

# EQUITY in Standards of Care: A San Francisco Shelter System Analysis

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## Executive Summary

This emergency report is being presented to draw attention to (1) concerns that significant inequities remain unaddressed in San Francisco's shelter system; and (2) significant gaps in the available data, making an objective assessment harder than it should be to arrive at.

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Vulnerable and historically marginalized populations are by some measures experiencing adverse outcomes at higher than average rates. We do not say that “equality of outcome” is always achievable; however, when there are systematic patterns of results that are below the norm or of high rates of punitive actions taken—especially if based on subjective decisions—it is unacceptable that these go unnoticed. On the contrary, we must be diligent in spotting these and in giving them the extra attention that is called for.

HSH and the Homelessness Oversight Commission should take steps as soon as feasible to enhance data capture to cover elements needed to measure outcomes of historically marginalized populations, to be able to say whether they are lagging behind other demographically distinct groups. Subsequently, the Standards of Care need to be updated so that the language used reflects the current consensus on the meaning of “respect and dignity.”

## **Introduction**

The Shelter Monitoring Committee provides information about the conditions in and operations of shelters, as well as City policies in place that affect operations of shelters or their impact on shelter clients. Using as their guide a list of approved [Standards of Care](#), Members conduct site visits to gather information relevant to: 1) health and safety conditions in shelters, 2) the adequacy of policies and procedures governing each facility, and 3) the treatment and personal experience of shelter residents in the shelters. Committee members give shelter residents the opportunity to discuss shelter conditions with the members of the Committee. The Committee prepares reports on the safety in the shelter, cleanliness, disability access, and information received regarding the treatment and personal experiences of shelter residents.

## **Authority and Mandate**

In order to enable the Committee to prepare reports, City departments that contract for services at a City-funded shelter that is under review must respond within 15 days to any reasonable request for information submitted by the Committee relative to the shelter or to City policies that affect shelter clients. The reports shall also include recommended action steps for the shelter and for the City department that contracts for services at the shelter. City departments and the reports referenced in this subsection shall not identify shelter residents or disclose any confidential information concerning shelter residents consistent

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with state and federal law. The Committee may issue emergency reports at any time it deems necessary. The reports shall be provided to: 1) the Mayor, 2) the Board of Supervisors, 3) the Commission, 4) the appropriate City department responsible to take action, 5) the City department that contracts for services at the shelter, 6) the shelter under review, and 7) the public. These reports shall be public documents. Any City department identified in the report as responsible to take action recommended in the report shall, within 30 days of issuance of the report, provide to the Board of Supervisors a departmental report setting forth how the department intends to respond to the Committee's recommendations.



### 3. Definition of Equity in Standards of Care

What “equity” means in this report:

**Equity** in shelter [Standards](#) means structuring operations so BIPOC and other historically marginalized participants experience the same dignity, safety, and access to services as others. Operational equity includes consistent access to basic resources such as showers, laundry, hygiene supplies, and meals without unnecessary barriers. It also requires staff training in trauma-informed care, cultural humility, implicit bias awareness, and anti-racist practice. Equitable operations emphasize de-escalation practices rooted in relationship-building, behavioral health support, and restorative approaches rather than punitive responses. Staffing models must include adequate coverage, trained peer staff, and behavioral health support so that crises are addressed through care rather than enforcement. Language access, culturally appropriate supplies, and fair rule enforcement are also part of equitable service delivery. Measurable equity implies that programs are contractually

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obligated to review operational data such as service access, disciplinary actions, and grievances by race and ethnicity to identify and correct disparities.

Protected classes and populations considered

Relationship between equity, minimum conditions of care and outcomes.

Equity, minimum conditions of care, and participant outcomes are closely linked within shelter systems. Minimum conditions of care establish the operational baseline, including access to showers, laundry, meals, safe sleeping space, trained staff, and fair grievance processes. Equity shapes how these conditions are implemented so that access to resources, rule enforcement, de-escalation practices, and staff interactions do not reproduce racial disparities that many BIPOC participants experience in other institutions. When these standards are implemented equitably, participants are more likely to experience safety, stability, trust in staff, and sustained engagement with services. Data collection should therefore measure whether participants' lived experience within the system reflects equitable treatment while they are actively receiving services, not solely compare outcomes across racial or cultural groups after the fact. This includes assessing daily access to resources, interactions with staff, conflict resolution practices, and perceptions of safety and dignity. Strong outcomes depend not only on the presence of minimum care standards but on whether participants experience those standards as equitable in practice.

## 4. System Context

Relevant recent equity or system reports

Home by the Bay Equity report: [HBTB\\_Equity\\_Addendum\\_FINAL\\_11.21.25.pdf](#)

Strategic initiatives that include equity elements

Within the San Francisco shelter system, racial equity goals are typically articulated at the strategic or policy level and focus on reducing disparities in access, utilization, and outcomes across racial and cultural groups. Strategic objectives often reference commitments such as reducing racial disproportionality in homelessness, improving access to housing resources for Black and Indigenous residents, and ensuring that services are culturally responsive. These

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goals frame the system's long-term direction and emphasize measurable improvements in outcomes such as shelter access, housing placement, and service engagement across different racial groups. In this context, racial equity is often discussed through planning documents, systemwide strategies, and outcome metrics that track whether disparities in homelessness and housing stability are narrowing over time.

**Operational standards of care**, by contrast, function at the day-to-day level of shelter management and define the minimum conditions under which services must be delivered. These standards govern elements such as access to showers and laundry, staff coverage ratios, de-escalation protocols, grievance processes, and staff training requirements. Operational equity emerges through how these standards are implemented in practice: whether rules are enforced consistently, whether de-escalation is applied fairly, whether BIPOC participants have the same access to resources and staff support, and whether interactions with staff reflect trauma-informed and culturally responsive practices. While racial equity goals measure system-level disparities in outcomes, operational standards of care determine the *lived experience* of participants inside shelters. For this reason, evaluation must include data that captures participants' real-time experiences of safety, access, dignity, and treatment within the system, not only outcome comparisons across racial groups *after* services conclude.

## Methodology

This report relied on information from site visits, interviews of clients, and records maintained by Committee staff and the Department of Homelessness and Supportive Housing.

Data requests issued

Limitations (missing data, timeline, etc)

In 2024, inspired by efforts that the Department of Homelessness and Supportive Housing was undertaking, SMC asked staff to begin systematically tracking key demographic markers of clients that approached us for assistance. The goal was to ensure that no readily identifiable segment of the population was given less attention than others.

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Breakdown of shelter population demographics (July 2024 - June 2025):

10,588 total shelter guests

**Race and Ethnicity**

377 Asian 4% of total

2,935 Black 28% of total

2,365 Latin or Hispanic 23% of total

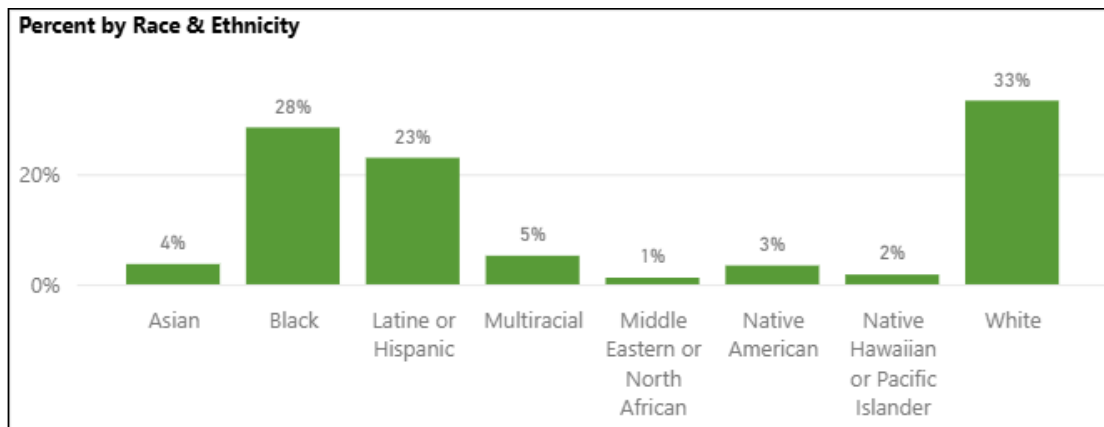
534 Multiracial 5% of total

122 Middle Eastern or North American 1% of total

351 Native American 3% of total

182 Native Hawaiian or Pacific Islander 2% of total

3,438 White 33% of total

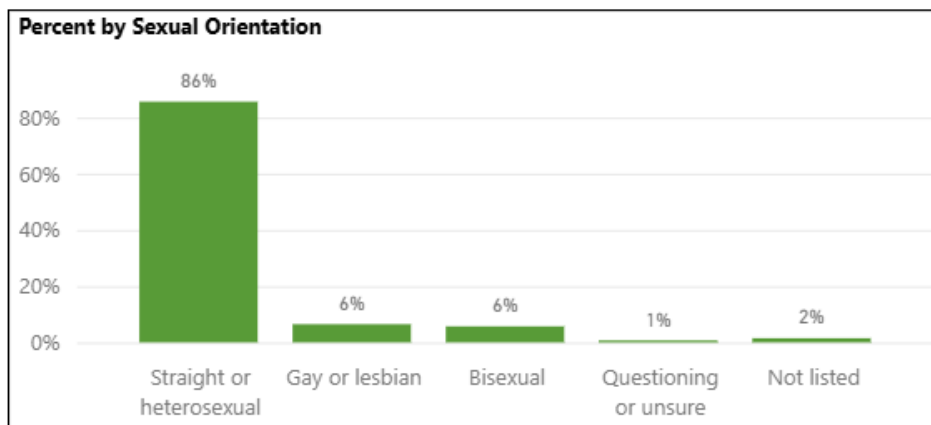


Race and ethnicity is "Data Not Collected" or "Doesn't Know" / "Prefers Not to Answer" for **3%** of guests.

**Sexual orientation**

7,777 Straight/ heterosexual 86%; 588 Gay or Lesbian 6%; 64 Questioning/ unsure 1%;

136 not listed 2%

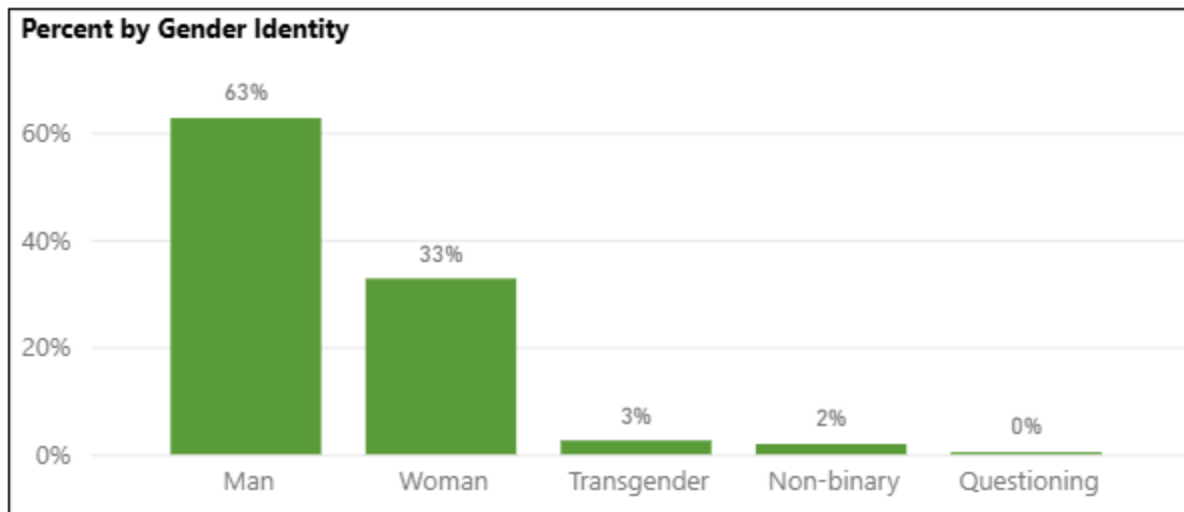


Sexual orientation is "Data Not Collected" or "Refused" for **14%** of guests.

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## Gender Identity

6,559 Man 63%  
3,430 Woman 33%  
270 Transgender 3%  
200 Non-binary 2%  
3 Questioning 0%



Gender identity is "Data Not Collected" or "Doesn't Know" / "Prefers Not to Answer" for **1%** of guests.

Findings (July 1, 2024 - December 31, 2025):

Of 118 **women**, **44%** were forwarded; **48% of men's** complaints were forwarded; and **63% of non-binary** complaints were sent to the shelter for a response.

Of the 160 cases we did not forward, 42% were women, 53% men and 5% non-binary.

Of the 148 we did forward, 11% were non-binary; 35% were women; 53% were men.

White, Non-white and Unk race clients today:

56/106 **white** clients had their complaints referred → **53%**

95/205 **non-white** did → **46%**

3/28 **Unk** race clients did → **11%**

At first blush, this seems like a potential disparity, i.e., white clients are more likely to have their cases referred. The unknown stat is actually not surprising, insofar as almost all cases where the

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race is unknown are in reference to clients who did not ID themselves and who we could not get back to and/or did not follow up with us.

Looking at Sexual Orientation (Straight vs non-straight):

**50% of Straight** clients had their complaint submitted  
**48% of Non-straight** clients.  
**18% of Unknown** sexual orientation

Gender (Trans vs Non-trans incl non-binary):

**53% of Trans clients** had their complaints submitted  
**49% of non-trans** clients had their complaints submitted  
**5% of Unk gender** clients had their complaint submitted

Looking at Language (English vs non-English):

**49% of English-speaking** clients had their complaint submitted  
**49% of non-English-speaking** clients had their complaint submitted  
**0%** of those whose primary language was **unknown** had their complaint submitted.

## Standards-of-Care Equity Review

Safety (SOC #2) is among the high-priority concerns the Committee has. Deescalation is always preferable to requesting police intervention.

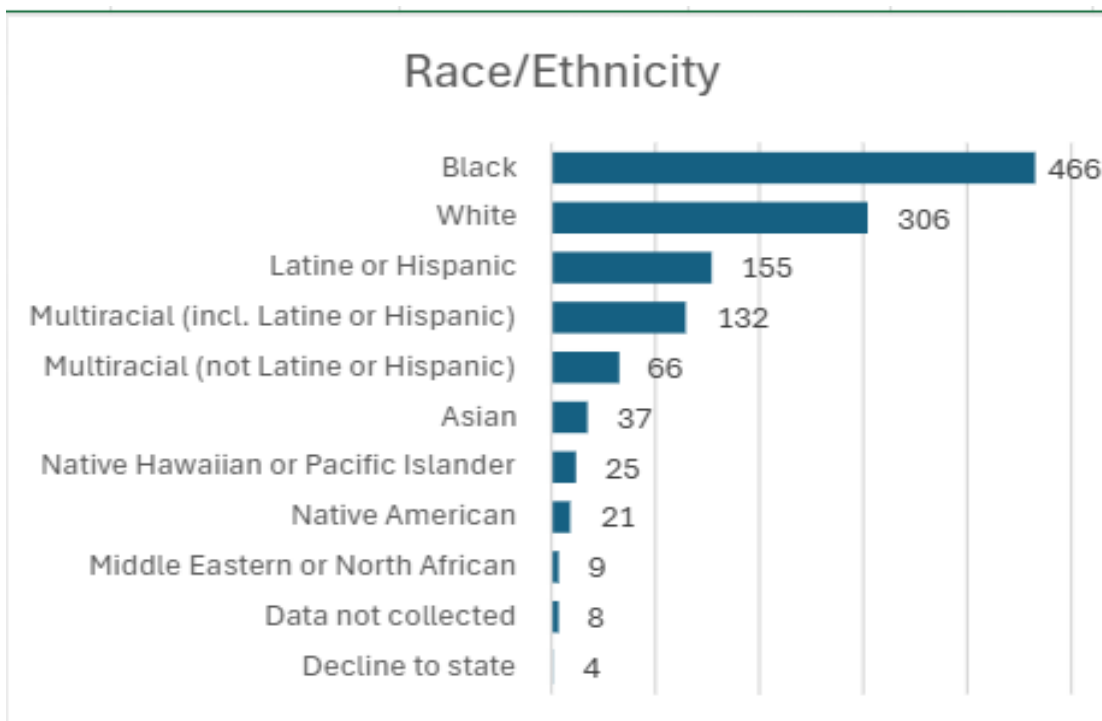
The 2025 [Controller's Report](#) stated that "...There are significant challenges in working with available data that make it difficult to assess the impact of services, or answer key questions about how shelter is functioning. Half of exit destinations in FY23 and FY24 were recorded either as missing or "other", and some demographic information, particularly reported disabilities or substance use disorder, have large numbers of missing reports."

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## Findings

In reviewing our own internal data, SMC staff found that white clients are more 7% likely to have their cases referred 7% more frequently than non-white clients. This is an important data element to keep a watch on. The formal conveyance of a written, on-the-record complaint to the shelter is an important tool in incentivizing adherence to the Standards.

We were pleased to have received data on **Denials of Service** (DOS) from HSH in time to include in this report. Here is a breakdown of the total by race:



1,229 unique clients experienced at least one DOS between 10/1/2024 and 12/31/2025. One concern immediately jumps out: While making up 26% of the unhoused population, Black guests were impacted by 38% of the service denials. (White guests, 33% of the sheltered population, constituted 25% of the DOS's.)

Other comparisons bear ongoing examination. For example, in looking at DOS's relative to sexual orientation, we found that 14% of clients who were DOS'd reported being gay, bisexual or questioning, while overall 13% of clients fall into this demographic segment. Strikingly, however, 86% of clients report being heterosexual; only 77% of DOS's impacted this population.

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*We note, too, that fully 25% of DOS's are for "disruptive behavior" or "credible threats of violence," both of which allow a substantial degree of subjective judgement to enter into decisions that obviously can be extremely adverse for our un- and under-housed population.*

Other data is still under review, but there are more signs of potential inequities. For example, Jerrold Commons, which focuses on older clients, has had one of the highest rates of critical incidences (physical altercations, medical emergencies, etc.) since it was opened.

## Data Gaps

The 2025 [Controller's Report](#) stated that "...There are significant challenges in working with available data that make it difficult to assess the impact of services, or answer key questions about how shelter is functioning. Half of exit destinations in FY23 and FY24 were recorded either as missing or "other", and some demographic information, particularly reported disabilities or substance use disorder, have large numbers of missing reports."

We concur. In January of this year, the Committee Chair and staff asked HSH/HOC for 30 data elements to assess how well equity goals are being achieved. HSH was able to provide information relative to 11 of the 30 (highlighted below). However, a variety of measures that would be useful are apparently not kept.

1. Counts of service denials, by shelter site, program type, reason for denial, and time of day – OneSystem Team February 6<sup>th</sup> Marion will speak with OneSystem Team and submit request if feasible

2. Number of repeat service denials for the same individual (using anonymized IDs)-Onesystem team of repeats and we can look further at the client's file-staff-February 6<sup>th</sup>

3. Average wait time to access shelter or services (like coordinated entry ect., OneSystem), by site and shift (data officer, Onesystem)-HSH, HSA

4. Number of grievances (MSC data) or (appeals related to service denial)

5. Records of rule violations and disciplinary actions, by site and type-Demographics (Site Request) (Data Officer) February 20<sup>th</sup>

6. Outcomes of disciplinary actions (warning, suspension, expulsion, ban) (Site Request) (SCA) (OneSystem)

7. Length of service interruption caused by disciplinary actions (Onesystem data review) February 13<sup>th</sup> as possible landing data

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8. Number of permanent bans versus temporary suspensions (Onesystem data review) February 13th as possible landing data

9. Grievances related to discipline or rule enforcement (Subcommittee Chair) SMC files

10. Incident reports involving safety or harm (assaults, overdoses, medical emergencies), by site and shift (DataOfficer) (Gatekeeper for the Critical Incident Report, HSH Shelter Team Manager question)

11. Staff and emergency response times to safety or medical incidents (DataOfficer)

12. Staffing levels at the time incidents occurred (Dataofficer)

13. Environmental complaints (sanitation, lighting, temperature, noise, accessibility), by site (Subcommittee Chair) SMC files

14. Number of grievances filed, by category and shelter site (Subcommittee Chair) SMC files

15. Time to grievance resolution (Subcommittee Chair) SMC files

16. Resolution outcomes of grievances (Subcommittee Chair) SMC files

17. Use of language access or grievance assistance (Subcommittee Chair) SMC files

18. Case manager assignment changes and service interruptions, by site (Dataofficer)

19. Average caseload per staff member, by shelter (Dataofficer) 25 to 1-contractual agreement- can change based on the needs of the guests. 5 guests sessions per day expectation

20. Staff vacancies and turnover rates, by program or site (Dataofficer)

21. Average length of stay without completion of a service plan (Dataofficer)

22. Requests for ADA or medical accommodations and fulfillment rates (Dataofficer)

23. Time to provide requested accommodations (Dataofficer)

24. Denials of accommodation requests (Dataofficer)

25. Interpreter requests and provision rates (Dataofficer)

26. Aggregated demographic composition of shelter residents by site, where available (Dataofficer)

27. Aggregated counts of denials, discipline, and grievances by site relative to resident population (Dataofficer)

28. Intake geography (ZIP code or census tract), anonymized (OneSystem)

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29. Shelter placement by intake geography (OneSystem)

30. Length of stay by intake (OneSystem)\*

*\* HSH has indicated that information highlighted in green is or will be made available,*

HSH told the Committee it will be hard or impossible to provide some of the items we requested. A good deal of information was provided after staff clarified that we would even just the subset of information, that which would not take weeks to produce, would be helpful. More knowledge can be gleaned from the data if steps are taken to capture it.

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## Recommendations

1. SOC verbiage needs to be updated to be clearer that “equality” is potentially unfair. Equitable treatment, by whatever name one chooses to call it, is what we should be pursuing.
2. HSH should begin recording as many of the data elements listed above as is feasible.
3. HSH should scrutinize DOS’s more closely, especially at shelters with higher than average rates, to recognize and address any discrimination (conscious or unconscious) on the part of decisionmakers.
4. Subjective reasons for DOS need to be reexamined and, to the degree practicable, limited.
5. HOC should request updates monthly, pressing HSH for progress on the above recommendations.

## Implementation and Accountability

If this report is approved by the Committee, we will ask the HOC to recognize the recommendations made and to take action to continue to pursue this critical issue.

SMC Chair Illo has emailed the Clerk to request a slot on the agenda of the Board of Supervisors' March 31 meeting. SMC has completed work on a new intake tool, to replace their manual recordkeeping approach to monitoring new complaints.

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## Conclusion

This Committee was established 20 years ago, when more and more people were living on the street and conditions in shelters were unconscionably bad—often dangerous and inhumane. There was a homeless crisis. At the same time, there was a great deal of hope that a resolution was possible, perhaps even over the course of the next few years. Given the challenges that have become apparent over the intervening years, even with the resources available in San Francisco, shelters will continue to provide refuge to many of our neighbors for the foreseeable future. It is incumbent on those with influence over the day-to-day operations of these sites to catch and correct systemic inequities and other violations of the dignity and human rights of guests.

## Appendices & References

[SMC Enabling Legislation ARTICLE XII](#)

[Approved Standards of Care for City-Funded SHelters](#)

Home by the Bay Equity report: [HBTB\\_Equity\\_Addendum\\_FINAL\\_11.21.25.pdf](#)

[City Discrimination Policy - Article 33](#)

### Testimony (Excerpts from Complaints made through the SMC)

“...experienced repeated discrimination based on her gender identity. Upon arrival, security initially refused her entry and only allowed her access after management was contacted. Since then, she has been repeatedly questioned by staff about why she is in the women’s dorm and has been compelled to disclose her gender identity multiple times. She reports that night security has treated her rudely, asking why she is in the women’s dorm and, on occasions when she wore women’s clothing, pointing and laughing at her...”  
(Guest at a congregate shelter, August 2025)

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“...[Shelter staffer’s] behavior was perceived as hostile, and the other resident accused him of racial profiling. The complainant also believed he was targeted because both individuals involved were Black. In the past during a standard check-in, [shelter staff] demanded that the complainant dump the entire contents of his backpack into a bin, despite other staff not requiring this...” (Guest at a congregate shelter, August 2025)

“The complainant reports that since entering the site, she has experienced discrimination based on her transgender identity. According to the complainant, she has been consistently harassed by other guests at the site. Most staff members have been indifferent to her experiences, including an incident in which one individual mockingly pretended to spit at her. The complainant further states that staff singled her out by requiring her to wait until bathrooms were completely empty before she could use them....her case manager called her into the office and questioned her appearance, asking why she was not dressed in a more feminine manner and why she had not legally changed her name. The case manager also asked about her sexuality, despite the complainant’s visible discomfort...” (Drop-in center, September 2025)

“...Staff became irritated with [an IHSS employee’s] response and began asking if she could understand, if she spoke English, and then raised their voices, insisting that she clean out the locker and reduce the client’s property, citing health hazards. The staff behaved rudely and made racist remarks toward the worker due to her Latin background...” (Congregate shelter, September 2025)

“...[Staff made ] a derogatory remark referencing the complainant as a “punk ass white boy” as he walked away. This statement was made in a humiliating and hostile manner, in the presence of others. The complainant further reports that their girlfriend, who is transgender, has been referred to by staff as “a thing,” which constitutes dehumanizing and discriminatory language based on gender identity...” (Nav Center January 2026)