

# CALFRESH EQUITY ANALYSIS

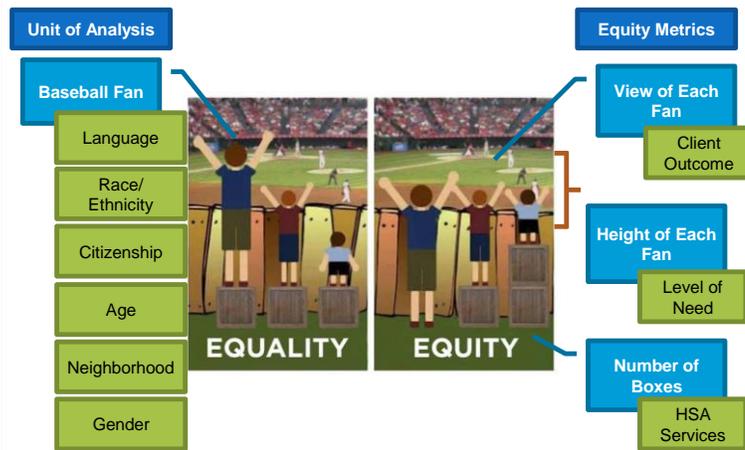


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HSA Planning Unit conducted this equity analysis in 2016 to better understand disparities and develop services and policies that lead to more equitable outcomes among its clients.

Despite San Francisco's reputation for diversity and inclusion, communities of color and low-income residents fare far worse on various fundamental measures of well-being, including health, academic achievement, household income, and food security.

An equity orientation considers equal outcomes, rather than equal treatment, as a metric for success.



Source: Out Front Minnesota and expanded by Walter Abrazaldo (DCYF). Modified by Tiffany Torrevillas (HSA).

2

Equity analyses focus primarily on outcomes, but for the purpose of this study, we looked at access, treatment, and outcomes to understand the client's experience with the agency, from application to program retention and the ultimate outcome of food security.

The questions we answered in this initial exploration were limited by the availability of reliable and consistent data, particularly data might allow us to track improvements over time.

Dimension	Analysis	Research Questions
Access	Uptake analysis	<ul style="list-style-type: none"> <li>Are eligible clients served at appropriate rates?</li> <li>Are any populations underserved?</li> </ul>
Treatment	Application and churn analysis	<ul style="list-style-type: none"> <li>Are certain clients being denied or discontinued at different rates?</li> </ul>
	Bilingual staffing and wait-time analysis	<ul style="list-style-type: none"> <li>Do wait times differ by language?</li> <li>Do we have sufficient staffing to meet clients' language needs?</li> </ul>
Outcomes	Analysis of food security	<ul style="list-style-type: none"> <li>Are there discrepancies in client outcomes by population?</li> </ul>

3

## MANY EQUITABLE RESULTS

- **Application approval** rates were broadly similar among most languages and ethnic groups.
- Some language groups still have lower than average **program uptake**, but difference is small.
- **Staff language capacity** is generally appropriate to clients' language needs, but extra capacity is needed for certain functions.
- **Churn** affects most groups similarly, with one small exception: a slightly disproportionate impact on Hispanic/Latinos and Spanish-speakers

5

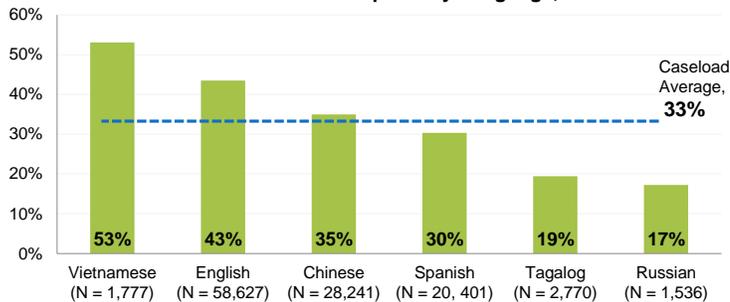
Most findings showed very limited inequities; the agency is proud of its history of progressive initiatives and community-based partnerships, and we believe these efforts helped alleviate the impacts of systemic inequity.

## Areas for Improvement: Language

### ACCESS

**Uptake** by eligible clients was lower among minority communities whose primary language was not English, particularly among Russian, Tagalog, and Spanish-speakers.

Non-Assistance CalFresh Uptake by Language, June 2016



Sources: June 2016 NAFS Caseload (CalWIN) and 2014 5-Year American Community Survey  
N = Total eligible persons (less than 130% poverty and not on SSI)

8

We used census data to estimate the populations that are likely eligible for CalFresh based on income and SSI receipt. We determined that the current CalFresh caseload (non-assistance only) constituted 33% of that “likely eligible” population.

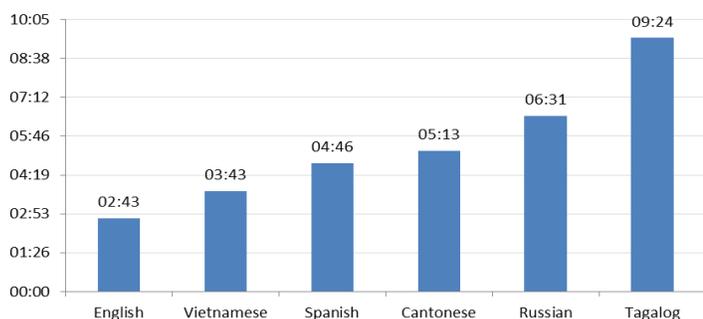
Broken down by language, we find uptake was lower in certain minority communities whose primary language was not English, particularly among Russian, Tagalog, and Spanish speakers.

The N values indicate the total estimate of “likely eligible” individuals.

### TREATMENT

Non-English speakers experienced longer **wait times** when calling the CalFresh/Medi-Cal assistance line.

Medi-Cal/CalFresh (Dual) Average Wait Times - All Call Types  
June 2015 - May 2016



Call types include intake, carrying, dual intake/carrying for ACA, and CALM/CAPI

9

CalFresh staff's language capacities are generally in line with client needs and most staffing analyses showed remarkable equity considering the challenges of hiring in the city. Call wait times are one exception.

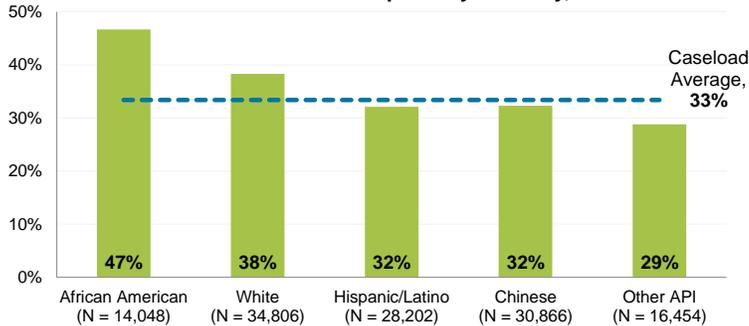
We've achieved dramatic increases in bilingual staffing since this analysis, with a major focus on Cantonese-speaking staff. Cantonese speakers make up the largest non-English portion of the caseload.

## Areas for Improvement: Ethnicity

### ACCESS

Uptake was lower among Chinese and Other Asian/Pacific Islanders, and Hispanics/Latino.

Non-Assistance CalFresh Uptake by Ethnicity, June 2016



Sources: June 2016 NAFS Caseload (CalWIN) and 2014 5-Year American Community Survey  
(N = Total eligible persons (less than 130% poverty and not on SSI))

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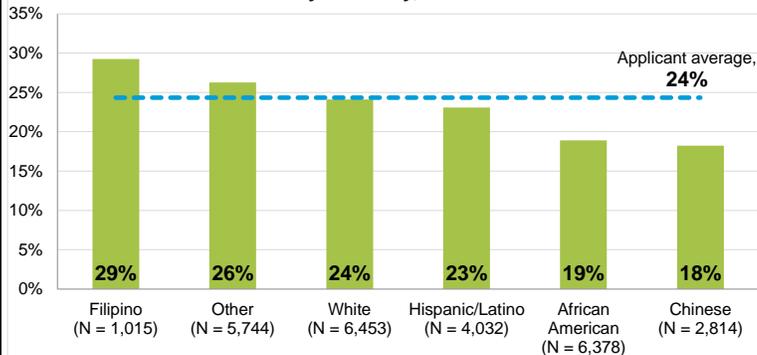
There are generally only small differences in penetration rate among ethnic groups. However, note that overall size of the Hispanic/Latino and Chinese population is large, and even a small difference in penetration rates implies thousands of unserved individuals.

The N values indicate the total estimate of “likely eligible” individuals.

### TREATMENT

Filipinos were more likely to have an application denied than other ethnic groups, as well as the catchall “other” category.

Percent of Non-Assistance CalFresh Applications Denied by Ethnicity, 2015



12

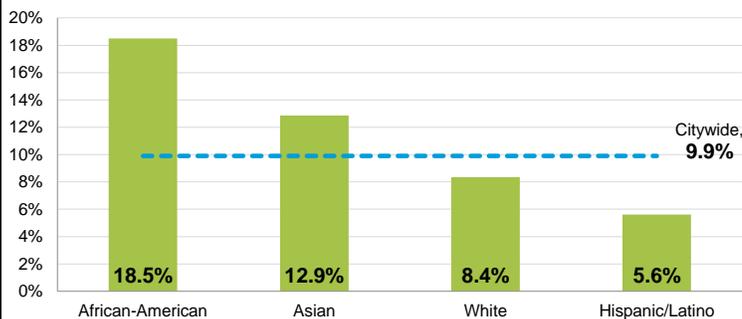
Twenty-four percent of CalFresh applications were denied in calendar year 2015.

Filipinos were more likely to be denied than other ethnic groups, followed by the catchall “other” category.

### OUTCOMES

Despite higher levels of participation in CalFresh relative to other ethnic groups, African Americans had the highest level of food insecurity.

Food Insecurity in SF Households by Ethnicity, 2013



Source: 2013 Current Population Survey, December Supplement

13

Food insecurity is a household condition of limited or uncertain access to adequate food. The CalFresh benefit alone is too low to purchase adequate food. Achieving greater food security among low-income people in San Francisco requires collective impact.

Recall that most low-income people in San Francisco are Asian or white, but considering the small African-American population size, African Americans are highly over represented among the low-income population.

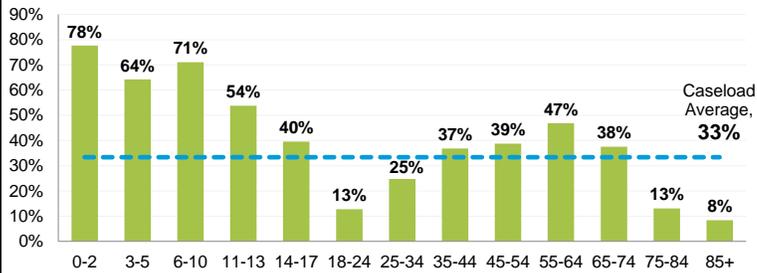
Food security data are only available by ethnicity.

## Areas for Improvement: Age

### ACCESS

Seniors and young adults had very low uptake rates, which may be partially due to eligibility restrictions for these populations.

Non-Assistance CalFresh Uptake by Age, June 2016



Sources: June 2016 NAFS Caseload (CalWIN) and 2014 5-Year American Community Survey (Census)

15

Uptake was very low among young adults (13%) and older seniors (8%). Additional eligibility restrictions that affect populations may play some role, but not enough to account for the gap.

College students living in dorms are excluded from the “likely eligible” populations.

Another group that stands out are children, who are participating at high rates. Other children are likely participating in CalWORKs, which provides “public assistance CalFresh” and is not included here

## Key Lessons

### KEY LESSONS

1. CalFresh efforts to promote equity in access, treatment, and outcomes have been remarkably successful.
2. But there are opportunities for improvement.
3. The link between CalFresh and food security is complex.

17

Current efforts include:

- Ongoing focus on language capacity.
- Phone, digital, and community-based opportunities for clients (48% of new applications are online).
- Expansive and remarkably effective network of CBOs that assist with applications (improve application approval rates by over 20%).

Key directions for improvement:

- Need to develop more diverse partnerships to help people of all languages, ethnicities, and ages apply and stay on CalFresh.
- Effective communication is a broader challenge than just language capacity.
- Linking clients to other HSA and citywide services is critical (SF is leader on connecting clients to both CalFresh and Medi-Cal, but there are many more services that are relevant for positive outcomes.)
- Food security must be addressed collectively with other needs such as health, child care, and housing. HSA has some direct control over access and treatment, but equity of outcomes is much more challenging to impact.