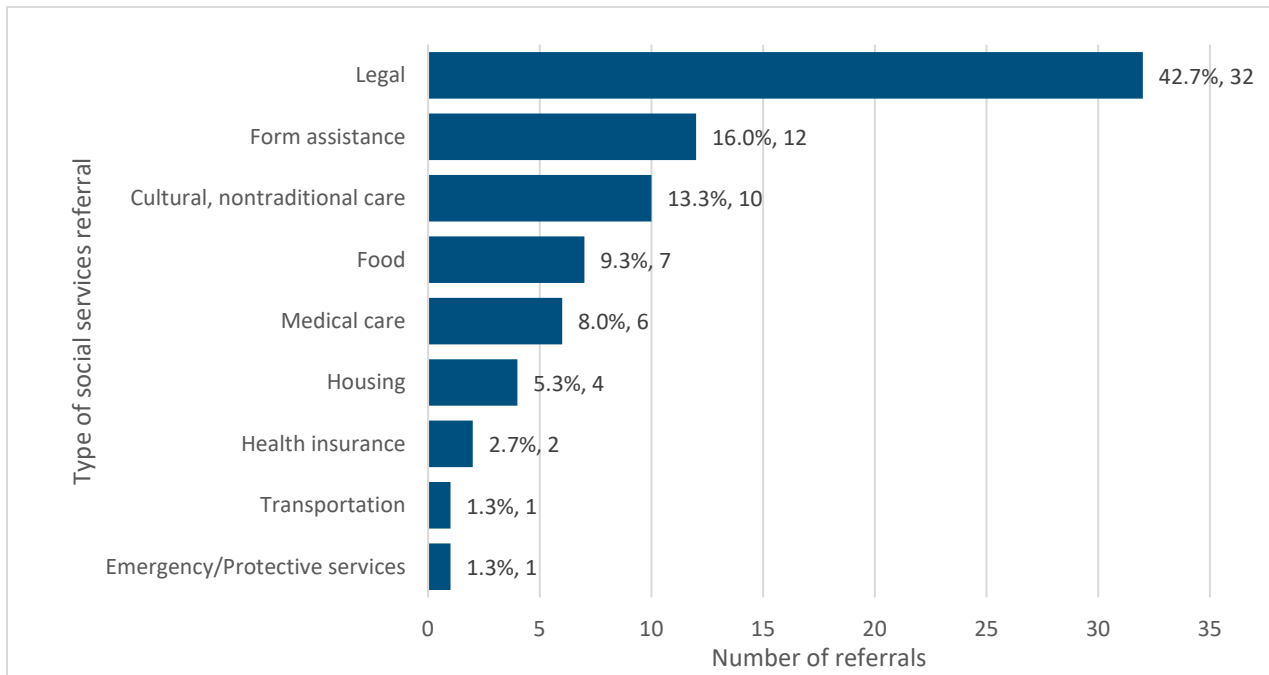


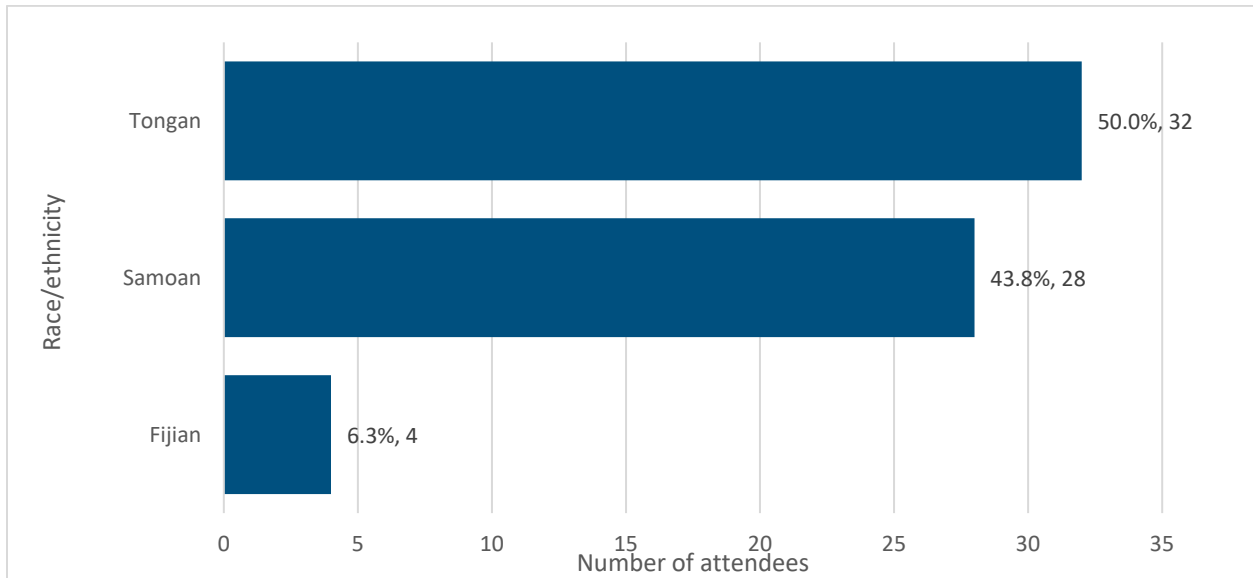
Exhibit A2. Anamatangi Polynesian Voices Social Services Referrals, FY 2021–2022



Outreach event attendees

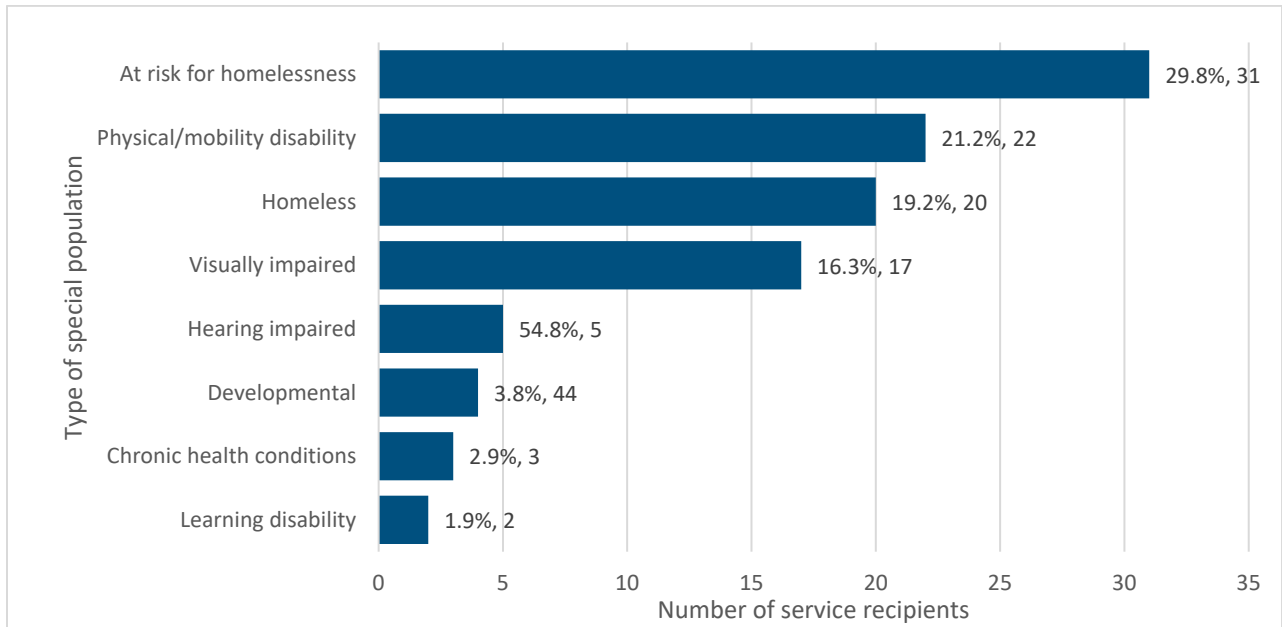
- Were male (60.9%; $n = 39$); 39% were female (39.1%, $n = 25$).
- Identified their gender as male (60.0%; $n = 39$); 39% identified as female (40.0%; $n = 26$).
- Identified as heterosexual (96.9%; $n = 62$), or gay/lesbian (3.1%; $n = 2$).
- Included adults (26–59 years of age; 55.6%; $n = 35$), older adults (60 years of age and older; 27.0%; $n = 17$), and transition-age youth (16–25 years of age; 17.5%; $n = 11$).
- Were primarily Tongan (50.0%, $n = 32$) or Samoan (43.8%; $n = 28$). (See Exhibit A3.)

Exhibit A3. Anamatangi Polynesian Voices Attendees by Top Racial/Ethnic Category, FY 2021–2022



In FY 2021–2022, Anamatangi Polynesian Voices attendees reported being in special populations groups. Out of the service recipients in the special population groups, **29.8%** were at risk for homelessness, **21.2%** had a mobility disability, and **19.2%** were homeless. (See **Exhibit A4.**) They also reported being visually impaired or hearing impaired, having a developmental disability or chronic health conditions, and having a learning disability.

Exhibit A4. Anamatangi Polynesian Voices Service Recipients by Special Population, FY 2021–2022



Appendix B. FY 2021–2022 Outreach, Asian American Recovery Services (AARS)

For FY 2021–2022, Asian American Recovery Services (AARS) reported 206 outreach events, which included 191 individual events and 15 group events. There were 547 attendees. Individual outreach events lasted from 5 to 120 minutes and lasted 29 minutes on average. The group outreach events lasted from 30 to 120 minutes and lasted on average 76 minutes.

Outreach events

- Were most often held over the phone (**42.7%**, $n = 88$). Other locations of events and their respective percentages are shown in **Exhibit B1**.
- Were conducted in English (100%; $n = 206$).
- Resulted in 66 mental health referrals and 19 substance use referrals at the individual outreach events.
- Resulted in 795 social services referrals (**Exhibit B2**). An individual outreach event can have more than one referral, so the total number of other referrals exceeds the number of outreach events. Referrals were made to other services primarily including COVID-19 testing (23.3%; $n = 185$); food (18.1%; $n = 144$); medical care (17.5%; $n = 139$); cultural, nontraditional care (13.7%; $n = 109$); and financial (12.7%; $n = 101$) services.

Exhibit B1. Locations of AARS Outreach Events, Fiscal Year 2021–2022

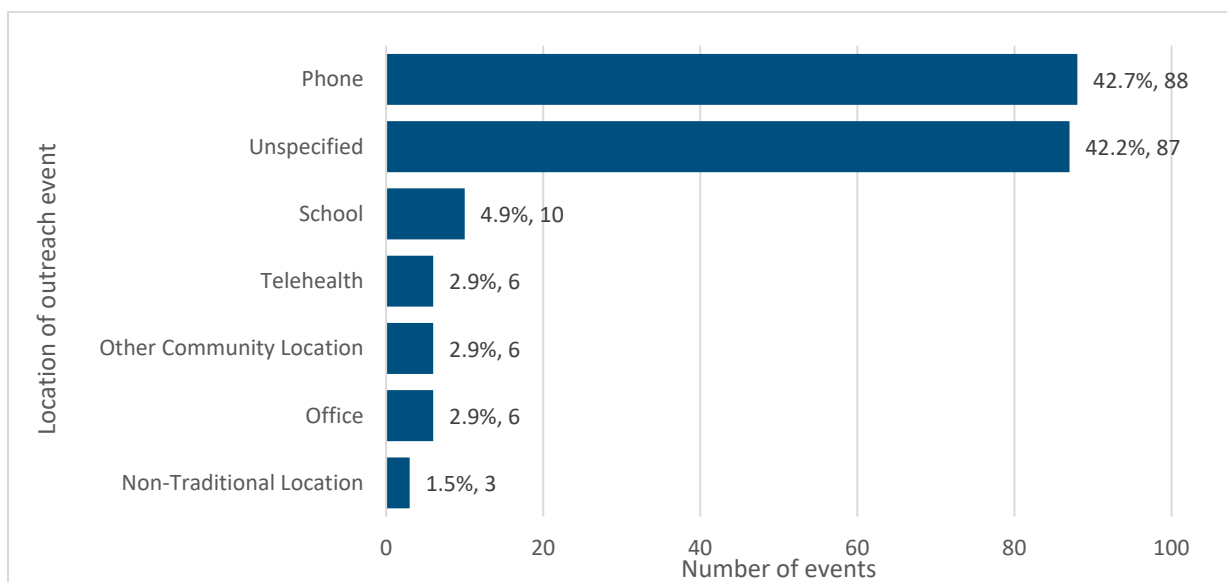
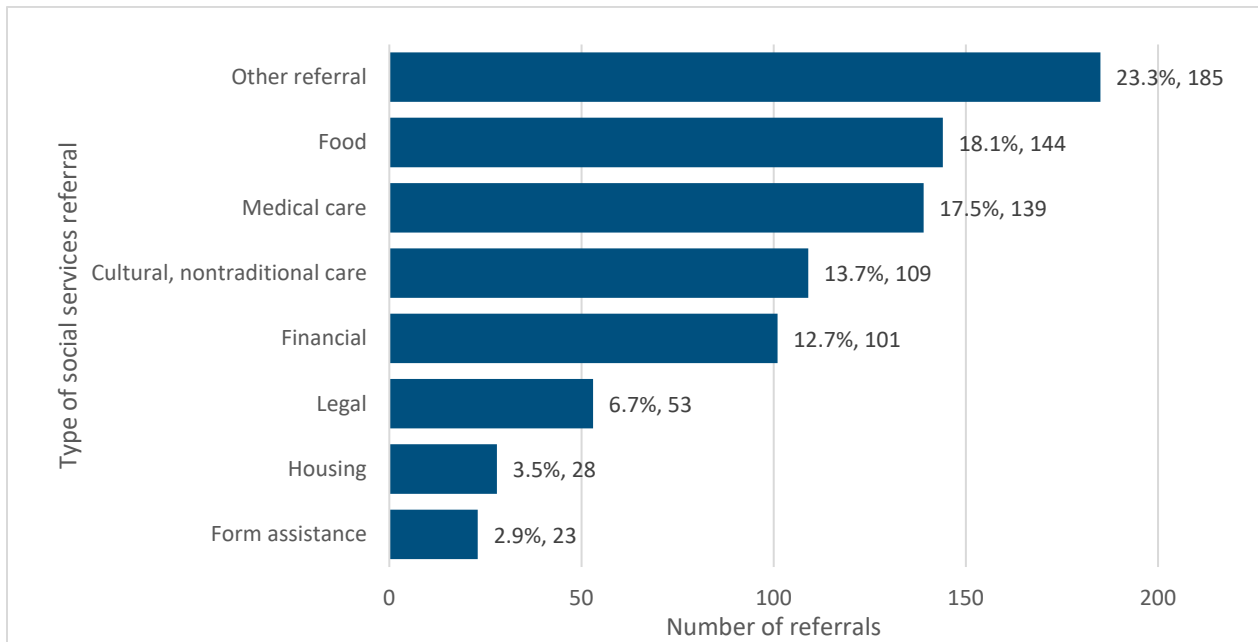


Exhibit B2. AARS Social Services Referrals, FY 2021–2022

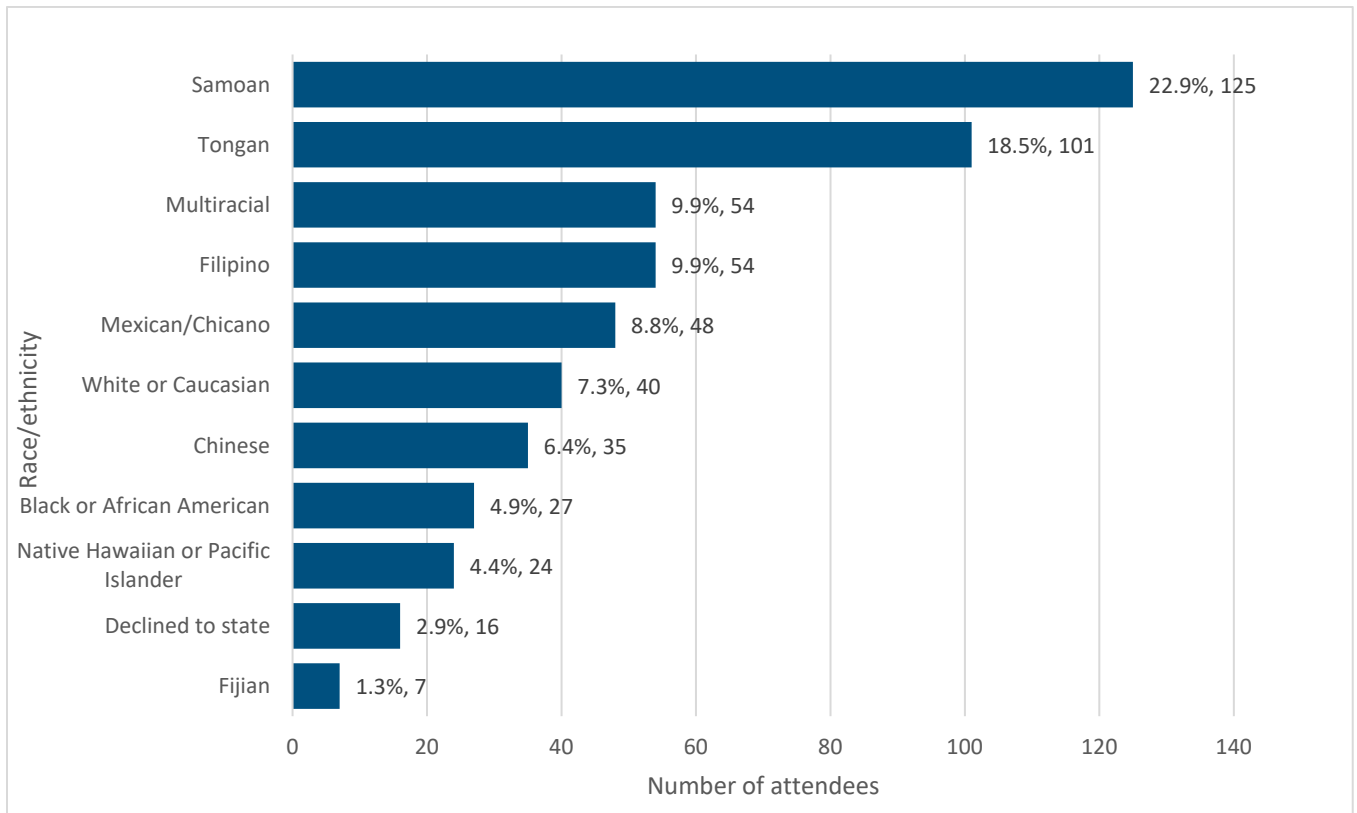


Note. Other referrals include services related to COVID-19 testing and vaccinations, the Home Energy Assistance Program (HEAP), and mental health services.

Outreach event attendees

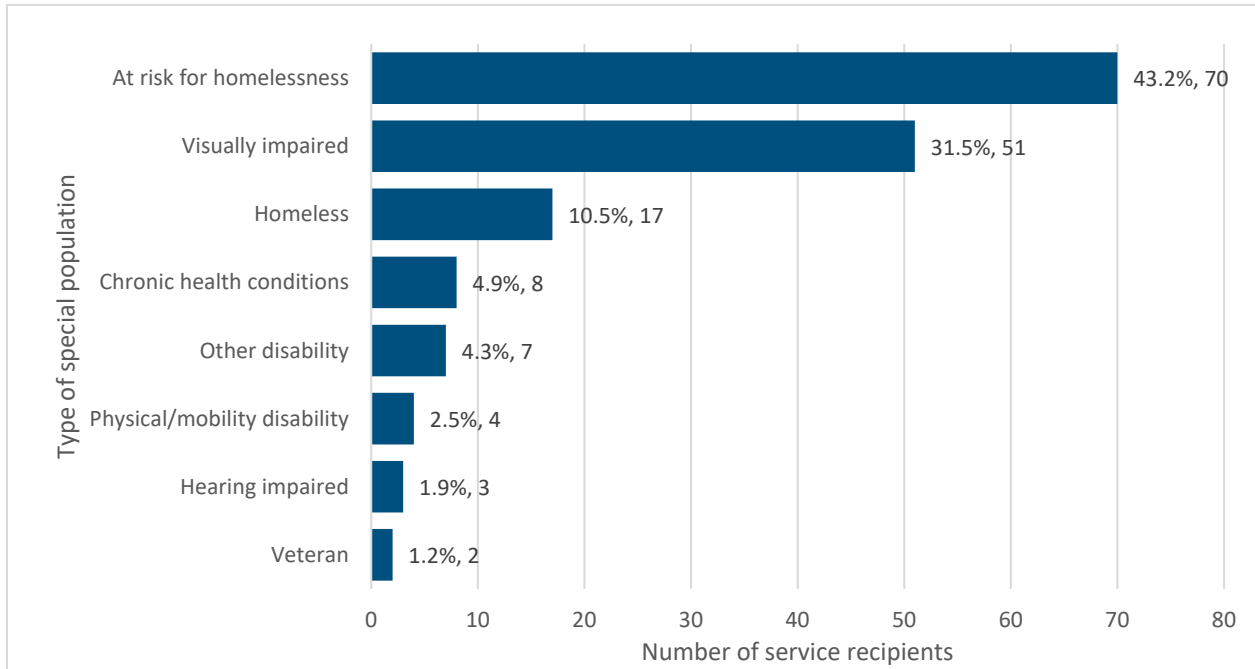
- Were female (**66.9%**; $n = 366$). Thirty percent were male (**30.2%**; $n = 165$). Close to 3% declined to report their sex at birth (**2.7%**; $n = 15$).
- Identified their gender as female (**64.1%**; $n = 350$), male (**27.8%**; $n = 152$); female-to-male transgender (**0.2%**; $n = 1$); and male-to-female transgender (**0.2%**; $n = 1$). Forty-two attendees declined to state their gender (**7.7%**).
- Identified as heterosexual (**66.9%**; $n = 366$), bisexual (**3.7%**; $n = 20$), gay/lesbian (**2.0%**; $n = 11$), queer (**1.8%**; $n = 10$), questioning orientation (**0.7%**; $n = 4$); or pansexual (**0.2%**; $n = 1$). The remaining attendees declined to state their sexual orientation (**24.7%**; $n = 135$).
- Included adults (26–59 years of age; **48.3%**; $n = 263$), children (15 years of age and younger; **22.8%**; $n = 124$), transition-age youth (16–25 years of age; **21.7%**; $n = 118$), older adults (60 years of age and older; **2.8%**; $n = 15$), and unknown age (**4.6%**; $n = 25$).
- Were primarily Samoan (**22.9%**; $n = 125$), Tongan (**18.5%**; $n = 101$), and more than one race (**9.9%**; $n = 54$). (See **Exhibit B3.**)

Exhibit B3. AARS Attendees by Top Racial/Ethnic Category, FY 2021–2022



In FY 2021–2022, AARS attendees reported being in special populations groups. Out of the recipients in the special population groups, **43.2%** were at risk for homelessness, **31.5%** were visually impaired, and **10.5%** were homeless (See **Exhibit B4.**) They also reported having other chronic health conditions, other disabilities, or a physical/mobility disability; being hearing impaired; or being a veteran.

Exhibit B4. AARS Service Recipients by Special Population, FY 2021–2022



Appendix C. FY 2021–2022 Outreach, Daly City Peninsula Partnership Collaborative

For FY 2021–2022, Daly City Peninsula Partnership Collaborative reported 143 outreach events, including 110 individual events and 33 group events. There were 858 attendees at these vents. Individual outreach events lasted 45 minutes on average. The group outreach events lasted from 30 to 270 minutes and lasted 85 minutes on average.

Outreach events

- Took place via telehealth most often (**62.2%**; $n = 89$). Other locations of events and their respective percentages are shown in **Exhibit C1**.
- Were conducted in English (**100%**; $n = 143$).
- Resulted in nine mental health referrals and no substance use referrals at the individual outreach events.
- Resulted in 241 social services referrals (**Exhibit C2**). An individual outreach event can have more than one referral, so the total number of other referrals exceeds the number of outreach events. Referrals were primarily made to medical care (**41.1%**; $n = 99$), other referrals (**37.3%**; $n = 90$), food (**6.2%**; $n = 15$), and legal services (**5.8%**; $n = 14$).

Exhibit C1. Locations of Daly City Peninsula Partnership Collaborative Outreach Events, FY 2021–2022

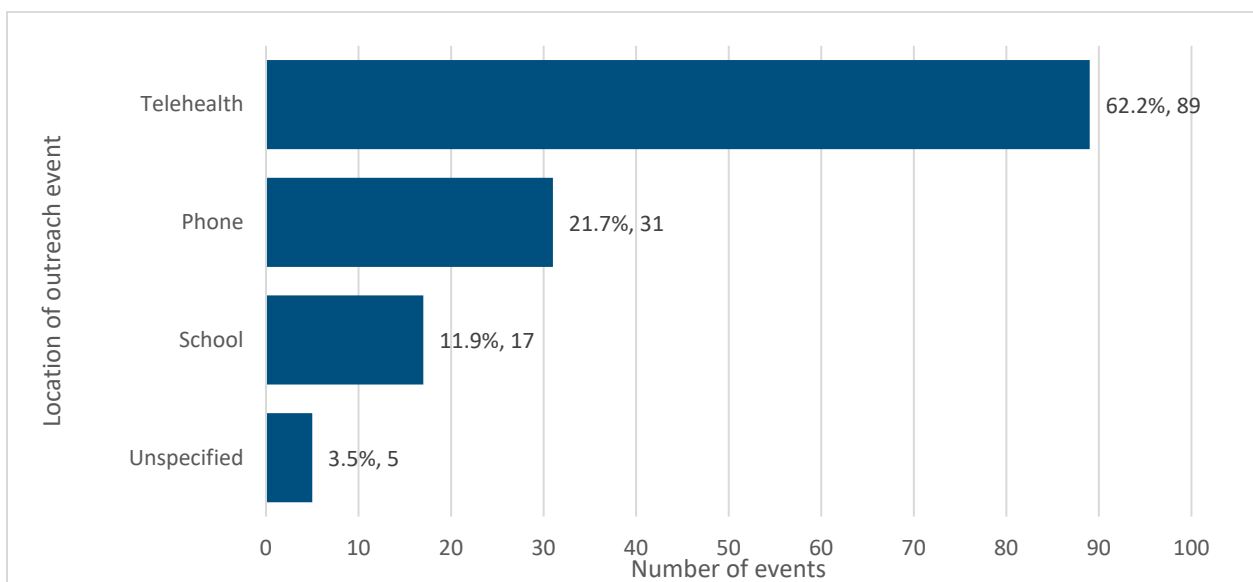
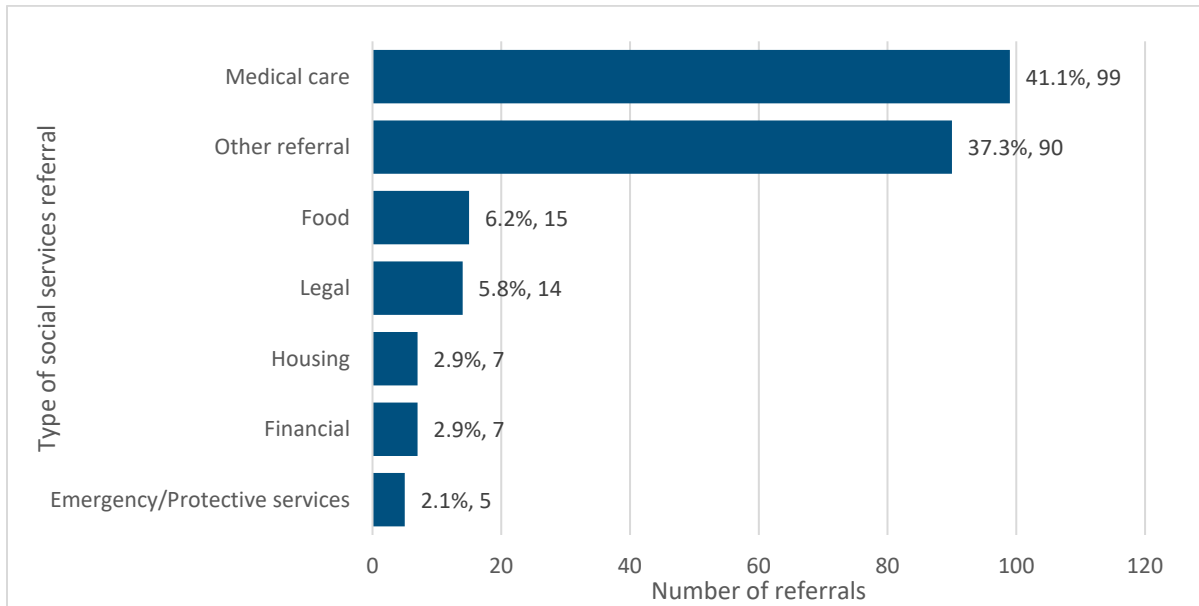


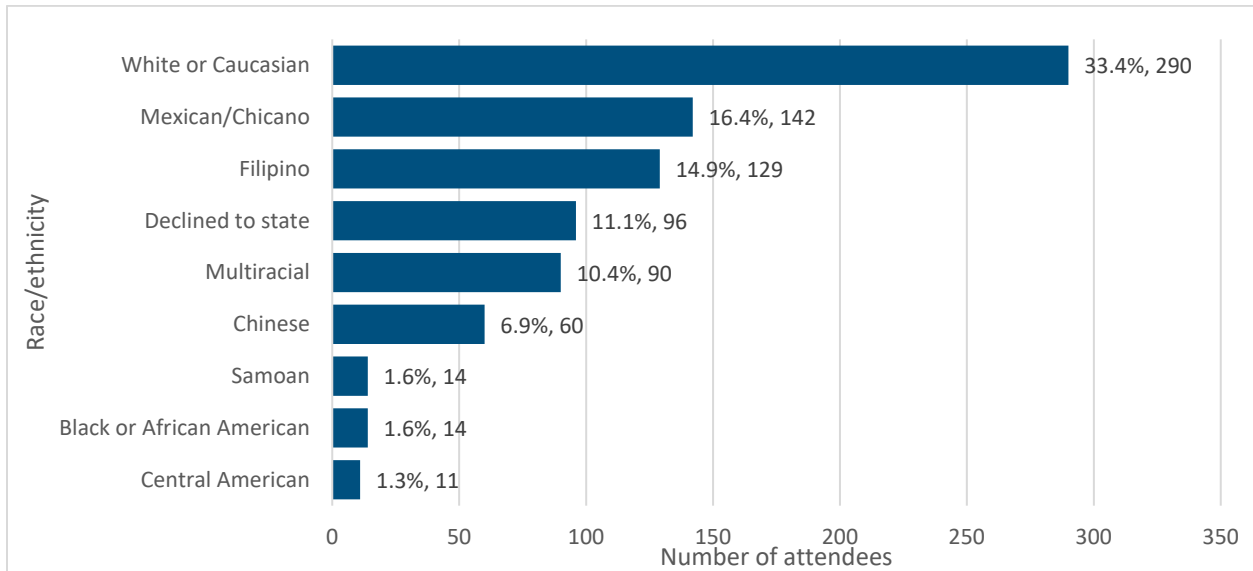
Exhibit C2. Daly City Peninsula Partnership Collaborative Social Services Referrals, FY 2021–2022



Outreach event attendees

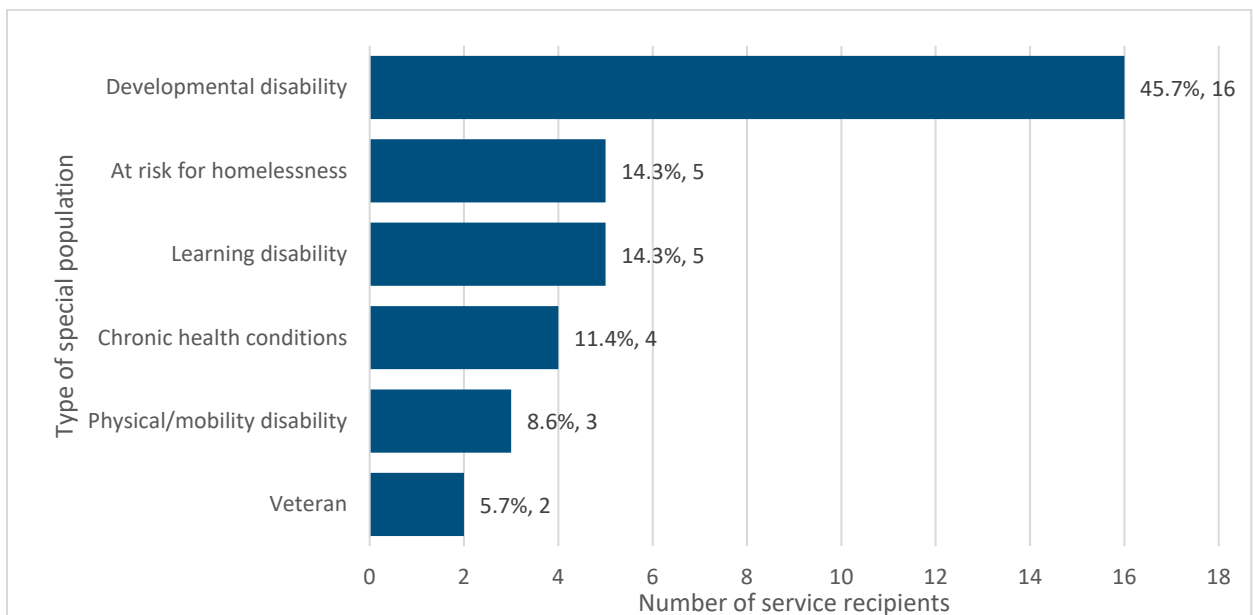
- Were female most often (**53.3%**; $n = 458$). Twenty-two percent identified as male (**22.2%**; $n = 191$). Almost one in four attendees (**24.4%**; $n = 210$) declined to state their sex at birth.
- Identified their gender as female (**54.3%**; $n = 470$), male (**19.8%**; $n = 171$), and queer (**4.6%**; $n = 40$). More than one in five attendees (**21.3%**; $n = 184$) declined to state their gender.
- Identified as heterosexual (**40.4%**; $n = 347$), bisexual (**7.5%**; $n = 64$); gay/lesbian (**7.3%**; $n = 63$), queer (**0.6%**; $n = 5$), or questioning (**0.5%**; $n = 4$). Forty-four percent of attendees (**43.7%**; $n = 375$) declined to state their sexual orientation.
- Included adults (26–59 years of age; **25.2%**; $n = 216$), children (15 years of age and younger; **14.5%**; $n = 124$), older adults (60 years of age and older; **5.8%**; $n = 50$), and transition-age youth (16–25 years of age; **4.0%**; $n = 34$). More than half of attendees (**50.6%**; $n = 434$) declined to state their age.
- Were White (**33.4%**; $n = 290$), Mexican (**16.4%**; $n = 142$), or Filipino (**14.9%**; $n = 129$) (See **Exhibit C3.**)

Exhibit C3. Daly City Peninsula Partnership Collaborative Attendees by Top Race/Ethnicity Category, FY 2021–2022



In FY 2021–2022, Daly City Peninsula Partnership attendees reported being in special populations groups. Among recipients in the special population groups, **45.7%** had a developmental disability, **14.3%** were at risk for homelessness, and **14.3%** had a learning disability. (See **Exhibit C4.**) They also reported having chronic health conditions, a physical/mobility disability, or being a veteran.

Exhibit C4. Daly City Peninsula Partnership Collaborative Service Recipients by Special Population, FY 2021–2022



Appendix D. FY 2021–2022 Outreach, Daly City Youth Center

For FY 2021–2022, Daly City Youth Center reported 237 outreach events, including 128 individual events and 109 group events. There were 2,925 attendees. Individual outreach events lasted from 5 to 371 minutes and lasted 66 minutes on average. The group outreach events lasted from 8 to 148 minutes and lasted 35 minutes on average.

Outreach events

- Took place at schools most of the time (**85.7%**, $n = 203$). Other locations for events and their respective percentages are shown in **Exhibit D1**.
- Were conducted in English (**95.4%**, $n = 226$) and Spanish (**4.6%**, $n = 11$).
- Resulted in 40 mental health referrals and no substance use referrals at the individual outreach events.
- Resulted in 12 social services referrals (**Exhibit D2**). An individual outreach event can have more than one referral, so the total number of other referrals exceeds the number of outreach events. Referrals were primarily made to other referrals (**41.7%**; $n = 5$), food (**25%**; $n = 3$), and medical care (**16.7%**; $n = 2$) services.

Exhibit D1. Daly City Youth Center Locations of Outreach Events, FY 2021–2022

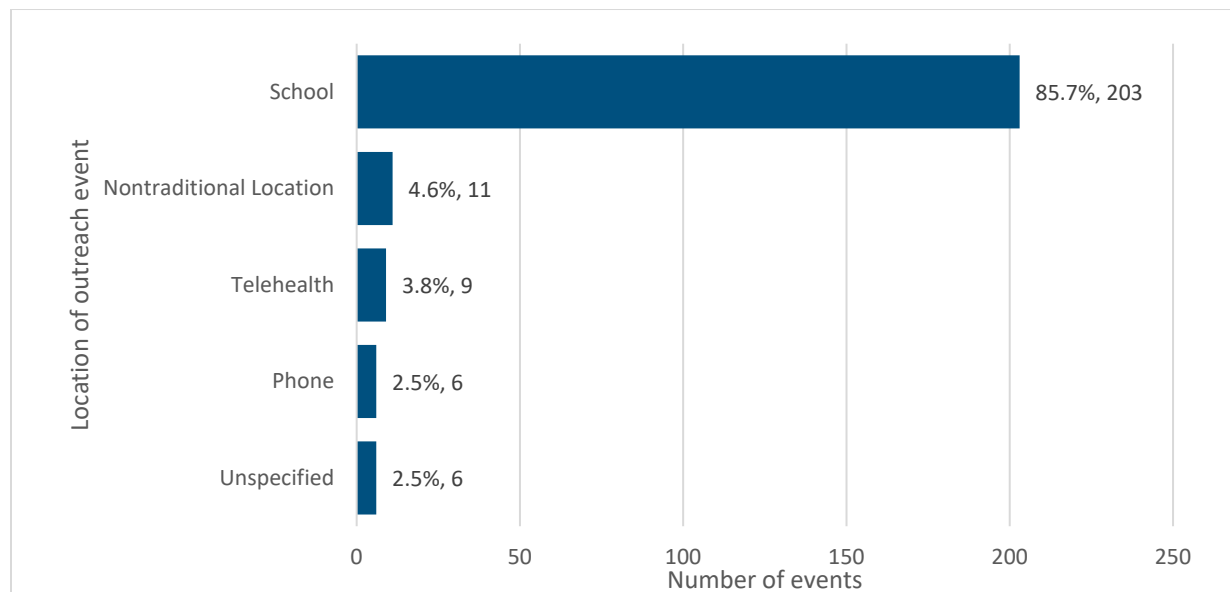
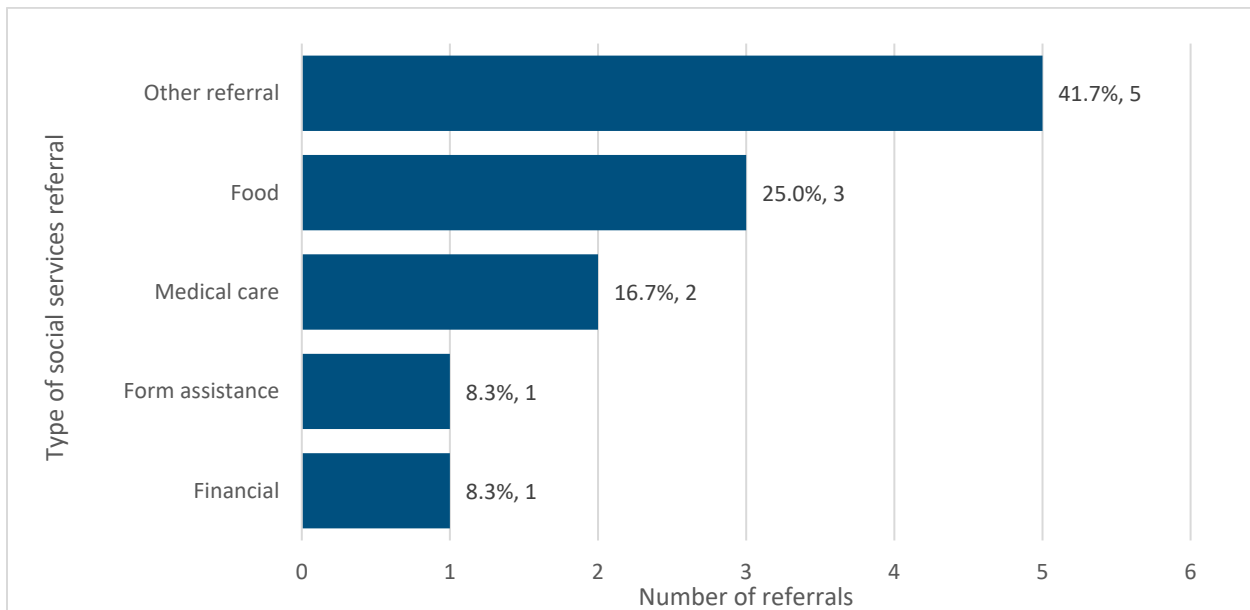


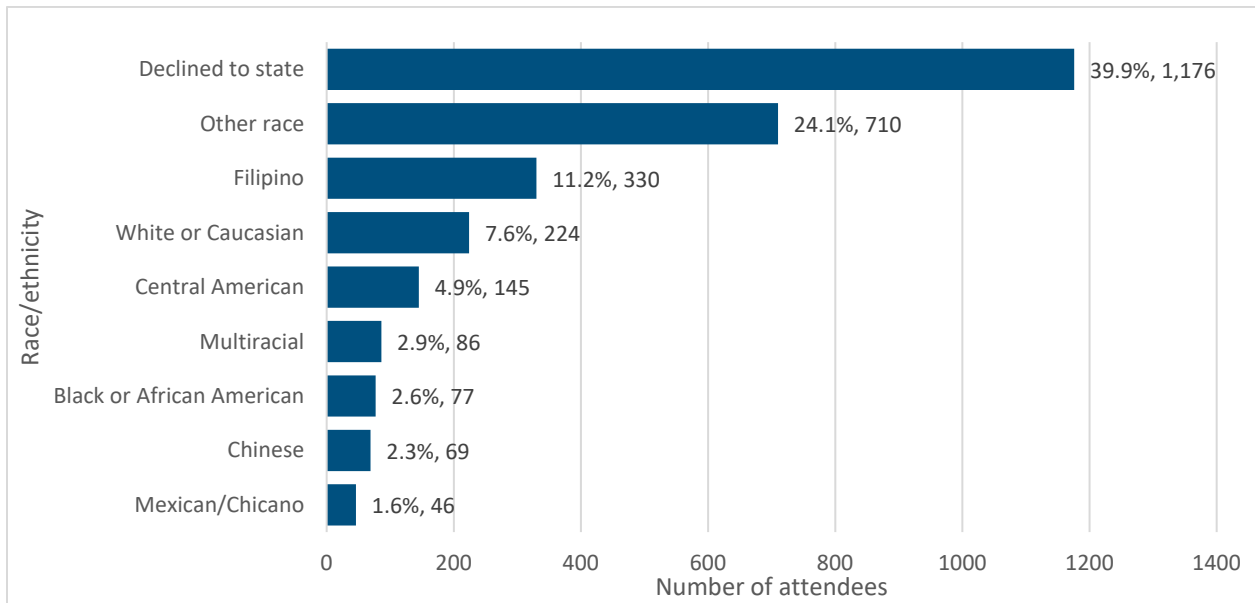
Exhibit D2. Daly City Youth Center Social Services Referrals, FY 2021–2022



Outreach event attendees

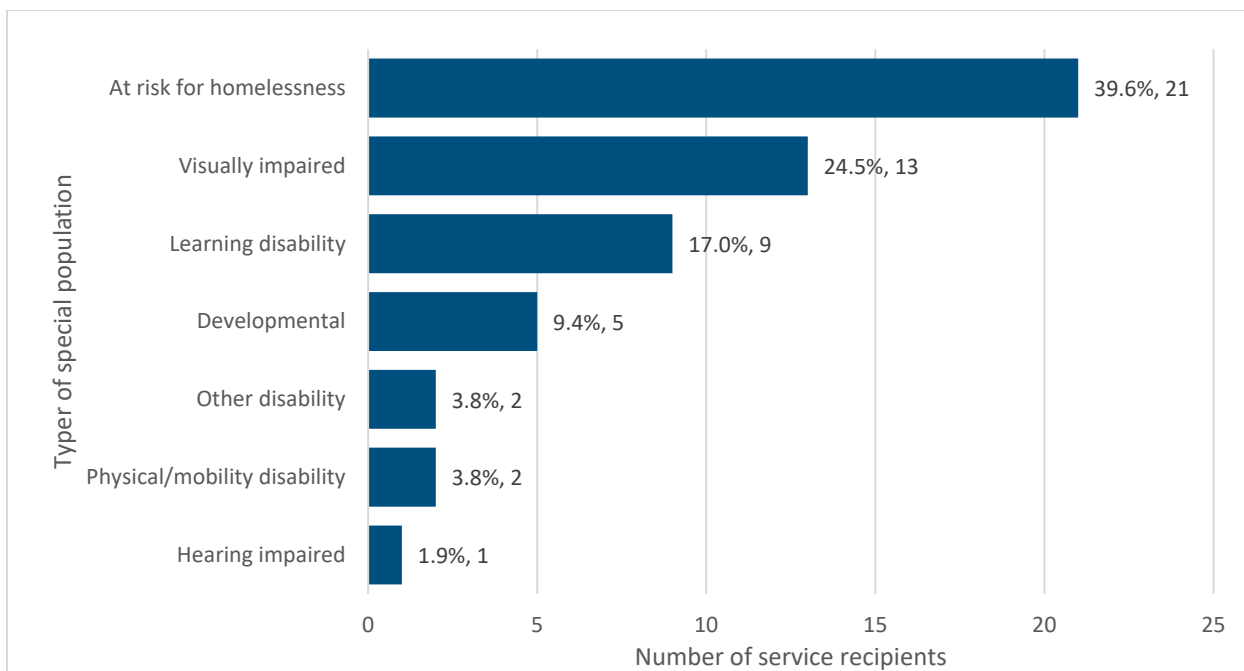
- Were female (**31.5%**, $n = 923$) and male (**26.5%**; $n = 776$). More than 40% of attendees declined to state their sex at birth (**41.9%**; $n = 1,227$).
- Identified their gender as female (**29.2%**; $n = 851$) or male (**25.4%**; $n = 741$). Forty-three percent of attendees declined to state their gender (**43.1%**; $n = 1,256$).
- Identified as heterosexual (**30.0%**; $n = 878$), bisexual (**4.7%**; $n = 137$), questioning (**2.0%**; $n = 58$) gay/lesbian (**1.4%**; $n = 41$), and queer (**0.9%**; $n = 26$). Most declined to state their sexual orientation (**59.2%**; $n = 1,732$).
- Included children (15 years of age and younger; **45.7%**; $n = 1,348$), transition-age youth (16–25 years of age, **18.9%**; $n = 557$), and adults (26–59 years of age; **1.0%**; $n = 30$). The remaining attendees (**34.4%**; $n = 1,014$) declined to state their age.
- Declined to state their race (**39.9%**; $n = 1,176$). The remaining attendees were another race (**24.1%**; $n = 710$), Filipino (**11.2%**; $n = 330$), White (**7.6%**; $n = 224$), or Central American (**4.9%**; $n = 145$). (See **Exhibit D3.**)

Exhibit D3. Daly City Youth Center Attendees by Top Racial/Ethnic Category, FY 2021–2022



In FY 2021–2022, Daly City Youth Center attendees reported being in special population groups. Among recipients in the special population groups, **39.6%** were at risk for homelessness, **24.5%** were visually impaired, and **17%** had a learning disability. (See **Exhibit D.**) They also reported having a developmental disability, another disability, or a physical/mobility disability, or being hearing impaired.

Exhibit D4. Daly City Youth Center Service Recipients by Special Populations, FY 2021–2022



Appendix E. FY 2021–2022 Outreach, El Concilio

For FY 2021–2022, El Concilio reported 149 outreach events, all of which were individual events. There were 149 attendees. Individual outreach events lasted from 10 to 20 minutes and lasted 12 minutes on average.

Outreach events

- Most took place in an office (**51.0%**; $n = 76$). Other locations of events and their respective percentages are shown in **Exhibit E1**.
- Were conducted in Spanish (**91.9%**; $n = 137$), English (**7.4%**; $n = 11$), and Mandarin (**0.7%**; $n = 1$).
- Resulted in 26 mental health referrals and no substance use referrals at the individual outreach events.
- Resulted in 222 social services referrals. (See **Exhibit E2**.) An individual outreach event can have more than one referral, so the total number of other referrals exceeds the number of outreach events. Referrals were made primarily to other services (**43.7%**; $n = 98$), form assistance (**26.1%**; $n = 25$), and legal assistance (**12.6%**; $n = 28$) services.

Exhibit E1. Locations of El Concilio Outreach Events, FY 2021–2022

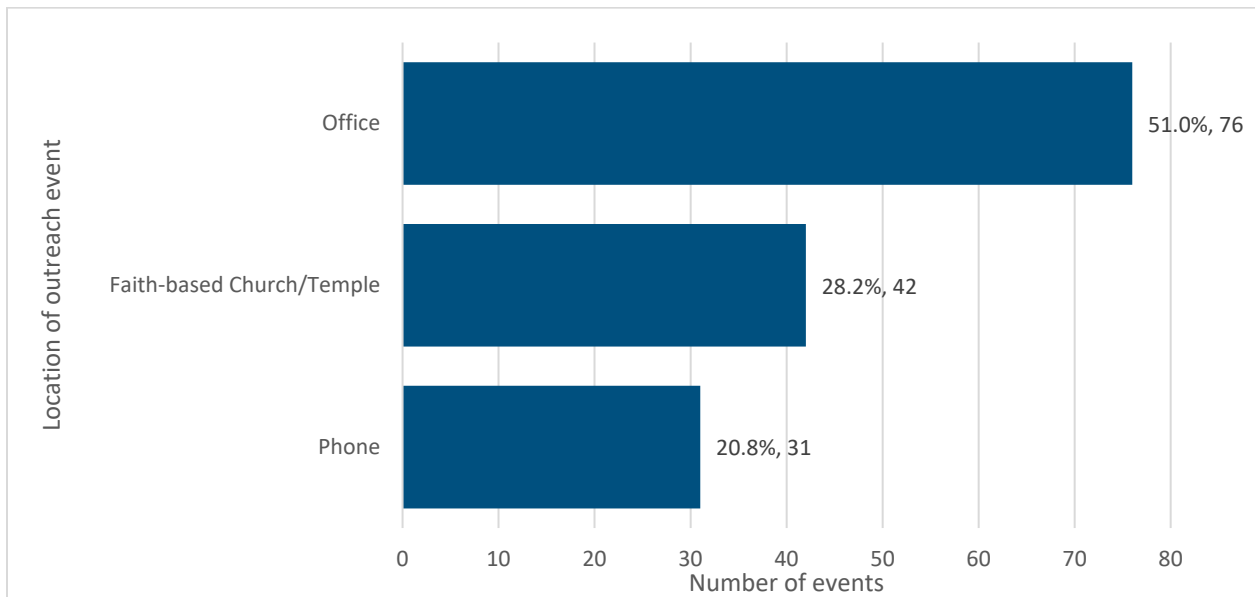
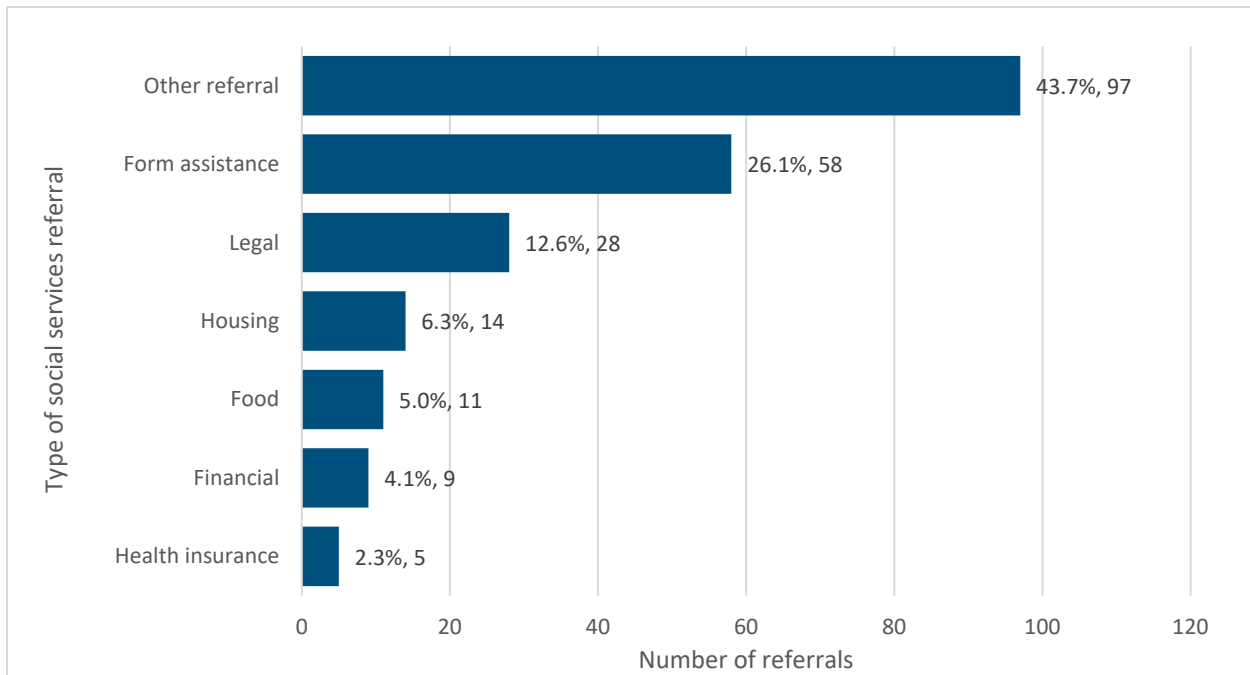


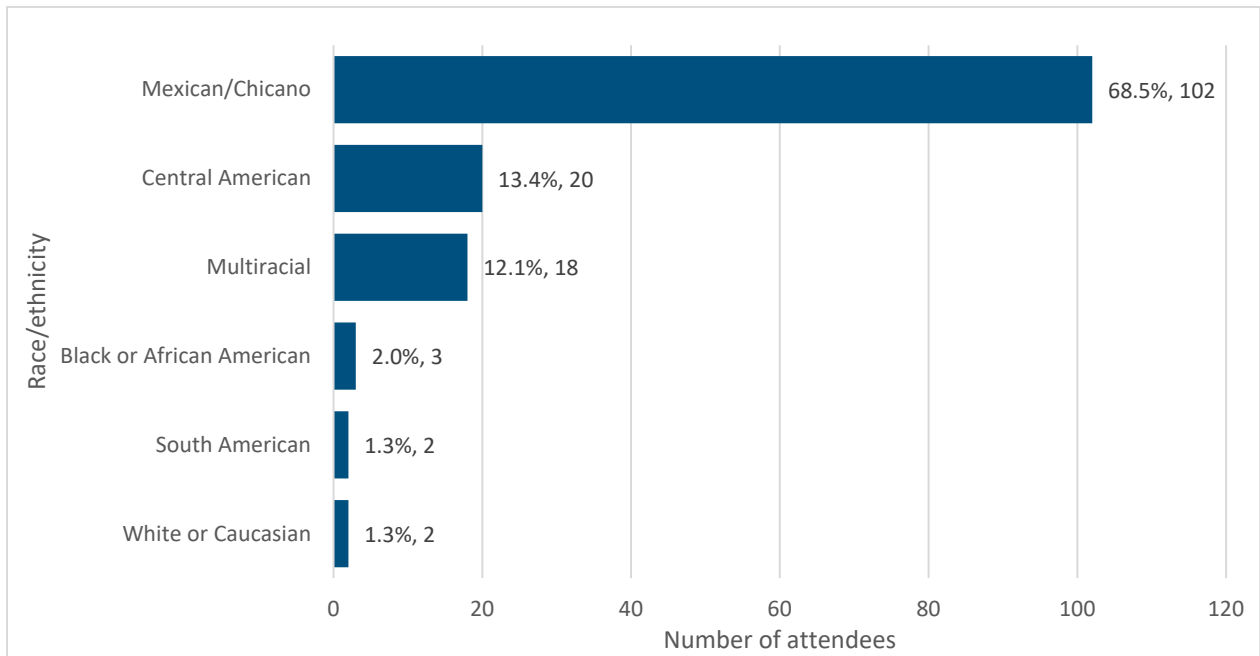
Exhibit E2. El Concilio Social Services Referrals, FY 2021–2022



Outreach event attendees

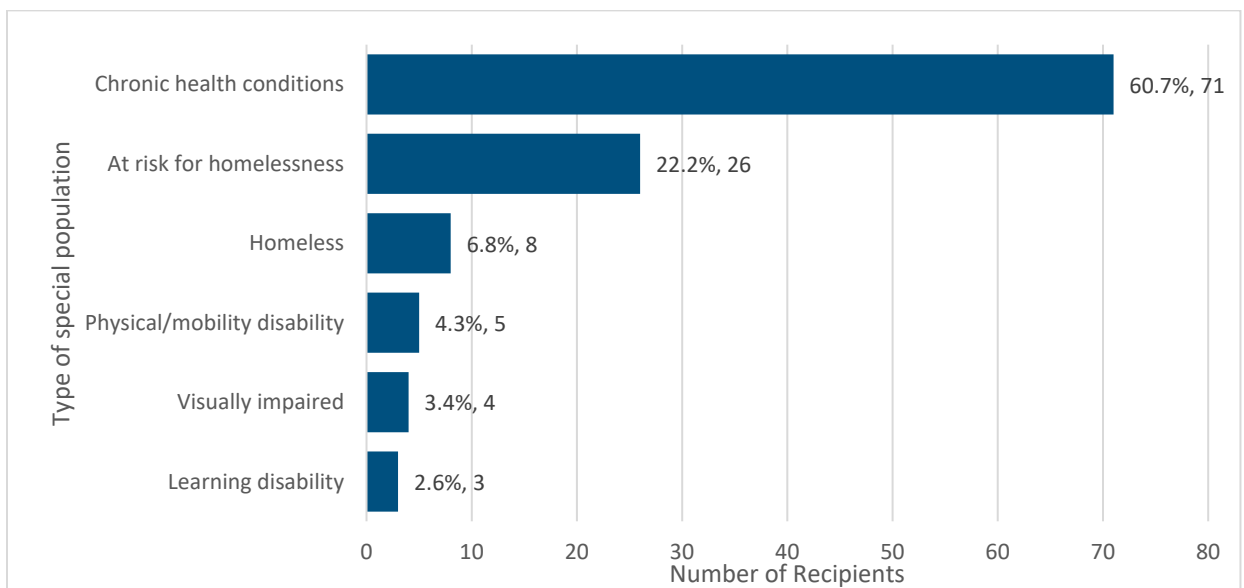
- Most often were female (**84.6%**; $n = 126$); 15% were male (**15.4%**; $n = 23$).
- Identified their gender as female (**79.9%**; $n = 119$), male (**18.8%**; $n = 28$), and male-to-female transgender (1.3%; $n = 2$).
- Were heterosexual (**98.7%**; $n = 147$) or gay/lesbian (**1.3%**; $n = 2$).
- Included adults (26–59 years of age, **77.9%**; $n = 116$), older adults (60 years, **17.4%**; $n = 26$), and transition-age youth (16–25 years of age, **4.0%**; $n = 6$).
- Were Mexican (**68.5%**; $n = 102$), Central American (**13.4%**; $n = 20$), or more than one race (**12.1%**; $n = 18$). (See **Exhibit E3**.)

Exhibit E3. El Concilio Attendees by Top Racial/Ethnic Category, FY 2021–2022



In FY 2021–2022, El Concilio attendees reported being in special population groups. Among service recipients in special population groups, **60.7%** had chronic health conditions, **22.2%** were at risk for homelessness, and **56.8%** were homeless. (See **Exhibit E4.**) They also reported having a physical/mobility disability, being visually impaired, or having a learning disability.

Exhibit E4. El Concilio Service Recipients by Special Populations, FY 2021–2022



Appendix F. FY 2021–2022 Outreach, Free At Last

For FY 2021–2022, Free At Last reported 171 outreach events, all of which were individual events. There were 171 attendees. The events lasted from 10 to 30 minutes and were 14 minutes on average.

Outreach events

- Most frequently took place over the phone (**88.9%**; $n = 152$). Events also took place in an office (**11.1%**; $n = 19$) as shown in **Exhibit F1**.
- Were conducted in English (**49.7%**; $n = 85$), Spanish (**49.7%**; $n = 85$), and Mandarin (**0.6%**; $n = 1$).
- Resulted in 19 mental health referrals and 138 substance use referrals at the individual outreach events.
- Resulted in 330 social services referrals. (See **Exhibit F2**.) An *individual* outreach event can have more than one referral, so the total number of other referrals exceeds the number of outreach events. Referrals were primarily made to medical care (**33.3%**; $n = 37$), housing (**49.5%**; $n = 55$), health insurance (**3.0%**; $n = 10$), and legal referrals (**1.5%**; $n = 5$).

Exhibit F1. Locations of Free At Last Outreach Events, FY 2021–2022

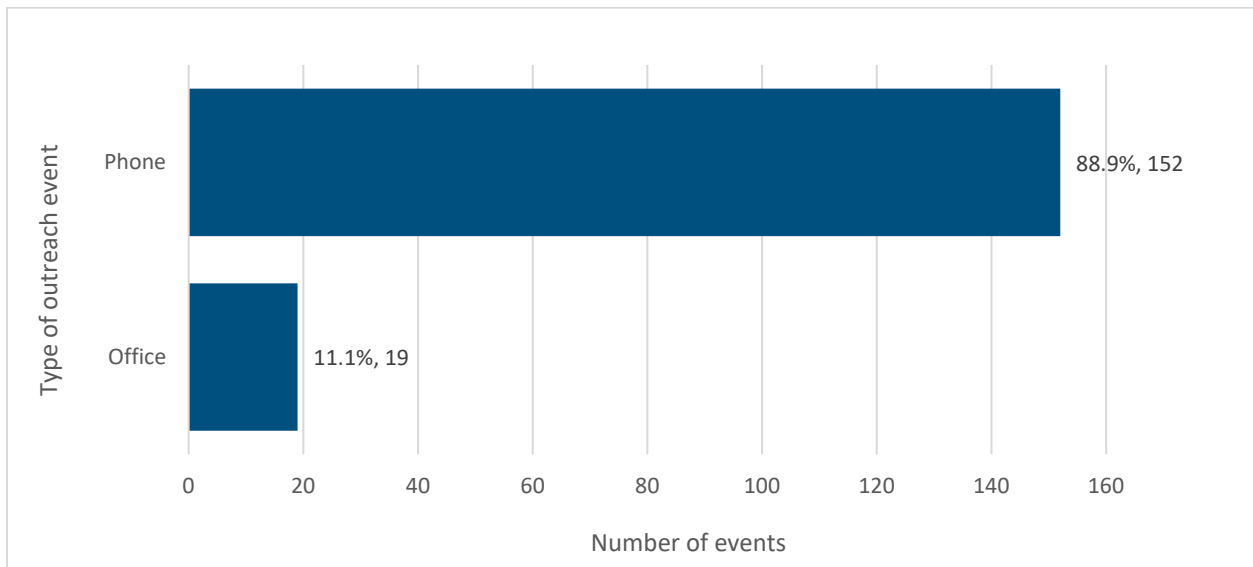
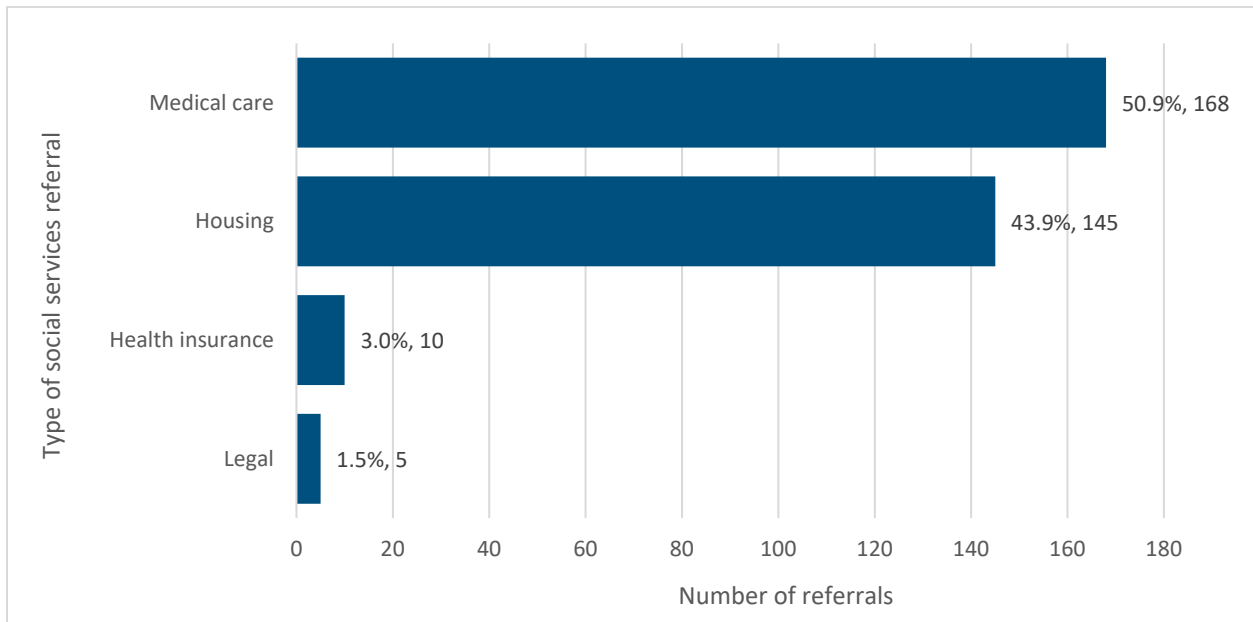


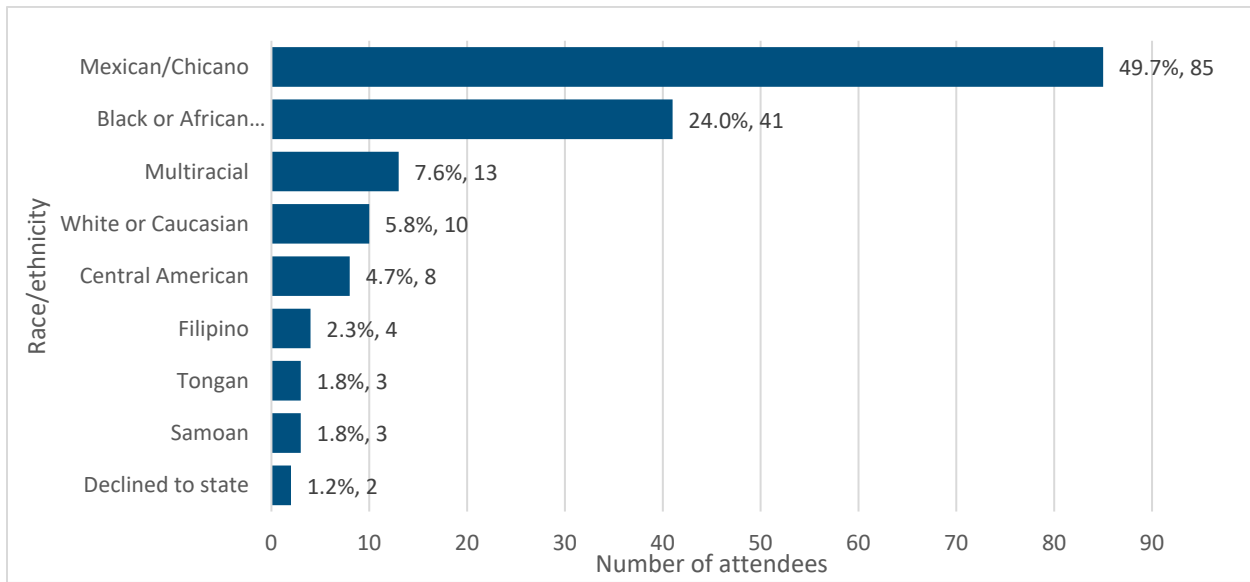
Exhibit F2. Free at Last Social Services Referrals, FY 2021–2022



Outreach event attendees

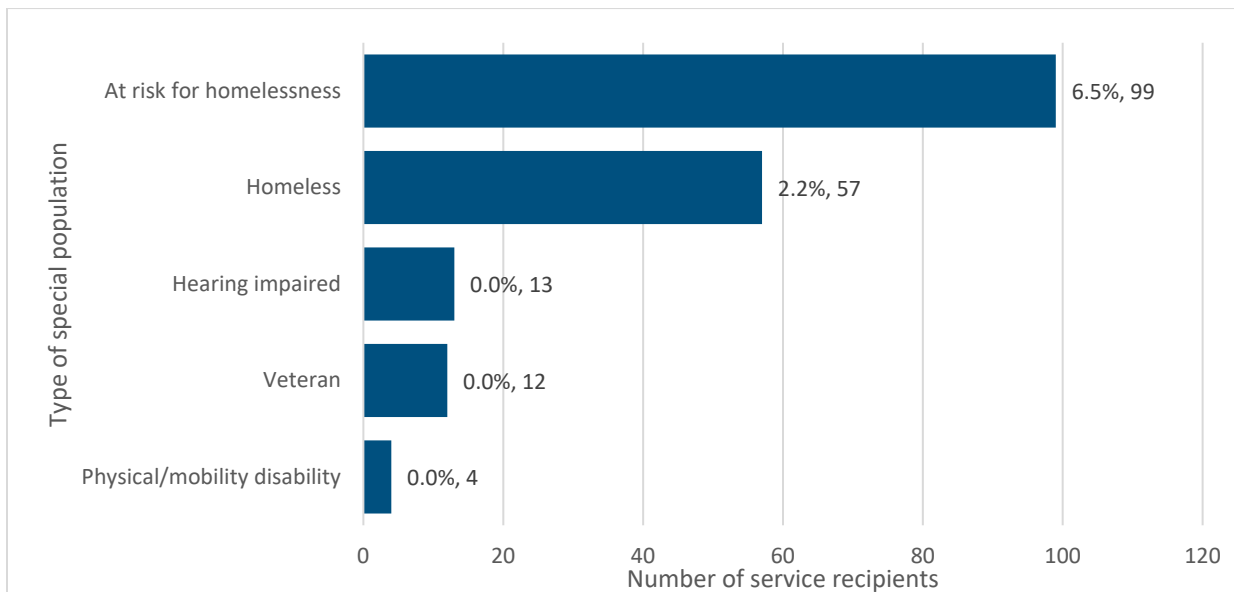
- Most often were male (**60.5%**; $n = 104$); 39% were female (**39.0%**; $n = 67$).
- Identified their gender as male most of the time (**58.4%**; $n = 101$); 39% identified as female (**39.3%**; $n = 68$). Three attendees identified as male-to-female transgender (1.7%) and one attendee as female-to-male transgender (0.6%).
- Identified as heterosexual (**59.4%**; $n = 114$), bisexual (**20.8%**; $n = 40$), gay/lesbian (**15.1%**; $n = 29$), or pansexual (4.7%; $n = 9$).
- Included adults (26–59 years of age, **81.3%**; $n = 139$) and transition-age youth (16–25 years of age, **18.7%**; $n = 32$).
- Were Mexican (**49.7%**; $n = 85$), Black (**24.0%**; $n = 41$), or more than one race (**7.6%**; $n = 13$). (See **Exhibit F3**.)

Exhibit F3. Free at Last Attendees by Top Racial/Ethnic Category, FY 2021–2022



In FY 2021–2022, Free At Last attendees reported being in special population groups. Among service recipients in special population groups, **53.5%** were at risk for homelessness and **30.8%** were homeless. (See **Exhibit F4.**) They also reported being hearing impaired, veterans, or having a physical/mobility disability.

Exhibit F4. Free At Last Service Recipients by Special Populations, FY 2021–2022



Appendix G. FY 2021–2022 Outreach, Pacifica Collaborative

For FY 2021–2022, Pacifica Collaborative reported 26 outreach events, including 14 individual outreach events and 12 group outreach events. There were 3,221 attendees. Individual outreach events lasted an average of 34 minutes. Group outreach events lasted from 90 to 180 minutes and lasted an average of 115 minutes.

Outreach events

- Most frequently took place at another community location (**50.0%**; $n = 13$). Other locations for events and their respective percentages are shown in **Exhibit G1**.
- Were conducted in English (**100.0%**; $n = 26$).
- Resulted in 12 mental health referrals and 7 substance use referrals.
- Resulted in 33 social services referrals. (See **Exhibit G2**). An individual outreach event can have more than one referral, so the total number of other referrals exceeds the number of outreach events. Referrals were made primarily to food (**30.3%**; $n = 10$) and housing (**21.2%**; $n = 7$) assistance services.

Exhibit G1. Locations of Pacifica Collaborative Outreach Events, FY 2021–2022

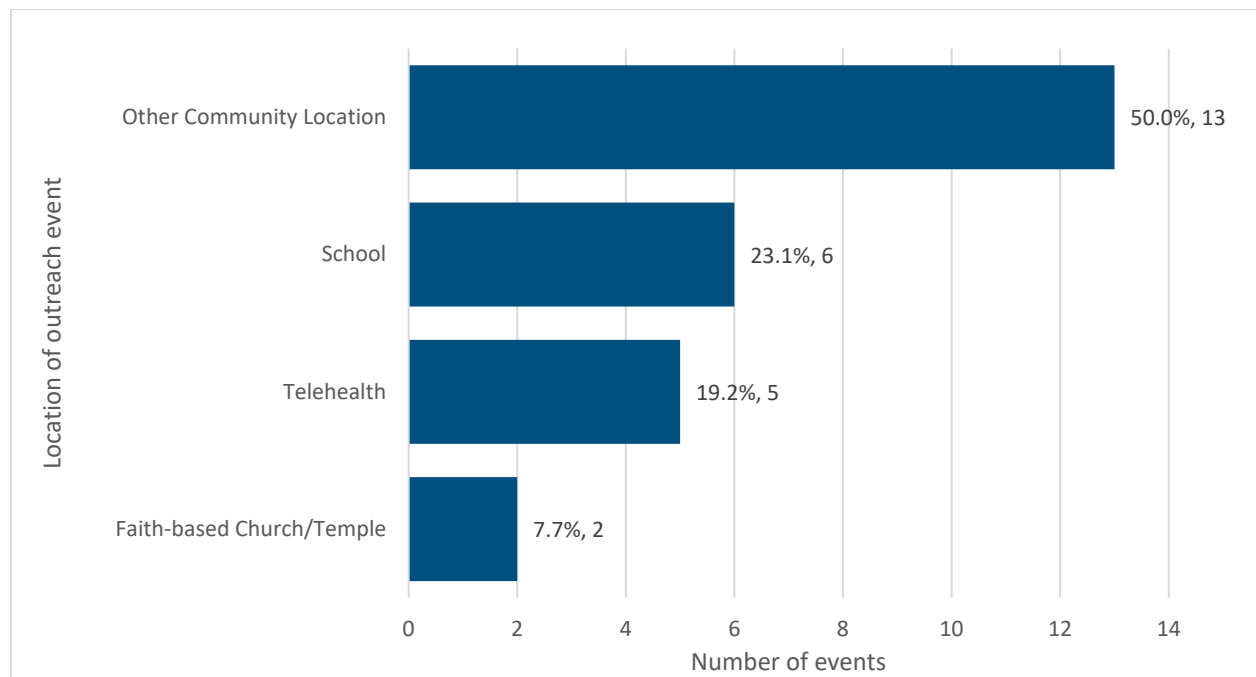
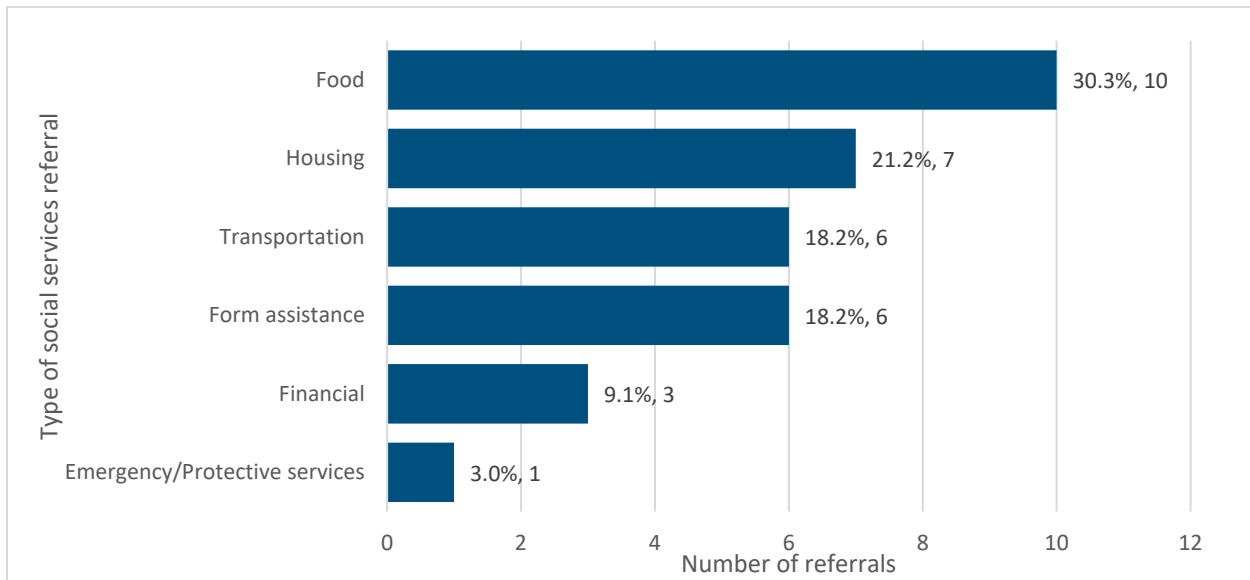


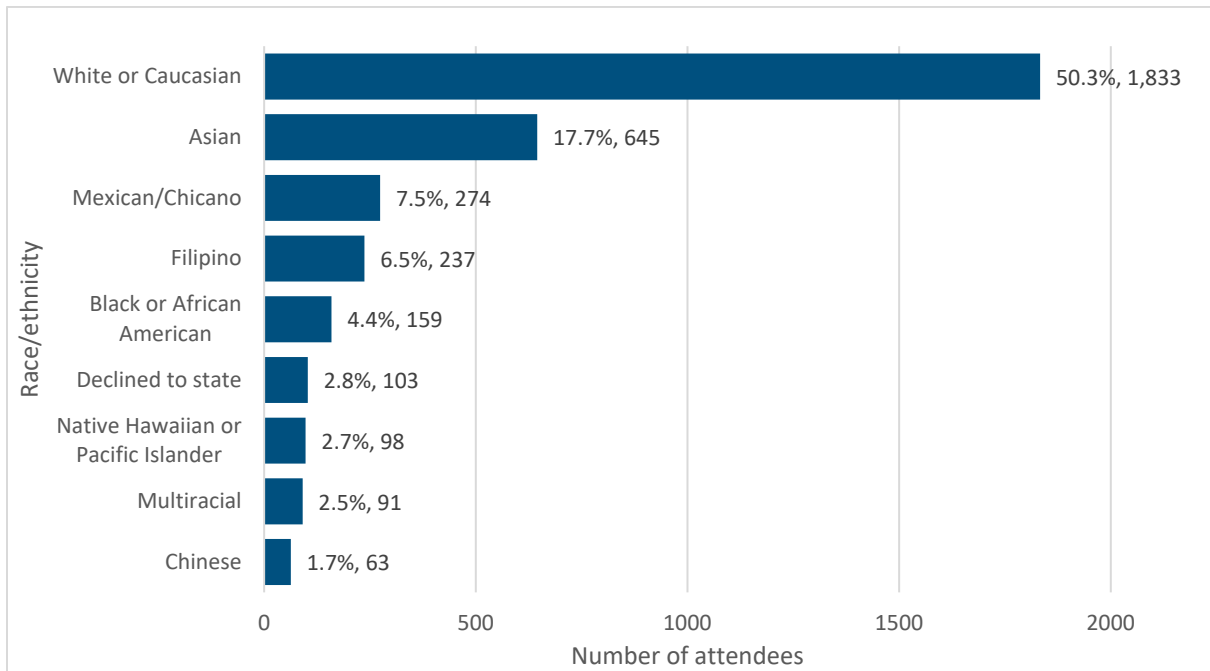
Exhibit G2. Pacifica Collaborative Social Services Referrals, FY 2021–2022



Outreach event attendees

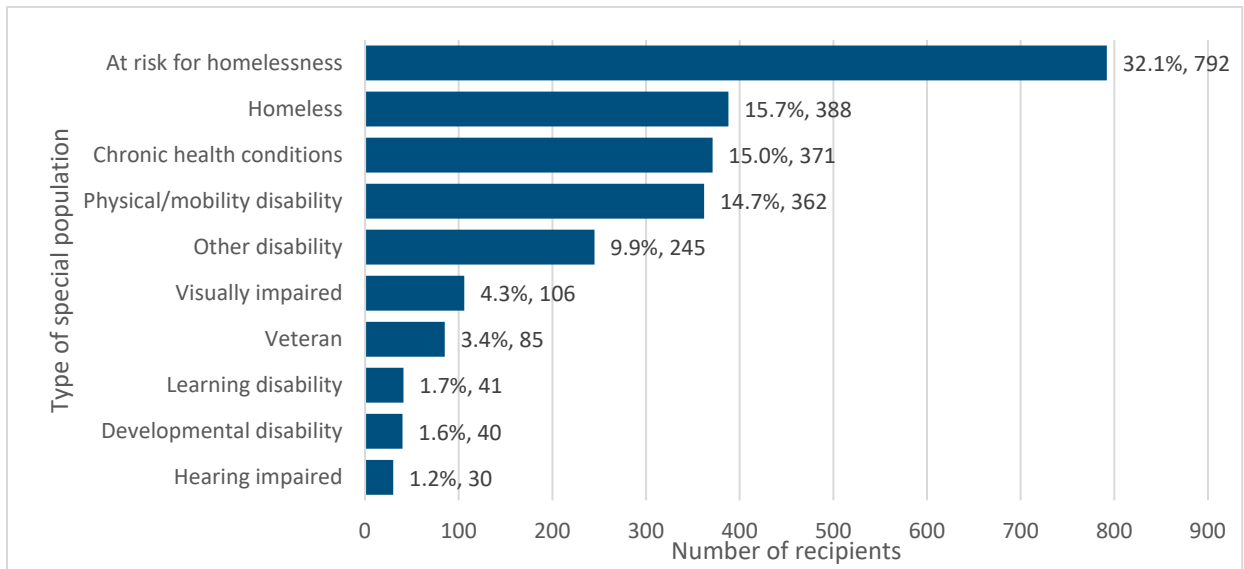
- Were female (**55.3%**; $n = 1,781$) or male (**40.5%**; $n = 1,306$). There were 134 (**4.2%**) individuals who declined to state their sex at birth.
- Identified their gender as female (**55.6%**; $n = 1,789$) or male (**40.5%**; $n = 1,305$). There were 123 (**3.8%**) attendees who declined to state their gender.
- Identified as heterosexual (**68.3%**; $n = 2,201$), gay/lesbian (**4.9%**; $n = 159$), bisexual (**4.5%**; $n = 146$), or questioning (**0.4%**; $n = 14$). More than **20%** of attendees ($n = 699$) declined to state their sexual orientation.
- Included adults (26–59 years of age, **32.9%**; $n = 1,059$) and older adults (60 years of age and older, **27.3%**; $n = 878$). Outreach event attendees also included transition-age youth (16–25 years of age, **18.0%**; $n = 580$) as well as children and teens (0–15 years of age, **13.7%**; $n = 442$) The age of **8.1%** ($n = 262$) of participants was unknown.
- Were White (**50.3%**; $n = 1,833$) or Asian (**17.7%**; $n = 645$). (See **Exhibit G3**.)

Exhibit G3. Pacifica Collaborative Attendees by Top Racial/Ethnic Category, FY 2021–2022



In FY 2021–2022, Pacifica Collaborative attendees reported being in special population groups. Among service recipients in the special population groups, **32.1%** were at risk for homelessness, **15.7%** were homeless, and **15.0%** had chronic health conditions. (See **Exhibit G4.**) They also reported having a physical/mobility disability, or another disability, being visually impaired, being a veteran, having a learning disability, having a developmental disability, and being hearing impaired.

Exhibit G4. Pacifica Collaborative Service Recipients by Special Populations, FY 2021–2022



Appendix H. FY 2021–2022 Outreach, StarVista

For FY 2021–2022, StarVista reported four outreach events, all of which were group outreach events. There were 26 attendees. Outreach events lasted 90 minutes on average.

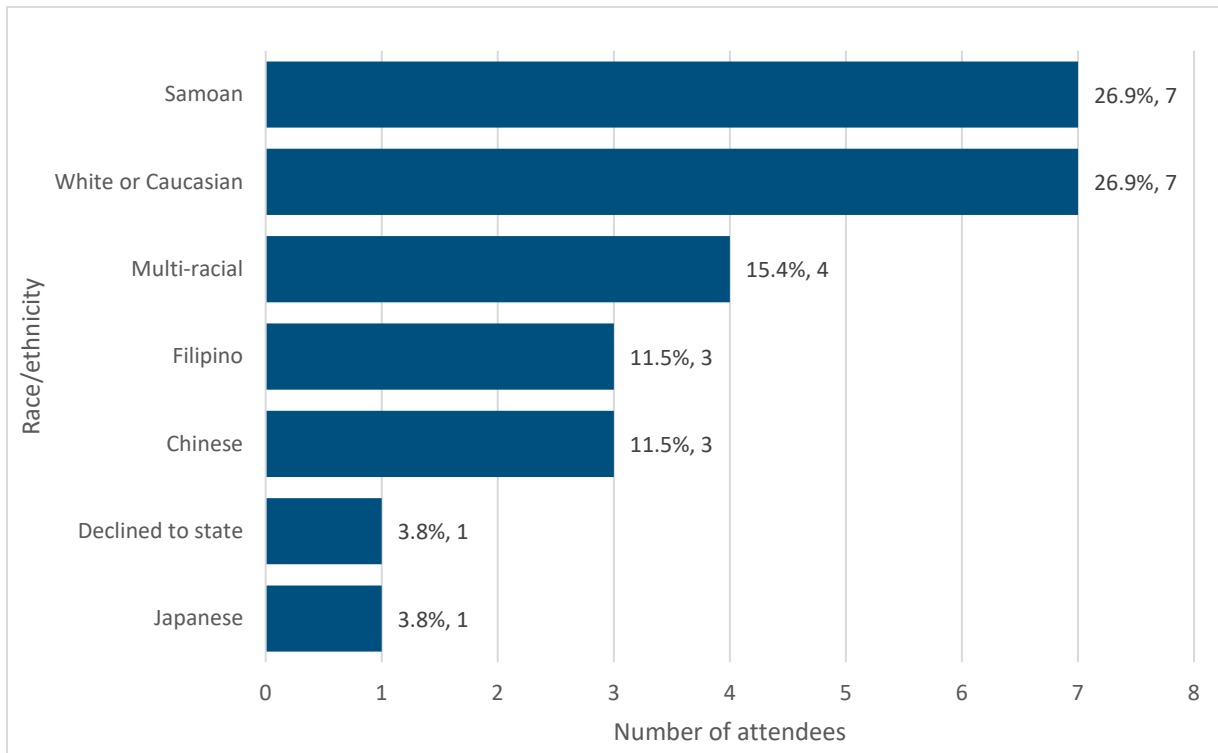
Outreach events

- 100% took place via telehealth ($n = 4$).
- Were conducted in English (**100%**; $n = 4$).
- Did not result in any mental health or substance use referrals.
- Did not result in any social services referrals in FY 2021–2022.

Outreach event attendees

- Were female (**65.4%**; $n = 17$) or did not indicate their sex at birth (**34.6%**; $n = 9$).
- Identified their gender as female (**73.1%**; $n = 19$) or did not indicate their gender (**26.9%**; $n = 7$).
- Identified as heterosexual (**23.1%**; $n = 6$) or did not indicate their sexual orientation (**76.9%**; $n = 20$).
- Were adults (26–59 years of age, **23.1%**; $n = 6$) or did not indicate their age (**76.9%**; $n = 20$).
- Were Samoan (**26.9%**; $n = 7$), White (**26.9%**; $n = 35$), or more than one race (**15.4%**; 4). (See **Exhibit H3.**)

Exhibit H1. StarVista Attendees by Top Racial/Ethnic Category, FY 2021–2022



In FY 2021–2022, StarVista attendees did not report being in special population groups.

Appendix I. Attendees by Race/Ethnicity by Collaborative, FY 2017–2021

Exhibit I1. Attendees by Race/Ethnicity by Collaborative, FY 2017-2021

Race/Ethnicity	EPAPMHO					NCOC				
	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22
Black	200 (36.5%)	152 (23.2%)	93 (17.9%)	29 (11.8%)	44 (11.5%)	249 (3.1%)	167 (3%)	685 (5.4%)	202 (2.6%)	277 (3.4%)
White	47 (8.6%)	55 (8.4%)	18 (3.5%)	12 (4.9%)	12 (3.1%)	1981 (24.8%)	1484 (27%)	2024 (16%)	2336 (29.6%)	2394 (29.8%)
American Indian	1 (.2%)	2 (.3%)	1 (.2%)	0 (0%)	0 (0%)	67 (.8%)	56 (1%)	90 (.7%)	67 (.8%)	46 (.6%)
Middle Eastern	0 (0%)	0 (0%)	2 (.4%)	0 (0%)	0 (0%)	114 (1.4%)	28 (.5%)	44 (.3%)	30 (.4%)	28 (.3%)
Eastern European	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	12 (.2%)	2 (0%)	5 (0%)	1 (0%)	1 (0%)
European	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	8 (.1%)	21 (.4%)	5 (0%)	3 (0%)	1 (0%)
Mexican	53 (9.7%)	156 (23.8%)	119 (22.8%)	101 (41.2%)	187 (48.7%)	816 (10.2%)	462 (8.4%)	2302 (18.2%)	1235 (15.6%)	510 (6.3%)
Puerto Rican	1 (.2%)	2 (.3%)	2 (.4%)	1 (.4%)	1 (.3%)	4 (.1%)	10 (.2%)	44 (.3%)	36 (.5%)	2 (0%)
Cuban	0 (0%)	1 (.2%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Central American	7 (1.3%)	12 (1.8%)	19 (3.6%)	15 (6.1%)	28 (7.3%)	471 (5.9%)	32 (.6%)	127 (1%)	13 (.2%)	160 (2%)
South American	1 (.2%)	1 (.2%)	0 (0%)	1 (.4%)	2 (.5%)	51 (.6%)	15 (.3%)	27 (.2%)	67 (.8%)	6 (.1%)
Caribbean	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	2 (0%)	0 (0%)	5 (0%)	0 (0%)	0 (0%)
Other Latino	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Asian	0 (0%)	0 (0%)	1 (.2%)	1 (.4%)	0 (0%)	1025 (12.8%)	550 (10%)	873 (6.9%)	604 (7.6%)	647 (8.1%)
Filipino	8 (1.5%)	9 (1.4%)	4 (.8%)	0 (0%)	4 (1%)	1000 (12.5%)	331 (6%)	1170 (9.3%)	316 (4%)	753 (9.4%)
Chinese	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	297 (3.7%)	212 (3.9%)	936 (7.4%)	304 (3.8%)	230 (2.9%)
Japanese	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	55 (.7%)	26 (.5%)	37 (.3%)	42 (.5%)	38 (.5%)
Korean	0 (0%)	0 (0%)	0 (0%)	1 (.4%)	1 (.3%)	34 (.4%)	12 (.2%)	39 (.3%)	25 (.3%)	7 (.1%)
South Asian	1 (.2%)	2 (.3%)	1 (.2%)	0 (0%)	0 (0%)	70 (.9%)	17 (.3%)	222 (1.8%)	50 (.6%)	52 (.6%)
Vietnamese	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	13 (.2%)	11 (.2%)	84 (.7%)	4 (.1%)	1 (0%)
Cambodian	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	8 (.1%)	2 (0%)	8 (.1%)	0 (0%)	0 (0%)
Laotian	0 (0%)	0 (0%)	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%)	0 (0%)	0 (0%)
Other Asian	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Tongan	88 (16.1%)	97 (14.8%)	30 (5.8%)	15 (6.1%)	35 (9.1%)	61 (.8%)	47 (.9%)	89 (.7%)	88 (1.1%)	118 (1.5%)
Samoan	35 (6.4%)	57 (8.7%)	26 (5%)	19 (7.8%)	31 (8.1%)	163 (2%)	201 (3.7%)	503 (4%)	137 (1.7%)	192 (2.4%)
Fijian	3 (.5%)	5 (.8%)	1 (.2%)	0 (0%)	4 (1%)	8 (.1%)	3 (.1%)	21 (.2%)	25 (.3%)	8 (.1%)
Hawaiian	5 (.9%)	15 (2.3%)	164 (31.5%)	40 (16.3%)	1 (.3%)	150 (1.9%)	188 (3.4%)	1521 (12.1%)	174 (2.2%)	127 (1.6%)
Guamanian	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	5 (.1%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Multi	92 (16.8%)	86 (13.1%)	39 (7.5%)	9 (3.7%)	31 (8.1%)	407 (5.1%)	369 (6.7%)	1228 (9.7%)	248 (3.1%)	325 (4%)
Other Race	4 (.7%)	3 (.5%)	0 (0%)	1 (.4%)	0 (0%)	254 (3.2%)	140 (2.5%)	113 (.9%)	5 (.1%)	718 (8.9%)
Unknown Race	2 (.4%)	1 (.2%)	1 (.2%)	0 (0%)	2 (.5%)	671 (8.4%)	1106 (20.1%)	412 (3.3%)	1883 (23.8%)	1392 (17.3%)
Total	548	656	521	245	384	7996	5492	12614	7899	8033

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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