

Report and Recommendations of the Ad Hoc Committee on Women & Homelessness



August 2017

Table of Contents

Executive Summary	1
Background	3
Key Themes & Findings	4
Recommendations	18
Conclusion	25
Appendix I: Committee Members	27
Appendix II: Committee Schedule and Meeting Topics	28
Appendix III: Glossary of Key Terms	30
Appendix IV: 2017 Greater Los Angeles Homeless Count Data Summary	32
Appendix V: Written Testimony Provided to the Committee	33
Appendix VI: Los Angeles LGBT Center Tip Sheet	37

Executive Summary

This report is intended to inform policymakers, service providers, and other stakeholders about the findings and recommendations of the Los Angeles Homeless Services Authority (LAHSA) Ad Hoc Committee on Women & Homelessness, created to confront the issue of rising homelessness among women in Los Angeles County. The Committee's work, as reflected in this report, aimed to highlight the unique and diverse needs of women experiencing homelessness and to influence service delivery and the direction of resources to more effectively address these needs.

Several notable characteristics of women experiencing homelessness identified through the Committee's work include:

1. High rates of experience with violence, including domestic and intimate partner violence;
2. High rates of human trafficking, including both labor and sex trafficking;
3. High financial vulnerability, especially among older women who have lower incomes and are more likely to live in poverty than their male counterparts; and
4. Increasing rates of poor physical and mental health.

Through each of the areas explored, a key theme that emerged from the Committee's work was the need for all services to be delivered through a gendered, trauma-informed lens. The importance of including the perspective of individuals with lived experience throughout all levels of service delivery, from planning through implementation and evaluation, was also emphasized. Another theme that consistently arose throughout the Committee's work was the significant impact that the lack of housing resources across LA County has on women experiencing homelessness.

The Committee's recommendations, as outlined in this report, are wide-ranging and addressed to decision makers and service providers across Los Angeles County. Recommendations focus around five specific areas:

1. Enhanced data and reporting to better understand and track issues affecting women;
2. Expanded capacity building and training opportunities to equip service providers to address the unique needs and experiences of women, including transgender women;
3. Targeted funding enhancements to ensure services address subpopulation needs;
4. Improvements to service delivery at all levels, including:
 - Outreach
 - Prevention
 - Interim Housing
 - Permanent Housing
 - Supportive Services; and
5. Advocacy around state and local policy priorities.

Throughout its work, the Committee has sought to align with and supplement the efforts of leaders across the City and County of Los Angeles to implement, fund, and develop policies around the City and County's Comprehensive Homeless Strategies. The Committee has also been an active voice throughout the County's Measure H budget development process, and several of the Committee's recommendations can be seen in the resulting funding allocations.

This report summarizes the key findings that have emerged throughout this Committee’s work, highlights the progress made to date as a result of these efforts, and outlines the commitments needed at the County, City, and provider levels to carry this important work forward. The goal of this critical ongoing effort is to reduce the incidence of homelessness among women in Los Angeles County by ensuring strategic approaches to program design, funding distribution, and service delivery that account for and address the unique needs and challenges of this especially vulnerable population.

Background

Overview

In May 2016, the Los Angeles Homeless Services Authority (LAHSA) released results from the January 2016 Greater Los Angeles Homeless Count, an annual point-in-time estimate of the County's population experiencing homelessness. The Count revealed a troubling rise in homelessness among women in the Los Angeles Continuum of Care, including a 70% increase in the number of unsheltered females since 2009. These results, coupled with findings of a 2016 needs assessment released by the Downtown Women's Action Coalition (DWAC), generated concern and heightened attentiveness to this issue by the LAHSA Commission, Los Angeles City and County leaders, and members of the community. A recognition that women experiencing homelessness face unique risks and challenges further highlighted the need for action to address this specific facet of the homelessness crisis in Los Angeles County.

Committee Formation

In response, Chair of the LAHSA Commission, Wendy Greuel, called for the creation of an Ad Hoc Committee on Women & Homelessness, which the Commission approved in November 2016. The Committee began its work in December 2016 and has covered a wide range of issues, including experiences of women within the existing homeless service delivery system, domestic and other forms of violence, human trafficking, immigration, workforce development, and gender diversity.

The purpose of the Committee has been to provide focused attention to the issue of women's homelessness, identify opportunities to reduce the prevalence of homelessness among women, and develop recommendations for how to meet the challenges of serving this vulnerable population. Commissioner Greuel chairs the Committee, which is composed of 19 members, including service providers, advocates, thought leaders in the field, people with lived experience of homelessness, and representatives from the City of Los Angeles and County of Los Angeles departments, as well as the offices of Senator Dianne Feinstein, Mayor Eric Garcetti, and the Supervisors Mark Ridley-Thomas and Sheila Kuehl. See Appendix I for a full list of Committee members.

Committee Goals

Since its creation, the Committee's primary goal has been to understand, consider, and address the needs of women within the homeless crisis response system. To accomplish this, the Committee sought to provide a forum for discussion of issues critical to understanding and addressing the needs of women experiencing homelessness. The Committee has held eight public meetings and has invited presentations from experts in the field, as well as feedback from the public at each meeting. The meetings have generated rich discussion and increased public attention to issues impacting women affected by homelessness. See Appendix II for a full schedule of the meetings held and the topics discussed.

Another core goal of the Committee has been to develop and promote a set of recommendations to the LAHSA Commission, the County, the City, and other stakeholders, to ensure that the specific needs of women experiencing homelessness are at the forefront of policy and budgetary decision-making, particularly throughout implementation of the City and County's Comprehensive Homeless Strategies. This report outlines key themes that have emerged from the Committee's work, as well as the Committee's resulting recommendations.

Key Themes & Findings

What We Know: Data from the 2017 Greater Los Angeles Homeless Count

The annual Greater Los Angeles Homeless Count, conducted in January 2017, provided critical point-in-time information about homelessness in Los Angeles. The 2017 Count revealed a 23% increase in the number of people experiencing homelessness on any given night across Los Angeles County compared to 2016; a total of 57,794 individuals. The number of females¹ increased by 16% in this time; a total of 17,882 females experiencing homelessness across Los Angeles County (Graph 1).²

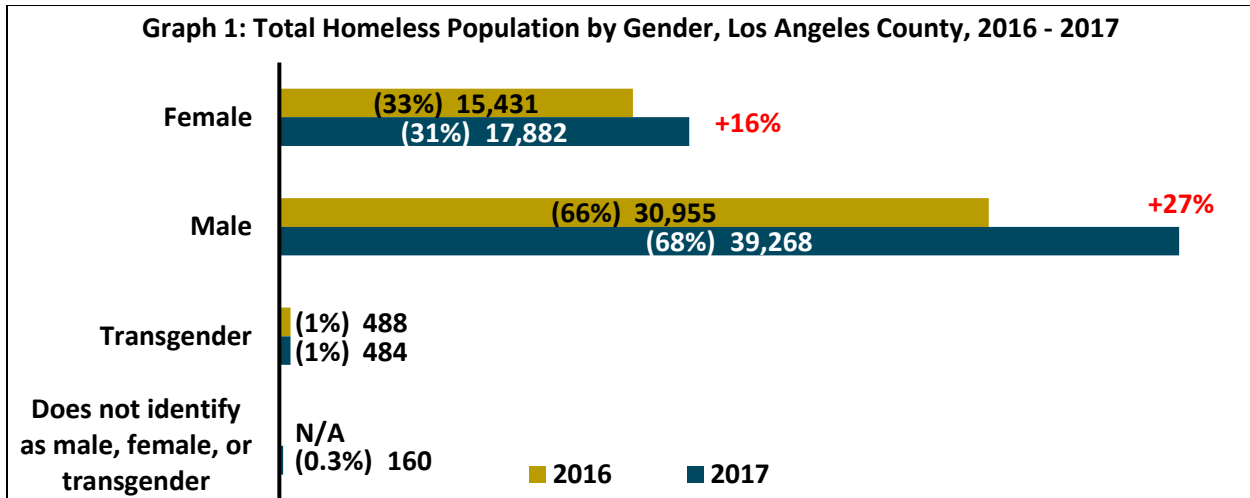


Table 1: Total Number of Females Experiencing Homelessness by Service Planning Area, Los Angeles Continuum of Care, 2016 - 2017

Service Planning Area	2016 Total	2017 Total	% Change
1- Antelope Valley	1,001	1,439	+44%*
2- San Fernando Valley	2,544	2,762	+9%
3- San Gabriel Valley	835	977	+17%
4- Metro LA	3,333	4,060	+22%*
5- West LA	1,354	1,189	-12%
6- South LA	2,789	3,506	+26%*
7- East LA County	1,043	1,730	+66%*
8- South Bay	1,145	1,396	+22%*
Totals	14,461³	17,059	+21%

*Indicates that the difference between the 2016 and 2017 counts is statistically significant

¹ Unless otherwise specified, “female” refers to individuals of all ages who self-identify as female.

² The category “Does not identify as male, female, or transgender” was introduced to the demographic survey for the first time in 2017.

³ Total represents the CoC-wide total for 2016. Because population estimates were generated independently for each SPA, this CoC-wide total is not equal to the sum of individual SPA estimates.

Across the Los Angeles Continuum of Care (LA CoC),⁴ females accounted for 31% of persons experiencing homelessness on any given night. The prevalence of females among the population experiencing homelessness was highest in Service Planning Area (SPA) 6 (South Los Angeles) and SPA 2 (San Fernando Valley), where females comprised 38% and 37% of the homeless population, respectively. The highest number of females were in SPA 4 (Metro Los Angeles) and SPA 6, with 4,060 and 3,506 females experiencing homelessness (Table 1).

Notably, compared to the January 2016 point-in-time Count, the number of females experiencing homelessness increased at a rate that far outpaced the increase in the overall homeless population in SPA 7 (East LA County), which saw a 66% increase in women compared to a 50% increase in the total number of individuals experiencing homelessness. Similarly, the number of females increased at nearly twice the rate of that of the total homeless population in SPA 2 (9% compared to 4%).

Table 2: Total Number of Females Experiencing Homelessness by County Supervisorial District, Los Angeles Continuum of Care, 2016-2017

Supervisorial District	2016 Total	2017 Total	% Change
SD 1	2,582	3,658	+42%*
SD 2	5,439	5,750	+6%
SD 3	3,257	3,566	+9%
SD 4	1,234	1,694	+37%*
SD 5	1,968	2,391	+21%*
Totals	14,461⁵	17,059	+18%

**Indicates that the difference between the 2016 and 2017 counts is statistically significant*

By County Supervisorial District (SD), the prevalence of females among the homeless population was highest in SD 4 (36%) and SD 5 (34%), while the greatest number of females was found in SD 2 (5,750) (Table 2). In SD 4, the increase in the number of females experiencing homelessness between the 2016 and 2017 Counts outpaced the increase in the overall homeless population (37% compared to 26%).

Females were highly prevalent among the homeless population in City of Los Angeles Council Districts (CD) 12, 8, and 6 (Table 3). Females comprised 50% of the homeless population in CD 12, 44% in CD 8, and 40% in CD 6. The highest number of females experiencing homelessness was found in CD 14 (2,036) and CD 9 (1,326).

Notably, CD 12 saw a slight decrease in the overall homeless population between the 2016 and 2017 Counts, while the number of women experiencing homelessness more than doubled in that time. Meanwhile, CD 3 saw a 16% decrease in the overall homeless population, while the number of women experiencing homelessness remained relatively unchanged.

⁴ The Los Angeles Continuum of Care covers all of Los Angeles County excluding the cities of Pasadena, Glendale, and Long Beach. Unless otherwise specified, data points discussed in this section are LA CoC-level data, as detailed demographic characteristics of females experiencing homelessness are only available at the LA CoC level.

⁵ Total represents the CoC-wide total for 2016. Because population estimates were generated independently for each Supervisorial District, this CoC-wide total is not equal to the sum of individual SD estimates.

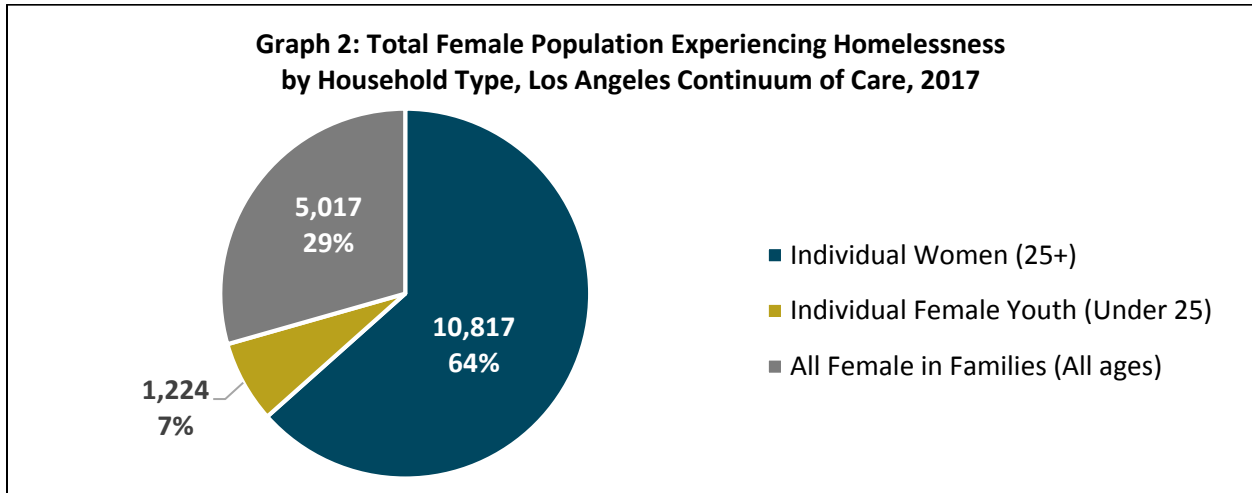
Table 3: Total Number of Females Experiencing Homelessness by City of Los Angeles Council District, 2016-2017

Council District	2016 Total	2017 Total	% Change
CD 1	459	829	+81%*
CD 2	406	266	-35%*
CD 3	155	154	+1%
CD 4	139	143	+3%
CD 5	215	433	+101%*
CD 6	758	826	+9%
CD 7	298	372	+25%
CD 8	713	967	+36%*
CD 9	1,150	1,326	+15%
CD 10	364	449	+23%*
CD 11	842	611	-27%
CD 12	168	437	+160%*
CD 13	878	877	0%
CD 14	1,535	2,036	+33%*
CD 15	574	835	+45%*
Totals	8,654	10,561	+22%

*Indicates that the difference between the 2016 and 2017 counts is statistically significant

Demographic Characteristics of Women Experiencing Homelessness (LA CoC)

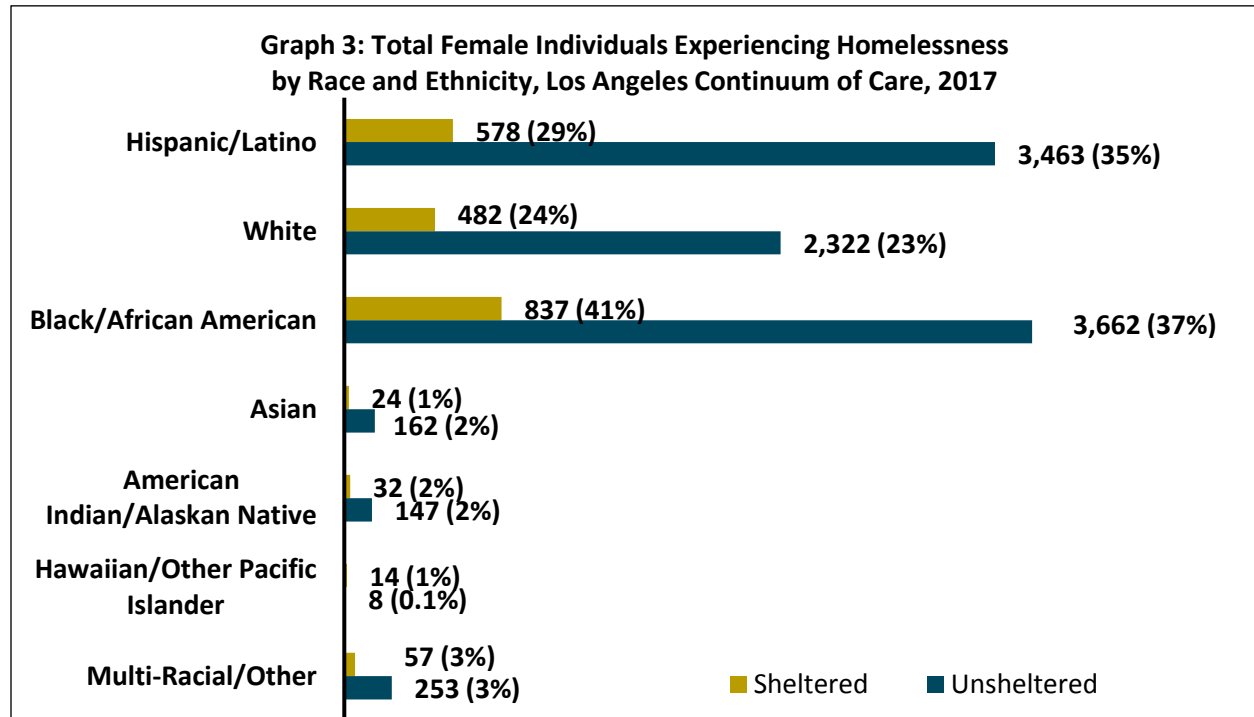
According to the 2017 Homeless Count data, of females experiencing homelessness, a majority (71%) were individual women (age 25 or older) or individual female youth (under 25), while female members of family units comprised 29% of the population (Graph 2).



Two-thirds (67%) of female individuals⁶ were between the ages of 25 and 54. Twenty-two percent (22%) were aged 55 and older; 10% were transition age youth (TAY, ages 18-24), and 1% were minor children (under age 18).

⁶ "Female individual" includes females aged 25 and above and female youth under age 25 experiencing homelessness who are not part of family units.

The largest share of female individuals identified as Black/African American (37%), followed by Hispanic/Latino (34%). The remaining 29% identified as White (23%), Asian (2%), American Indian/Alaska Native (1%), Native Hawaiian/Other Pacific Islander (0.3%), or Multi-Racial/Other (3%). Examining the sheltered⁷ and unsheltered⁸ populations separately, as seen in Graph 3, it is notable that Hispanic/Latino females accessed shelter at a lower rate than other racial/ethnic groups, as they make up 35% of the unsheltered population, but only 29% of the sheltered population.



Experiences of Homeless Women (LA CoC)

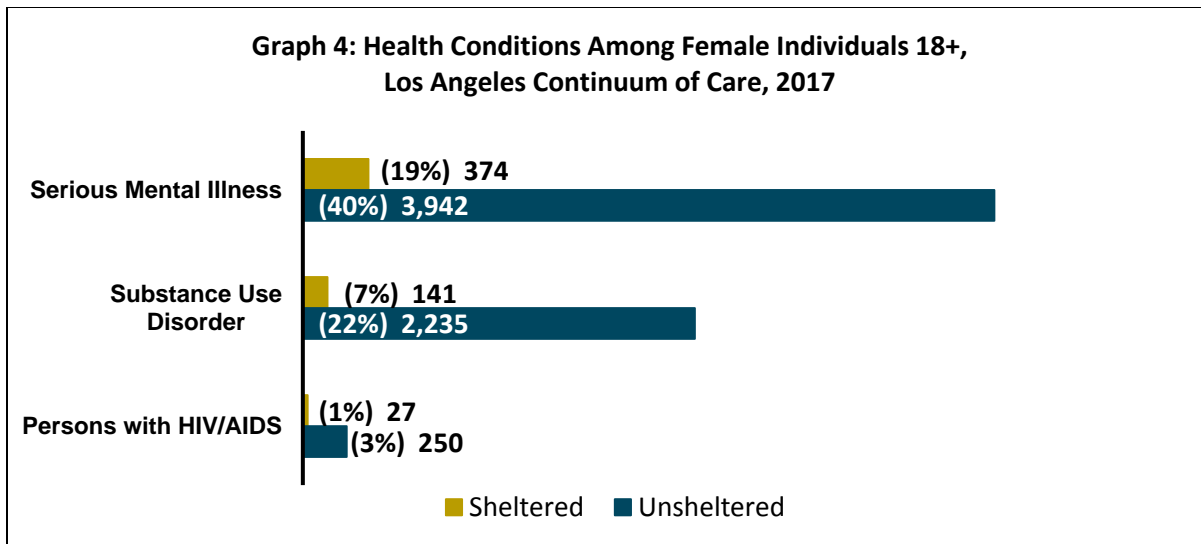
Among the population of female individuals aged 18 and above, more than one-third (35%) were chronically homeless,⁹ and 2% were veterans. A substantial number faced health-related challenges, including serious mental illness, substance use disorder, and HIV/AIDS (Graph 4).

Each of these health conditions was more than twice as prevalent among the unsheltered population compared to the sheltered population. Nineteen percent (19%) of sheltered females indicated they have a serious mental illness, compared to 40% of unsheltered females. The percentage of unsheltered females with a substance use disorder (22%) is more than three times that of sheltered females (7%). One percent (1%) of sheltered females had HIV/AIDS, compared to 3% of unsheltered females.

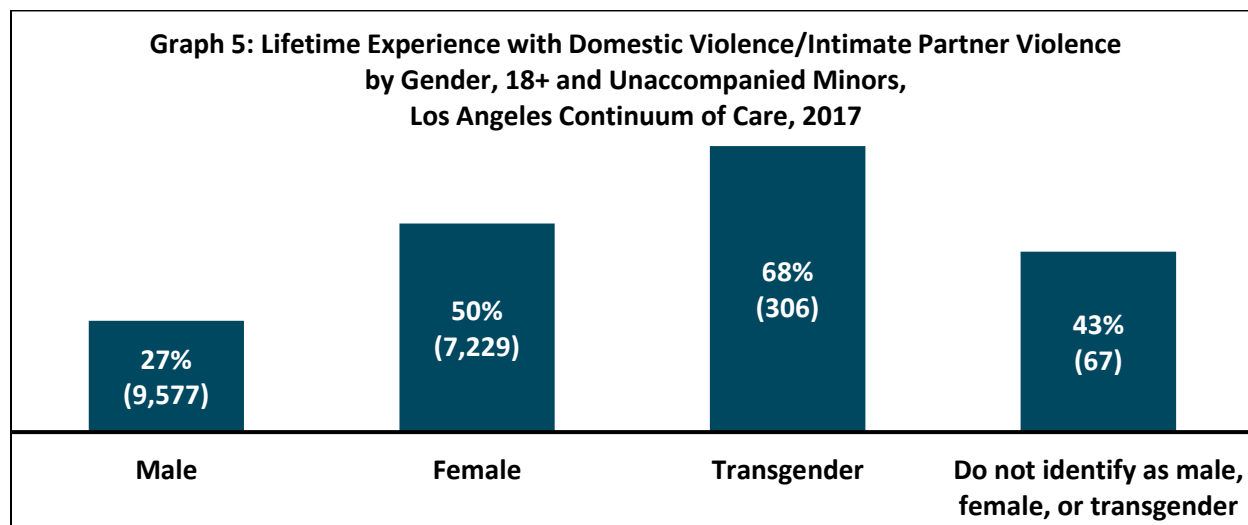
⁷ “Sheltered” is defined as: an individual/family living in a supervised publicly or privately operated shelter designed to provide temporary living arrangement.

⁸ “Unsheltered” is defined as: an individual/family whose primary nighttime residence is a public/private place not designed for or ordinarily used as a regular sleeping accommodation for human beings.

⁹ For the purpose of the Homeless Count, a person is considered chronically homeless if the following criteria have been met: (i) been homeless for a duration of one year or longer or experienced four episodes of homelessness that add up to one year; (ii) has one or more disabling condition (HIV/AIDS, alcohol abuse, drug abuse, mental illness, physical disability, physical illness, depression, post-traumatic stress disorder, traumatic brain injury, and developmental disability); (iii) disabling condition(s) is long term. This applies to single adults as well as families, if any family member within a family household meets the criteria.

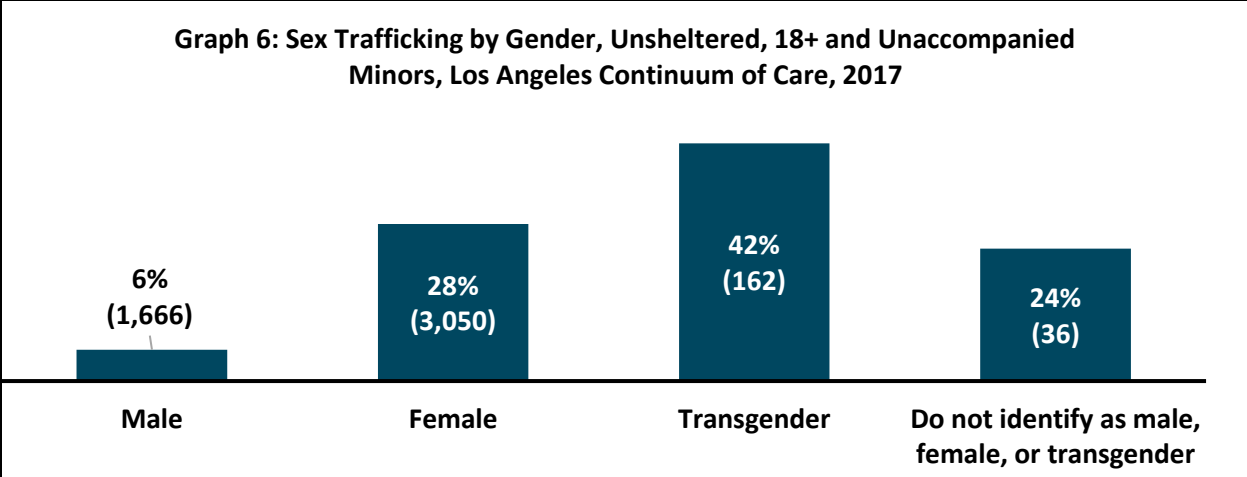


The 2017 Homeless Count data also showed that compared to men, nearly twice as many women experiencing homelessness on any given night had experienced domestic violence (DV) or intimate partner violence (IPV)¹⁰ in their lifetime. Half of all females aged 18 and above and unaccompanied minors experienced DV/IPV during their lifetime, compared to 27% of males (Graph 5). Notably, for the first time, the 2017 Homeless Count gathered data on sensitive topics such as health conditions and experiences of violence using response cards that provided people with more privacy using non-verbal responses. This change likely resulted in a higher level of reporting and greater data accuracy. In 2016, 12% of males and 36% of females had reported experience of domestic violence.



Among the unsheltered population, a history of sex trafficking was also highly prevalent, with 28% of females and 42% of transgender individuals reporting experience as victims of sex trafficking (Graph 6).

¹⁰ DV/IPV includes physical or sexual abuse by a parent/guardian/other relative or intimate partner, dating violence, and stalking.



Availability of Shelter Beds for Women and Families (LA CoC)

In addition to gathering information about the population experiencing homelessness, another critical component of the annual point-in-time Homeless Count is the Housing Inventory Count (HIC), which enumerates all existing shelter beds available within the LA CoC. According to data from the 2017 HIC, there were a total of 5,169 emergency shelter beds available year-round to families.¹¹ Data in Table 4 include all shelters serving families that are available to women with children.

Table 4: Year-Round Bed Inventories, Emergency Shelter for Families, Los Angeles Continuum of Care, 2017

Service Planning Area	Total Beds
SPA 1	413
SPA 2	650
SPA 3	509
SPA 4	886
SPA 5	316
SPA 6	1,287
SPA 7	573
SPA 8	535
Grand Total	5,169

Across the LA CoC, the HIC indicated there were a total of 3,371 emergency beds available year-round¹² for individuals, and only 17% (586) of those were specifically designated for women. Including beds that are not specifically designated by gender, the maximum number of beds potentially available to women was 663, or 20% of the total number of year-round emergency shelter beds. Table 5 shows the availability of beds for women by SPA.

¹¹ Data in Tables 4, 5, and 6 only represent those shelters operated within and/or funded by the LA CoC.

¹² Data in Table 5 exclude beds that are part of the winter shelter program, as these beds are only available for a portion of the year.

Table 5: Year-Round Bed Inventories, Emergency Shelter for Individuals, Los Angeles Continuum of Care, 2017

Service Planning Area	Total Beds	Maximum Beds Available for Women (#)	Maximum Beds Available for Women (%)	Women-Only Beds (#)	Women-Only Beds (%)
SPA 1	81	56	69%	56	69%
SPA 2	260	74	28%	74	28%
SPA 3	65	7	11%	5	8%
SPA 4	1588	258	16%	208	13%
SPA 5	213	30	14%	20	9%
SPA 6	665	187	28%	182	27%
SPA 7	228	29	13%	19	8%
SPA 8	271	22	8%	22	8%
Grand Total	3,371	663	20%	586	17%

In addition to emergency shelter beds available year-round, there were a total of 1,557 beds available to individuals¹³ through the Winter Shelter Program. Of those, 189 beds (12%) were specifically designated for women, as shown in Table 6. A total of 358 winter shelter beds (23%) were potentially available to women (i.e. not designated for men).

Table 6: Winter Shelter Bed Inventories, Emergency Shelter for Individuals, Los Angeles Continuum of Care, 2017

Service Planning Area	Total Beds	Maximum Beds Available for Women (#)	Maximum Beds Available for Women (%)	Women-Only Beds (#)	Women-Only Beds (%)
SPA 1	55	0	0%	0	0%
SPA 2	230	15	7%	15	7%
SPA 3	347	53	15%	53	15%
SPA 4	207	26	13%	21	10%
SPA 5	160	0	0%	0	0%
SPA 6	315	100	32%	100	32%
SPA 7	79	0	0%	0	0%
SPA 8	164	164	100%	0	0%
Grand Total	1,557	358	23%	189	12%

What We Know: Downtown Women’s Needs Assessment

Every three years since 2001, the Downtown Women’s Action Coalition has conducted the Downtown Women’s Needs Assessment – a community-based longitudinal research project that utilizes a comprehensive survey to identify the needs, characteristics, and conditions facing homeless and

¹³ The Winter Shelter Program does not serve families, but only individuals.

extremely low-income women living in downtown Los Angeles. This study provides additional insight into the demographic characteristics of this population, as well as an assessment of needs and resource gaps.

According to the most recent assessment, from 2016, women in Skid Row were far more likely to be older and African American than women in LA County, suggesting that these groups experience homelessness and extreme poverty at disproportionately high levels. Sixty percent (60%) of survey respondents were 51 and older (including 12% above age 62), an increase from 27% in 2001. Fifty-eight percent (58%) were African American, whereas 9% of women among the general population in LA County are African American.

Survey results also revealed troubling trends related to physical health and experiences of violence. Compared to the 2013 survey results, the number of women reporting fair or poor physical health in 2016 increased from 42% to 56%. Women surveyed also experienced high rates of violence. Ninety-one percent (91%) of respondents had experienced physical or sexual violence in their lifetime; 68% were survivors of child abuse, 55% of domestic abuse, and 39% of sexual assault. The assessment identified the persistently high rate of intimate partner violence as one of the most distinguishing differences between women and men experiencing homelessness.

In identifying resource gaps, the assessment highlighted the critical need for housing options. Seventy-three percent (73%) of respondents listed housing as the most-needed resource to improve the downtown community. Other resource needs identified were mental and physical healthcare, shelter beds or emergency beds, employment and training opportunities, and educational programs.

Summary of Committee Presentations and Discussion

The findings of both the demographic and needs assessment data discussed above have framed the Committee's work. Public meetings fostered robust discussions and solicited diverse feedback, including presentations from City and County departments, service providers, people with lived experience of homelessness, and other experts in the field, as well as comments from members of the public in attendance. The following section summarizes the information presented and discussed on each of the key topics that the Committee considered in its public meetings.

Lessons Learned: Previous Subpopulation Work

The Committee explored lessons learned from previous subpopulation work – specifically work targeted at ending veteran homelessness in LA County. Key strategies that contributed to the success of efforts around veteran homelessness included: (1) setting ambitious goals to guide work, (2) coordinating systems and training, (3) mapping systems and resources, (4) coordinating distribution of resources, (5) simplifying funding, and (6) sharing and coordinating data to improve system performance and measure success. Specific system-coordination efforts included creating a collaborative space to share best practices, establishing an experienced lead organization to coordinate resources and service delivery in each SPA, identifying and providing technical assistance, and building capacity of service provider organizations and programs.

Women and the Coordinated Entry System

At its second meeting, the Committee focused on the experiences of women served through the Coordinated Entry System (CES) in the LA CoC, as captured through client assessment data entered into

the Homeless Management Information System (HMIS). The CES assessment collects information related to the individual or family's immediate safety, history of housing and homelessness, risk factors, socialization and daily functions, and wellness. An important component is the immediate safety assessment (developed in consultation with family system and domestic violence agencies). If an individual's response to this safety assessment indicates that (s)he is currently fleeing violence and has experienced abuse in the past month, (s)he is immediately referred to the Los Angeles County Domestic Violence Hotline. Participants are then given the opportunity to either continue completing the survey or to decline for safety reasons.

CES assessment data collected from 2013 to 2016 indicate that women report having accessed crisis services (including sexual assault crisis, mental health crisis, family/intimate partner violence, distress centers, and suicide prevention hotlines) at least once in the past six months at a rate higher than that of men (32% compared to 21%). The gap is even more prominent between men and transgender women, of whom 37% report having accessed crisis services at least once, and 24% more than once in the last six months.

Women also report encounters with police (as witness, victim, or alleged perpetrator of a crime, or because police told them they must move along) at a slightly higher rate compared to men (37% compared to 35%). Forty percent (40%) of transgender women report at least one and 29% more than one encounter in the last six months.

Women report higher instances of violence and coercion than men. Nearly half (46%) report having been attacked or beaten up since becoming homeless. Among transgender women, the prevalence is even higher (63%). Twenty-five percent (25%) of women and 35% of transgender women responded yes to the question "Does anybody force or trick you to do things that you do not want to do?" Nearly half (45%) of transgender women report that they engage in high-risk activities (exchange sex for money, run drugs, have unprotected sex, share needles, etc.), compared to 23% of women and 24% of men.

There also appears to be a relationship between gender and the causes of homelessness, as well as the severity of needs when experiencing homelessness. Compared to men, higher percentages of women report their current homelessness is in some way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused their eviction (60% compared to 49%). On average, women receive acuity scores slightly higher than that of men (7.4 compared to 7.1), and transgender women score even higher on average (8.0). This score is an indicator of the level of vulnerability of the individual experiencing homelessness, on a scale of zero to 17.

Notably, according to housing placement data captured in HMIS, in 2016, whereas females accounted for less than one-third of the overall population experiencing homelessness, 43% (6,242) of all individuals placed into permanent housing were female. More analysis is needed to understand to what this is attributable – whether to women's higher acuity scores, to the higher likelihood that families with children have a woman as head of household, or to some other factor.

Outreach and Engagement

Another area in which the Committee focused attention was street outreach to women experiencing homelessness. Research presented highlighted that unsheltered women experience greater risks and challenges compared to sheltered women, including greater risk of poor physical health and poor mental health, higher utilization of alcohol or non-injection drugs, and greater likelihood of a history of physical assault. Compounding this problem, unsheltered women are also less likely to utilize health services, including drug treatment.

In addition to these increased risks, unsheltered women confront unique challenges such as seeking access to clean restrooms during menstruation, protecting against unintended pregnancy, ensuring health of self and baby in the event of pregnancy, finding ways to generate income while ensuring safety, and seeking reunification with their children. Adequately serving women experiencing these challenges requires a women-centered approach to street outreach, including gender parity on outreach teams and services that are sensitive to the unique needs of women.

Supports for Women in Permanent Housing

The Committee discussed specific ways to support women in permanent housing placements, including various considerations that are often not addressed, such as safety (including safe outdoor and community spaces), overall aesthetics of space, support in reunifying with children or family members, and access to child care. The Committee recommended adding to the County research agenda a thorough analysis of what women need to feel safe, build community, and succeed in permanent housing.

Needs of Older Adult Women Experiencing Homelessness

The Committee also discussed research on the characteristics and needs of older adult women experiencing homelessness. Many seniors rely on a limited and fixed income to meet their basic life necessities, and this economic vulnerability, combined with limited affordable housing options for seniors, makes them susceptible to homelessness, particularly later in life. Older women are particularly at risk, as they are more financially vulnerable than older men and more likely to live in poverty. According to U.S. Census 2014 American Community Survey data, 15% of women aged 65 and older in LA County live in poverty, compared to 12% of men in the same age group.

This vulnerability is exacerbated by the high cost of living in LA County. According to the California Elder Economic Security Standard Index for Individuals, in Los Angeles County, the cost of living for an elder (age 65+) renter is \$22,827 annually, compared to women's median retirement income of \$17,029 – a gap of nearly \$6,000. Also contributing to the vulnerability of this population is an increasing rate of isolation among senior women, which is often associated with decreased mobility and a lack of transportation options, and may exacerbate physical and mental health issues that contribute to homelessness. Finally, research indicates that women first become homeless later in life compared to men and often as the result of the death of a spouse or divorce.

Human Trafficking

The Coalition to Abolish Slavery & Trafficking (CAST) shared research and recommendations with the Committee pertaining to unique needs and experiences of human trafficking survivors.¹⁴ Of trafficking survivors served by CAST in LA County, 50% are survivors of labor trafficking, 46% of sex trafficking, and 4% are survivors of both. A large majority (72%) are women, with transgender individuals making up another 2%. While survivors come from more than 60 countries, the largest share are from the United States, Mexico, and Philippines. Approximately two-thirds (67%) of survivors are adults, 30% TAY, and 3% minors.

¹⁴ As defined in federal statute, the term “severe form of trafficking in persons” is: (A) sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or (B) the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

CAST identified a lack of evidence-based data on housing needs for trafficking victims and noted that data collection is a challenge as many victims are resistant to being included in a database. Based on their work with survivors, CAST highlighted several housing-related challenges, including a lack of: (1) sufficient shelter beds; (2) housing options with trained staff; (3) trauma-informed programming for trafficking survivors, including safety considerations; and (4) options for individuals with children, males, and individuals with disabilities or other special needs. Language and cultural barriers are also prevalent. The urgency of addressing these needs was emphasized by CAST's acknowledgement that many survivors return to their traffickers because of the lack of good housing options.

Experience of Violence

As evidenced by data discussed above, women affected by homelessness in LA County experience violence at a troubling rate. Types of violence commonly experienced include domestic violence, intimate partner violence, stalking, physical violence, and sexual assault. Domestic violence increases women's risk of housing instability and is often a predictor of homelessness. According to a 2001 study conducted in LA County,¹⁵ the average homeless woman experienced as much major violence in a single year as the average American woman experiences in her lifetime. Violence has significant impacts on survivors, including physical health consequences, increased substance abuse, emotional distress, lowered self-esteem, depression and anxiety, and decreased capacity to maintain work.

Further, by far the most significant risk factor for violent victimization as an adult is a pattern of physical, emotional, and sexual abuse as a child, which highlights the critical need to provide trauma-informed support to children within the homeless services system. Risk factors for violence among individuals experiencing homelessness include the severity of homelessness, substance or alcohol abuse, and subsistence activities (e.g. survival sex).

Survivor-specific barriers to service include (1) safety needs, (2) economic abuse, (3) lack of personal income, (4) child care needs, (5) emotional barriers, (6) isolation, (7) criminal history, (8) time limits on services, (9) cultural and racial barriers, and (10) additional legal issues, including immigration status. Domestic violence shelters can play a critical role in overcoming these barriers, offering core services such as safety planning, children's schooling, leave from work, employment/training, healthcare, and legal assistance.

Out of recognition of a need to improve coordination and alignment between the domestic violence and homeless service systems, the Domestic Violence-Homeless Services Coalition was formed. This coalition will guide systems-change work to develop an optimal community system to respond to people who experienced domestic violence and housing instability, and whenever possible, to prevent homelessness and chronic homelessness. The two-year strategic action plan will be implemented and further refined during 2017 and 2018.

Workforce Development Services

In considering the unique workforce development needs of women experiencing homelessness, the Committee invited presentations from the Los Angeles County Workforce Development, Aging and Community Services Department (WDACS), Los Angeles City Economic & Workforce Development Department (EWDD), and the Downtown Women's Center (DWC). Presenters shared that in 2016-2017, the LA County region has served 2,146 participants who identify as homeless, 882 of whom are women.

¹⁵ Wenzel, Suzanne L., Barbara D. Leake, and Lillian Gelberg. "Risk Factors for Major Violence Among Homeless Women." *Journal of Interpersonal Violence* 16.8 (2001): 739-752.

The Workforce Innovation and Opportunity Act (WIOA) requires that states and localities better engage individuals with high barriers to employment, including those experiencing homelessness. The City and County of Los Angeles are revamping their workforce development systems to better engage this population, identify career pathways into various employment sectors, and be responsive to industry needs. Both agencies are devising strategies to engage women experiencing homelessness that include: (1) integrated service delivery that involves federal, state, county, and city coordination; (2) gender-responsive and trauma-informed service delivery that includes basic training for job center staff and opportunities in social enterprise models; and (3) specific tools to serve this population, including transitional employment opportunities, "earn and learn" opportunities to support educational attainment, cohort training, and local and targeted hiring.

The Downtown Women's Center serves 950 women per year, approximately 200 of whom participate in job training and employment, and 50-60 women are placed into jobs each year. DWC's workforce development practices include: (1) social enterprise participation (including Made by DWC); (2) LA: RISE participation that, among other supports, helps women participate in "earn and learn" opportunities to advance their educational attainment and prepare them for the competitive workforce; and (3) one-on-one job counseling activities that include resume development, interviewing techniques, and job search.

Based on their current work with homeless women and the desire to expand efforts to serve this population in the workforce development system, presenters offered several suggestions for improvement, which are incorporated into the Committee's recommendations.

Training for the Homeless Services Workforce

The Committee discussed current efforts to address the need for capacity building and training for the homeless services workforce. Increased local investments coupled with rapid growth has resulted in strain at all levels of the homeless service delivery system, highlighting the need for capacity building that supports improved service delivery. The goals of County Homeless Strategy E7 to support and strengthen the Coordinated Entry System include (1) increasing service provider access to training opportunities, (2) strengthening the Centralized Training Academy (CTA), (3) expanding training curriculum, and (4) providing technical assistance to support the core organizational infrastructure of service provider agencies.

The CTA, which is supported by United Way of Greater Los Angeles, the City and County of Los Angeles, LAHSA, United Homeless Healthcare Partners, Corporation for Supportive Housing, and Homeless Health Care Los Angeles, has provided trainings on a variety of topics this past year. Topics included harm reduction, housing first, trauma-informed care, the landscape of homelessness, substance use and overdose prevention, cultural diversity, bringing project management tools to CES, burnout prevention, and housing subsidies and pathways. Between November 2016 and March 2017, 509 unique individuals were trained at 46 trainings.

In addition to trainings offered through the CTA, LAHSA facilitates (1) boot camps to focus on core competencies, best practices, and peer learning within program components;¹⁶ (2) onboarding sessions to train on scopes of required services, reporting requirements, and making funding requests; (3) technical assistance through one-on-one support delivered by an Integrated Agency Support Team

¹⁶ Examples of topics covered to date include training on core elements across program components as required by LAHSA's scopes of required services, such as creating housing stability plans, working collaboratively with rental property owners, navigating transitional and interim housing for TAY, etc.

(IAST); and (4) HMIS trainings to accommodate varying workflows and learning styles. LAHSA also facilitated four community forums to train on equal access and gender diversity in the spring of 2017.

Local Immigration Issues

The Committee considered ways in which immigration issues impact homeless women in LA County. Shifting immigration enforcement priorities at the national level are having an impact locally, and there is a nationwide response to support providers who serve impacted populations. Anecdotal evidence at the local level suggests that there are fewer requests for assistance in filing domestic violence restraining orders, greater reluctance to report domestic violence, increased requests for immigration information, and fewer walk-ins at resource centers. LAHSA's response to this emerging situation has included: (1) sharing resources with the CoC, (2) refining its own organizational policies (e.g. responding to law enforcement requests, retaining data, etc.), and (3) developing a policy that asks agencies to work with legal counsel to establish policies and procedures around how the agency will respond to immigration authorities' presence at their project sites. As with each of the issues discussed above, the Committee considered ways in which challenges associated with immigration status should be accounted for in strategies to comprehensively address the specific needs and barriers of women experiencing homelessness.

Needs of Transgender Women Experiencing Homelessness

Finally, the Committee discussed the needs of transgender women experiencing homelessness, a particularly vulnerable segment of the overall homeless population. The Committee reviewed and discussed recommendations from the Los Angeles LGBT Center to enhance interim housing policies and procedures to ensure that transgender women are safe, respected, and not subject to discrimination while seeking housing and services. LAHSA facilitated four interactive community forums to introduce and train on the U.S. Department of Housing and Urban Development's (HUD) requirement to serve all individuals experiencing homelessness in accordance with their gender identity, sexual orientation, and gender expression. Additionally, LAHSA has developed a CoC-wide policy that is both aligned with HUD's equal access and gender diversity requirement and provides additional guidance that further affirms the rights of all individuals experiencing homelessness regardless of gender identity.

Emergent Themes

Throughout the Committee's work, and as a result of the presentations and discussions presented above, several key themes emerged. These themes are highlighted below and are also reflected in the Committee's recommendations.

Lack of Housing Resources

One of the dominant themes throughout the Committee's work was the significant impact that the lack of housing resources across LA County has on women experiencing homelessness. Several factors contribute to this, including the affordability crisis that plagues the Los Angeles housing market. The Los Angeles Metro area has been identified as the most cost-burdened in the United States. According to data from the Joint Center for Housing Studies,¹⁷ 48% of all residents in LA County spend more than 30%

¹⁷ Joint Center for Housing Studies. "The State of the Nation's Housing 2016." <http://www.jchs.harvard.edu/research/publications/state-nations-housing-2016>.

of their income on rent. Further, 82% of the lowest income residents (those earning less than \$15,000 annually) spend more than 50% of their income on rent. This is coupled with the reality that rent is increasing at a rate that far outpaces increases in income. According to a study by the California Housing Partnership Corporation,¹⁸ median rent in LA County increased 28% from 2000 to 2014, while median renter household income decreased 8% when adjusted for inflation.

These challenges are compounded by a lack of sufficient housing resources for women within the homeless crisis response system. The deficit of appropriate housing interventions, from interim housing – including emergency shelter, bridge, and transitional – to shallow rental subsidies and permanent supportive housing, results in a lack of immediate options for women attempting to resolve a housing crisis. Whether it is a victim of domestic violence who chooses to remain with her abuser rather than lose her apartment, an elderly woman with dementia who is evicted from her home, or an unsheltered woman on Skid Row who is subject to the daily violence of living on the streets, the absence of safe and stable housing is a primary barrier for all women experiencing homelessness.

The Committee discussed ways in which this lack of resources for women may be compounded by funding designations for particular subpopulations that seem to favor men. For example, the focus on and prioritization of veterans may have the unintended result of beds that are only accessible to men, as men are more likely than women to identify as veterans. In response to this, the Committee highlighted the need for individual prioritization decisions to be considered at a system level to understand the net impact of such decisions. They emphasized the importance of considering a holistic picture of the system when making planning and funding determinations. The Committee also recommended increasing efforts to ensure effective targeting and outreach to women who do qualify for assistance within designated subpopulations.

Involvement of Individuals with Lived Experience

Another theme that resonated throughout the Committee’s work – particularly through public comments received at meetings – was the need for increased involvement of women with lived experience of homelessness at all levels of service delivery, from program design to implementation to policymaking. LAHSA and its partners have been exploring ways to ensure the meaningful inclusion of those with lived experience in a variety of initiatives that impact the homeless service delivery system. For example, LAHSA regularly convenes the Lived Experience Advisory Group and the Homeless Youth Forum of Los Angeles, advisory groups composed of adults and transition age youth with current or former experiences of homelessness for the purpose of providing feedback on all levels of program and policy development. LAHSA has also included members with lived experience in a number of public decision-making bodies such as the LA CoC Board,¹⁹ the CES Policy Council,²⁰ and the Regional Homelessness Advisory Council.²¹ In particular, commenters highlighted the value of peer advocacy, both in outreach and in housing and supportive service delivery. The Committee discussed opportunities

¹⁸ California Housing Partnership Corporation. “Los Angeles County Housing Need 2017.” <http://1p08d91kd0c03rlxhmhtydr.wpengine.netdna-cdn.com/wp-content/uploads/2017/05/Los-Angeles-County-2017.pdf>

¹⁹ The LA CoC Board is a deliberative body that provides advice and counsel to the LAHSA Commission and LAHSA staff on matters related to HUD CoC-funded operations, policies, and resource allocation.

²⁰ The CES Policy Council is a group represented by service providers across all populations (Families, Single Adults, and Youth), County health agencies, City and County housing authorities, and other stakeholders primarily responsible for approving policy related to the Coordinated Entry System.

²¹ The Los Angeles Regional Homelessness Advisory Council (RHAC) is co-convened by LAHSA and Home for Good with the purpose of providing an enduring forum for broad-based, collaborative and strategic leadership on homelessness in Los Angeles County.

for involving individuals with lived experience in ongoing planning processes, as well as creating pathways to connect individuals with employment opportunities at service provider agencies.

Improvements to Data Collection and Tracking

A third theme that emerged from the Committee’s discussions was the need for better data to more fully understand the specific needs and challenges facing this population. Discussion revolved around improving existing assessment tools (such as the Vulnerability Index Service Prioritization Decision Assistance Tool, or VI-SPDAT), conducting further analysis of program data, and incorporating new data elements into the annual Homeless Count demographic survey. The Committee also identified a need for more ongoing tracking and evaluation to measure the effectiveness of efforts and to identify what is and is not working.

Enhanced Training and Technical Assistance

As the Committee considered and heard from experts regarding the many unique challenges facing this population, another theme that continually surfaced was the need for enhanced technical assistance and ongoing training for providers throughout the homeless service delivery system – including outreach teams, case managers, housing providers, and senior leadership within agencies.

Gender and Trauma-Informed Service Delivery

Finally, one of the most prominent themes that the Committee’s work brought to light was an overarching need for all levels and types of services to be delivered through a gendered lens. Because the experiences of women differ in numerous ways from those of men, effective service delivery requires awareness of the challenges and barriers that women uniquely face. In addition, service providers and decision makers must ensure that services account for the full continuum of violence and trauma that is represented among women experiencing homelessness. This attentiveness to gender and experiences of trauma should influence all facets of homeless services, including outreach approaches, accessibility considerations, program design, safety planning, and specific service offerings.

Recommendations

The work of the Committee has brought increased attention to the unique needs of women experiencing homelessness in Los Angeles, and the effect of its efforts can be seen in several important ways. In addition to the advancements that have already resulted from the work of this group, the Committee put forth a number of recommendations for the consideration of the LAHSA Commission, City and County departments, and homeless service providers. The Committee’s recommendations center around five categories: (1) data and reporting, (2) training and capacity building, (3) funding, (4) service delivery, and (5) advocacy and policy development. Both the progress achieved to date and the Committee’s further recommendations within these five categories are detailed below.²² The tables include goals related to the timing of completing each recommendation and indicate the entities (LAHSA, the City of Los Angeles, the County of Los Angeles, or homeless service provider organizations) to whom each recommendation is directed. Several of the Committee’s recommendations are supported by written testimony provided by the Downtown Women’s Action Coalition as well as Public Counsel, included in Appendix V.

²² A check mark in the recommendation table indicates that implementation of the recommendation is already in progress.

Data and Reporting

Progress to Date

As highlighted above, the Committee emphasized the importance of improving the breadth and quality of available data. Per the Committee’s recommendation, a question was added to the 2017 Homeless Count demographic survey for the first time to identify the number of survivors of human trafficking among the unsheltered population. The Committee also recommended that LAHSA conduct a housing gaps analysis for women experiencing homelessness. This recommendation aligns in part with the City’s Homeless Strategy 9K, which includes a women-focused gaps analysis in the City of Los Angeles. Findings from this analysis will play a critical role in identifying additional service needs and shaping strategy.

Further Recommendations

Several of the Committee’s recommendations revolve around the need for enhanced data collection as well as more cross-agency collaboration in standardizing, sharing, and tracking participant data, with the goal of establishing consistency and improving service delivery.

Year	Recommendation	LAHSA	City	County	Providers
FY 17-18	1. Include a human trafficking question on the Homeless Count demographic survey.	✓			
FY 17-18	2. Revise the Homeless Count demographic survey questions for 2018 to include: <ul style="list-style-type: none"> ○ Additional age breakout for women within the 25-54 age bracket ○ Expanded transgender categories (transwomen, transmen) ○ Broader continuum of violence/trauma that women experience ○ Labor trafficking (emphasize “force, fraud, or coercion” in question) 	X			
FY 17-18	3. Capture self-reported family reunification data in HMIS.	X			
FY 17-18	4. Track housing placement data by gender and funding type.	X	X	X	X
FY 18-19	5. Conduct a countywide housing gaps analysis for women experiencing homelessness.	X	X	X	
FY 18-19	6. Standardize DV performance measures across funding agencies, including the LA Housing and Community Investment Department (HCID), Department of Public Social Services (DPSS), and LAHSA.	X	X	X	
FY 18-19	7. Establish a data sharing agreement between LAHSA and the City and County workforce development systems.	X	X	X	
FY 18-19	8. Conduct an analysis of what women need to feel safe, build community, and succeed in permanent housing.		X	X	
FY 19-20	9. Incorporate customer feedback and measures of qualitative impact (e.g. community engagement, improved safety) into programs’ standards and performance evaluation.	X	X	X	X

Training and Capacity Building

Progress to Date

Efforts to incorporate recommendations from the Committee are currently underway through the re-design of the Centralized Training Academy and through work with key partners in execution of the City and County’s Comprehensive Homeless Strategies. WDACS has supported efforts to create employment pipelines into homeless service positions with community-based organizations and has approved the existing core curriculum offered through the CTA.

The planning efforts of a CTA work group have resulted in a comprehensive list of training topics that address the unique needs of specialized subpopulations, all rooted in approaches to providing trauma-informed care. The CTA will become a countywide training resource for those who work in homeless services, providing consistent training content and utilizing the knowledge of individuals with lived experience as consumers of services.

In addition to developing specialized training topics, the CTA work group has undertaken cross-training on various system functionalities, providing much needed insight into how various “safety net” systems operate. Priorities include cross-training among homeless service providers, domestic violence providers, the workforce development system, and foster and child care systems.

Further Recommendations

The Committee also recommends additional attention be paid to training and capacity building needs, with the goal of adequately equipping service providers to be attentive to and address the unique and diverse needs of women experiencing homelessness. These recommendations align with City and County strategies aimed at strengthening the Coordinated Entry System (City Strategy 4A; County Strategy E7) and are supported by Measure H funding allocations. LAHSA is currently building out the infrastructure to support these and other capacity-building needs.

Year	Recommendation	LAHSA	City	County	Providers
FY 17-18	1. Create a working group to comprehensively address training needs for providers and ensure trainings address the needs of women experiencing or at risk of homelessness. This group should include individuals with lived experience.	✓		✓	✓
FY 17-18	2. Include people with lived experience as part of trainings.	X	X	X	X
FY 17-18	3. Make trainings available to all providers, not only those funded by LAHSA.	X			
FY 17-18	4. Evaluate trainings as they are implemented.	X			
FY 17-18	5. Provide regular, ongoing training on trauma-informed care.	X	X	X	X
FY 17-18	6. Support the identification, development, and training for jobs in the homeless services system.	X	X	X	X
FY 17-18	7. Support cross-system training and capacity building between the homeless services and workforce development systems.	X	X	X	X

FY 18-19	8. Ensure housing navigators have training to identify women who may be eligible for resources designated to specific subpopulations (e.g. veterans, persons with AIDS).	X	X	X	X
FY 18-19	9. Integrate the following topics into regular, ongoing training opportunities for providers throughout the homeless service delivery system: <ul style="list-style-type: none"> ○ Safety planning ○ Human trafficking ○ Domestic violence ○ Gender and sexual diversity ○ Navigating the foster care and child welfare system 	X	X	X	X
FY 19-20	10. Provide technical assistance to expand providers' capacity to meaningfully incorporate individuals with lived experience into planning and decision-making.	X			
FY 19-20	11. Support creation of homeless system navigators focused on workforce development.	X	X	X	X

Funding

Progress to Date

The Committee’s work coincided with the passage of Measure H, a ballot initiative approved by voters in the County of Los Angeles in March 2017 that is expected to generate an estimated \$355 million annually for the next 10 years, to be used exclusively for combatting homelessness in LA County. The Committee played a strong role in discussions over Measure H funding priorities. Among the Committee’s recommendations included in the final Measure H budget allocations are: (1) enhanced funding for rapid re-housing programs, (2) the creation of longer-term shallow rental subsidies, (3) an increase to the per diem rate for interim housing, and (4) funding for legal services and eviction prevention.

LAHSA's budget requests to the City and County for fiscal year 2017-2018 included funding requests for areas relevant to women experiencing homelessness, including increased support for added capacity and linkage to the domestic violence provider system, as well as new and renewed interim housing for families and individuals. At the recommendation of the Committee, language was added to the budget request stating that women should be a priority, and focus and attention should be paid to this population when funding allocations are made.

Further Recommendations

In addition to recommendations that have already been incorporated into the approved Measure H budget allocations and City and County budget requests, the Committee recommends additional funding-related steps as outlined below and emphasizes that the needs of women should be considered in all funding decisions.

Year	Recommendation	LAHSA	City	County	Providers
FY 17-18	1. Rigorously fund rapid re-housing.	✓	X	✓	
FY 17-18	2. Create longer-term shallow rental subsidies.	✓	X	✓	
FY 17-18	3. Increase the per diem rate for interim housing.	✓	X	✓	
FY 17-18	4. Fund prevention services (e.g. legal services, eviction prevention).	✓	X	✓	
FY 17-18	5. Consider needs of women in all funding decisions by prioritizing subpopulations in which women are overrepresented and addressing vulnerabilities specific to women and transgender women.	X	X	X	X
FY 17-18	6. Provide funding to address feminine hygiene needs.	X	X	X	
FY 18-19	7. Establish oversight at a system level to monitor for unintended bias in layered funding, and create flexibility for funders to balance out projects as needed.		X	X	
FY 19-20	8. Enhance funding and capacity of service providers to be able to serve an aging population and changing demographics.	X	X	X	X

Service Delivery

Progress to Date

The Committee also made several recommendations that influenced policy and funding pertaining to service delivery. The Committee emphasized the need for rapid re-housing programs to allow flexibility to provide child care support to families who need it. This is reflected in LAHSA's new FY 2017 contracts for providers in the Coordinated Entry System for Families. Contracts now include child care as an allowable expense within agencies' rapid re-housing budgets. Because housing has been identified as one of the most-needed resources, the Committee also recommended that shared housing models be utilized, as a strategy for increasing the availability of housing options. While shared housing has been previously practiced by service providers, LAHSA is now in the process of intentionally incorporating shared housing models into its service delivery system, beginning with three pilots currently underway in SPAs 2, 5, and 6.

Considering the unique needs of immigrant women experiencing homelessness, the Committee recommended that outreach teams distribute know-your-rights cards to better equip and inform women of their constitutional rights and protections under the law. LAHSA teams have begun to incorporate this practice.

Further Recommendations

Many of the Committee's further recommendations focus on modifications and enhancements to specific aspects of service delivery, including outreach, prevention, interim housing, permanent housing, and supportive services. These recommendations seek to ensure that the unique needs and experiences of women are accounted for and incorporated into service delivery models. As a supplement to these recommendations, see Appendix VI, "Trans Tips Sheet for Housing Providers: Transitioning Our Shelters," developed by the Los Angeles LGBT Center to outline specific policies and procedures to

incorporate within a shelter setting to support the safety and well-being of transgender program participants.

Category	Year	Recommendation	LAHSA	City	County	Providers
General	FY 17-18	1. Incorporate shared housing models into the service delivery system.	X	X	X	
	FY 17-18	2. Promote client choice (e.g. ask “where and how do you want to feel safe?”) during assessment.	X	X	X	X
	FY 17-18	3. Ensure service providers have appropriate policies and practices to protect the confidentiality and safety of participants.	X	X	X	X
	FY 18-19	4. Require trauma-informed services in all contracts, and establish monitoring mechanisms to determine that this is being implemented.	X	X	X	X
	FY 18-19	5. Consider the needs of people with developmental disabilities and mental health challenges.	X	X	X	X
	FY 19-20	6. Address intergenerational cycles by assessing and treating trauma experienced by children.	X	X	X	X
Outreach	FY 17-18	7. Distribute know-your-rights cards during street outreach.	✓	X	X	X
	FY 17-18	8. Encourage proportional representation of women on multidisciplinary teams being established and/or funded through Measure H or any other public funds.		X	X	
	FY 18-19	9. In collaboration with the human trafficking community, establish protocols for when outreach teams identify a trafficking survivor. Protocols should include having peer advocates on call and minimizing involvement of law enforcement to avoid retraumatizing victims.	X	X	X	X
Prevention	FY 18-19	10. Target prevention resources to older women, as data indicate women are more likely to become homeless as they age.	X	X	X	
	FY 18-19	11. Target prevention resources to women who have experienced violence, especially those who do not meet the federal definition of homelessness.	X	X	X	
Interim Housing	FY 17-18	12. Enhance shelter standards to be inclusive of gender diversity.	X	X	X	X
	FY 18-19	13. Develop after hours resources and protocol for individuals in need of interim housing that are not administered by law enforcement, with a priority on developing after hours service teams comprised of directly impacted people.	X	X	X	X

Interim & Permanent Housing	FY 18-19	<p>14. Ensure project-based sites consider:</p> <ul style="list-style-type: none"> ○ Lighting and security in hallways, elevators, laundry rooms, etc. ○ Lighting outside facilities (including tree trimming) ○ Access to safe outdoor space ○ Accessibility for older women (e.g. wide corridors, accessible bathrooms and showers) ○ Service animals ○ Beauty of the physical space to promote empowerment, choice, and dignity ○ Community spaces with kitchen facilities ○ Support for community-building ○ Training/workforce development programs 	X	X	X	X
Permanent Housing	FY 17-18	15. Support streamlined and expanded production of multifamily, affordable housing, through direct funding, land use tools, and other means.		X	X	
	FY 19-20	16. Encourage property management companies to adopt practices of trauma-informed care.	X	X	X	X
	FY 19-20	17. Explore the creation of a continuum of housing for human trafficking survivors.		X	X	
Supportive Services	FY 17-18	18. Ensure rapid re-housing programs have flexibility to provide child care support.	✓		X	
	FY 18-19	19. Provide support to women who are separated from their children, reunifying with their children, and women who have lost their children, including women who have different family compositions (e.g. grandchildren removed from custody).	X	X	X	X
	FY 18-19	20. Improve connections for women to behavioral health services.	X	X	X	X
	FY 18-19	21. Ensure that the health needs of women are considered and addressed, and that services are delivered through a gendered lens, with sensitivity to health, mental health, and substance use-related needs.	X	X	X	X

Advocacy and Policy Development

Progress to Date

The Committee's final recommendations are a call to action around several advocacy efforts needed at the state and local level. Among these was a recommendation that LAHSA develop a LA CoC-wide gender non-discrimination policy, which aligns with a new rule issued by the U.S. Department of Housing and Urban Development entitled "Equal Access in Accordance with an Individual's Gender Identity in Community Planning and Development Programs." In March and April 2017, LAHSA, in partnership with the Los Angeles LGBT Center, hosted forums for discussion and training around this rule, and LAHSA is currently in the process of developing a policy for the LA CoC to affirm and reinforce this commitment to equal access and non-discrimination based on gender identity.

Further Recommendations

The Committee’s additional recommendations for advocacy and policy development aim to ensure programs and services are responsive to the needs and preferences of women experiencing homelessness, to enhance legal protections to help prevent entry into homelessness, and to increase the availability of state resources.

Year	Recommendation	LAHSA	City	County	Providers
FY 17-18	1. Develop a LA CoC-wide gender non-discrimination policy.	✓			
FY 17-18	2. Ensure that policies are in place to promote safety of all clients in all types of housing assistance.	X	X	X	X
FY 17-18	3. Establish a local policy to affirm that every woman deserves housing first and that access to housing and services will be low-barrier (i.e. access to shelter is not restricted because of alcohol use, health conditions, lack of income, criminal history, etc.).	X			
FY 17-18	4. Oppose policies that criminalize homelessness, such as “quality of life” tickets.	X	X	X	
FY 17-18	5. Support policies that strengthen the Rent Stabilization Ordinance (RSO) in the City of LA as well as efforts to establish rent control in other cities and in unincorporated areas in LA County.	X	X	X	X
FY 18-19	6. Adopt “just cause” ordinances for eviction prevention, including protections for non-RSO buildings.		X	X	
FY 18-19	7. Consider establishing a local policy to ensure proportional allocation of all resources, including interim housing resources.	X	X	X	
FY 18-19	8. Include women with lived experienced in all parts of planning and service delivery, from design through implementation.	X	X	X	X
FY 18-19	9. Advocate at the state level to increase the Presley Fund.	X	X	X	
FY 18-19	10. Advocate at the state level to increase the per diem rate for board and care.	X	X	X	X

Conclusion

The work of the Ad Hoc Committee on Women & Homelessness represents significant progress toward highlighting and addressing the unique needs of women experiencing homelessness across the County of Los Angeles. The characteristics and experiences of women are diverse, and strategies must take into account immigrant women, survivors of human trafficking, transgender women, and senior women, among others. Because violence, assault, trafficking, and other forms of trauma disproportionately impact this community, effectively meeting the needs of this population requires particular attention to safety concerns and service delivery through a gendered and trauma-informed lens.

The recommendations of the Committee, some of which have already been implemented, are critical steps in ensuring that the needs of women remain at the forefront of decision making. Continued focus

on this issue by LAHSA, City and County partners, service providers, and community members is essential to ensuring continued progress toward reducing the incidence of homelessness among women and improving services to those currently experiencing homelessness.

Appendix I: Committee Members

LAHSA Commission Committee Members

Wendy Greuel, Chair
Sarah Dusseault

Committee Members

Chancela Al-Mansour, Executive Director, Housing Rights Center
Becky Dennison, Executive Director, Venice Community Housing
Elizabeth Eastlund, Executive Director, Rainbow Services; Vice Chair, City of Los Angeles Domestic Violence Task Force
Maria Funk, District Chief of Countywide Housing, Employment and Education Resource Development, Los Angeles County Department of Mental Health
Silvia Hernandez, Community Intern, Community Action Network
Drian Juarez, Transgender Economic Empowerment Project (TEEP) Program Manager, Los Angeles LGBT Center
Veronica Lewis, Division Director, Special Service for Groups (SSG) - Homeless Outreach Program Integrated Care System (HOPICS)
Shamāiah Manriquez, Author and Advocate
Christine Margiotta, Executive Director, Social Venture Partners Los Angeles
Anne Miskey, Chief Executive Officer, Downtown Women’s Center
Alisa Orduna, Homelessness Policy Director, City of Los Angeles
Jessica Postigo, President, Commission on the Status of Women, City of Los Angeles Housing and Community Investment Department
Molly Rysman, Deputy for Housing and Homelessness, Office of Supervisor Sheila Kuehl
Amanda Sadra, Field Representative, Office of U.S. Senator Dianne Feinstein
Amiyoko Shabazz, Social Enterprise Associate, Downtown Women’s Center
Cheri Todoroff, Deputy Director, Housing for Health, Los Angeles County Department of Health Services
Dhakshike Wickrema, Deputy for Mental Health and Homelessness Advocacy, Office of Supervisor Mark Ridley-Thomas

LAHSA Staff Support

Eileen Bryson, Commission Liaison
Erin Cox, Senior Policy and Planning Analyst
Sarah Mahin, Director of Policy & Planning
Jessica Reed, Policy Manager

Appendix II: Committee Schedule and Meeting Topics

Tuesday, December 13, 2016

1. Purpose of Committee
2. Demographic Data on Women Experiencing Homelessness
3. Downtown Women's Action Coalition Needs Assessment
4. Lessons Learned from Previous Subpopulation-Focused Work
5. Alignment with Domestic Violence System

Meeting Agenda and Supporting Documents: https://documents.lahsa.org/Administrative/Supporting-Documents/2016/12.13.16AdHocWomen&Homelessness_Agenda_SupportingDocuments.pdf

Wednesday, January 18, 2017

1. Women and Coordinated Entry System (CES)
2. Outreach and Engagement

Meeting Agenda and Supporting Documents: www.lahsa.org/documents?id=1153-ad-hoc-committee-on-women-homelessness-1-18-17.pdf

Monday, February 13, 2017

1. Budget Recommendations
2. Supports for Women in Permanent Housing

Meeting Agenda and Supporting Documents: www.lahsa.org/documents?id=1202-women-homelessness-agenda-supporting-documents-02-13-17.pdf

Friday, March 17, 2017

1. Human Trafficking
2. Older Adult Women

Meeting Agenda and Supporting Documents: www.lahsa.org/documents?id=1241-women-homelessness-agenda-supporting-documents-03-17-17.pdf

Friday, April 7, 2017

1. Domestic Violence
2. Other Violence Experienced by Women

Meeting Agenda and Supporting Documents: www.lahsa.org/documents?id=1250-women-homelessness-agenda-supporting-documents-04-07-17.pdf

Friday, May 12, 2017

1. Immigration
2. Workforce Development Services
3. Training the Homeless Services Workforce

Meeting Agenda and Supporting Documents: www.lahsa.org/documents?id=1324-women-homelessness-agenda-supporting-documents-05-12-17.pdf

Wednesday, June 14, 2017

1. Needs of Transgender Women
2. Downtown Women's Center Wish Team
3. Interim Housing for Women
4. Housing Inventory Chart
5. 2017 Homeless Count Results

Meeting Agenda and Supporting Documents: <https://www.lahsa.org/documents?id=1393-women-homelessness-agenda-supporting-documents-06-14-17.pdf>

Friday, July 21, 2017

1. Committee Report

Appendix III: Glossary of Key Terms

Coordinated Entry System (CES)

The Coordinated Entry System is a participant-centered process that streamlines access to the most appropriate housing interventions for participants experiencing homelessness or housing instability. The Coordinated Entry System for Single Adults (CES for Single Adults), the Coordinated Entry System for Families (CES for Families), and the Youth Coordinated Entry System (CES for Youth) benefit participants experiencing homelessness and the community overall by increasing coordination among community providers and providing systematic, efficient targeting of appropriate housing resources. The system ensures that participants are connected with the most appropriate housing and support services to meet their specific needs, so that they may return to stable housing.

Continuum of Care (CoC)

Continuum of Care refers to a regional or local planning body that coordinates housing and services funding for homeless families and individuals. The Los Angeles Continuum of Care (LA CoC) includes all of LA County except for the cities of Pasadena, Glendale, and Long Beach.

Department of Public Social Services (DPSS)

The Department of Public Social Services is a department of the County of Los Angeles. The mission of the LA County DPSS is to serve the community through programs established to alleviate hardship and promote health, personal responsibility, and economic independence. Services include health care coverage through the Medi-Cal Program; CalFresh Nutrition Assistance; CalWORKs financial, homeless, employment and supportive services assistance via Welfare-to-Work programs; In-Home Supportive Services; and financial, homeless, and employment assistance to indigent adults through the General Relief program.

Domestic Violence (DV)

Domestic violence is a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner.

Economic and Workforce Development Department (EWDD)

The Economic and Workforce Development Department is a department of the City of Los Angeles whose goal is to steer economic development in a manner that yields thriving businesses and creates job training and career opportunities for the City. EWDD provides a broad range of programs that offer assistance in the areas of business support, employment and youth development. All programs are designed to grow and improve Los Angeles' economy while building a well-trained and job-ready workforce.

Housing and Community Investment Department (HCID)

The Housing and Community Investment Department is a department of the City of Los Angeles that promotes livable and prosperous communities through the development and preservation of decent, safe, and affordable housing, neighborhood investment and social services.

Homeless Management Information System (HMIS)

The Homeless Management Information System is a computerized data collection system designed to capture client information over time on the characteristics, service needs, and accomplishments of homeless persons. HUD requires all CoC applicants to demonstrate progress in implementing HMIS.

Interim Housing

Interim housing encompasses various forms of temporary shelter, including crisis housing and bridge housing. Crisis housing is short-term, 24-hour emergency shelter for participants who are homeless or at imminent risk of becoming homeless, providing clients with stability as they are quickly assessed and connected to more safe and supportive housing resources. Bridge housing is reserved, supportive, interim housing designed to provide high and mid-acuity homeless individuals with stability so that they can more easily maintain contact with a housing navigator and/or case manager as they are assisted in their efforts to obtain housing.

Intimate Partner Violence (IPV)

Intimate partner violence refers to physical violence, sexual violence, stalking, and psychological aggression (including coercive acts) by a current or former intimate partner.

Permanent Supportive Housing (PSH)

Permanent Supportive Housing programs provide permanent housing, with indefinite leasing or rental assistance, paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability. PSH is a critical component of plans to end homelessness, providing a housing opportunity that enables persons with a history of homelessness and disability to succeed in stable, affordable housing. With some specific exceptions, services are voluntary in a PSH model.

Rapid Re-housing (RRH)

Rapid Re-Housing is an intervention designed to help individuals and families to quickly exit homelessness and return to permanent housing. RRH assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are typically tailored to the unique needs of the household. The core components of a RRH program are: housing identification; rent and move-in assistance (financial); and, case management and services.

Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT)

The VI-SPDAT is an assessment tool that is utilized to recommend the level of housing supports necessary to resolve the presenting crisis of homelessness. Within those recommended housing interventions, the VI-SPDAT allows for prioritization based on presence of vulnerability.

Workforce Development Aging & Community Services Department (WDACS)

The Workforce Development Aging & Community Services Department is a department of the County of Los Angeles committed to providing services which include investigating abuse claims against the senior and disabled population, providing nutrition and other life-enhancing services to seniors, providing employment services to adults and youth working with employers in times of hiring and downsizing, and offering mediation services to avoid court filings.

Appendix IV: 2017 Greater Los Angeles Homeless Count Data Summary



Greater Los Angeles Homeless Count



2017 Greater Los Angeles Homeless Count - Female Individuals¹ Data Summary				
Los Angeles Continuum of Care²				
Population	Sheltered	Unsheltered	Total	Prevalence of Female Individuals Experiencing Homelessness (%)
All Persons				
All Persons	2,024	10,017	12,041	100%
Household Composition				
Individuals (Those not in family units)	2,024	10,017	12,041	100%
Adults (Over 24)	1,750	9,068	10,818	90%
Transition Age Youth (18-24)	245	907	1,152	10%
Chronically Homeless	237	3,919	4,156	35%
Veterans	90	185	275	2%
Unaccompanied Minors (Under 18)	30	42	72	0.6%
Veterans				
All Veterans	90	185	275	2%
Chronically Homeless Veterans	7	63	70	1%
Race/Ethnicity				
American Indian/ Alaska Native	32	147	179	1%
Asian	24	162	186	2%
Black/African American	837	3,662	4,499	37%
Hispanic/ Latino	578	3,463	4,041	34%
Native Hawaiian/ Other Pacific Islander	14	8	22	0.2%
White	482	2,322	2,804	23%
Multi-Racial/Other	57	253	310	3%
Age				
Under 18	30	42	72	1%
18 - 24	245	907	1,152	10%
25 - 54	1,237	6,884	8,121	67%
55 - 61	325	1,472	1,797	15%
62 and Over	188	712	900	7%
Chronically Homeless				
Individuals (Those not in family units)	237	3,919	4,156	35%
Total Chronically Homeless Persons	237	3,919	4,156	35%

Health and Disability				
Health/Disability Indicator ³	Sheltered	Unsheltered	Total	Prevalence in Female Individuals Over 18 Experiencing homelessness (%)
Substance Use Disorder	141	2,235	2,376	20%
Brain Injury	380	708	1,088	9%
HIV/AIDS	27	250	277	2%
Serious Mental Illness	374	3,942	4,316	36%
Developmental Disability	285	541	826	7%
Physical Disability	205	2,152	2,357	20%

Domestic/Intimate Partner Violence				
Domestic/Intimate Partner Violence Experience	Sheltered	Unsheltered	Total	Prevalence in Female Individuals Over 18 Experiencing homelessness (%)
Domestic/Intimate Partner Violence Experience	680	5,636	6,316	53%

Notes:

1. "Female Individual" includes females age 25+ and female youth under age 25 experiencing homelessness, who are not part of family units.
2. Los Angeles Continuum of Care covers Los Angeles County except Long Beach, Pasadena, and Glendale.
3. No data available to compare from 2016.
4. Health/Disability indicators are not mutually exclusive (a person may report more than one). Numbers will not add up to 100%.

Prepared by Los Angeles Homeless Services Authority (May 2017)
 Data from 2017 Greater Los Angeles Point-in-Time Count conducted in January, 2017. Visit <http://www.lahsa.org/homeless-count/> to view and download data.

Appendix V: Written Testimony Provided to the Committee

June 9, 2017

Los Angeles Homeless Services Authority

Attention: COMMITTEE CHAIR: Wendy Greuel

811 Wilshire Blvd., 5th Floor

Los Angeles, CA 90017

Re: AD HOC Committee on Women & Homelessness Recommendations

Hello Committee Members, the Downtown Women's Action Coalition writes you this letter to comment on proposed recommendations that this committee will be hearing during the June 14th committee hearing. The Downtown Women's Action Coalition is a coalition comprised of community residents, social service providers, and others concerned about issues of homelessness and women. First of all, we would like to thank you for your incredibly hard work and commitment to creating a work plan that addresses women's homelessness in Los Angeles County and City.

Every three years the Downtown Women's Action Coalition conducts a needs assessment survey regarding the women of Skid Row and issues a set of community based recommendations. After reviewing your plan and our own internal recommendations, we feel there are a few additional points to be included to make the LAHSA women's committee recommendations more holistic. Since 2013, the number of women experiencing homelessness has increased by an astounding 55%. Additionally, since 2013, 61% of the overall homeless population has been women (DWAC 2016 Needs Assessment). As these numbers reflect, homelessness continues to increase year after year and it is imperative that this committee address one of the reasons these numbers are increasing (The Housing Crisis).

In the 2016 Downtown Women's Needs Assessment, we identified the need for resources that keep people housed such as legal services and eviction defense. We should also recommended supporting policies that strengthen the Rent Stabilization Ordinance in the City of Los Angeles and support the recent push to establish rent control in unincorporated areas in Los Angeles County. In the community of Skid Row, home to one of the largest homeless populations, we recommend that LAHSA and programs supported by LAHSA adhere to a housing first model.

While the idea of community based policing is commonly mentioned in the news media and in political discourse, the reality for Skid Row women is different. Over one- third of the survey respondents of the 2016 Needs Assessment had a police interaction over the last year. Of those women, 33% received a citation, an increase from the 2013 Needs Assessment. In addition, 40% were arrested. These numbers exemplify the lack of safety Skid Row women feel on a daily basis. We are recommending the need to address polices that criminalize homelessness such as "quality of life" tickets that continue to exacerbate the struggle of living on the streets. In 2016, the City passed three new ordinances that criminalized homeless individuals.

As this committee comes to a close, we would once again like to thank you for all your hard work in bringing attention to the conditions of the homelessness crisis that women face. We urge this committee to include the recommendations outlined in this letter in order to ensure a robust set of solutions. Please feel free to contact us with any additional questions or concerns you may have.

Sincerely, The Downtown Women's Action Coalition Co-Chairs Silvia Hernandez and Ariana Alcaraz
Silvia.cangress@outlook.com and ari@cangress.org (213)-228-0024

Sincerely,

The Downtown Women's Action Coalition Co-Chairs Silvia Hernandez and Ariana Alcaraz
Silvia.cangress@outlook.com and ari@cangress.org

213 228 0024



The nation's *largest pro bono law firm*

July 18, 2017

Ad Hoc Committee on Women & Homelessness

Los Angeles Homeless Services Authority

811 Wilshire Blvd, 5th Floor

Los Angeles, CA 90017

RE: Recommendations

To Whom It May Concern:

I am writing on behalf of Public Counsel to express our support for the important work of the Ad Hoc Committee on Women & Homelessness and to share some concerns and recommendations relating to homeless women in Los Angeles.

Founded in 1970, Public Counsel is largest pro bono law firm in the country, providing individuals and institutions in underserved communities with access to quality legal representation. In 2015, Public Counsel staff and volunteers provided legal services to more than 22,000 individuals, benefitting over 330,000 underserved people and more than 350 nonprofit organizations and small businesses. Our attorneys work on a wide range of legal and policy issues including children's rights, education, homelessness prevention, affordable housing and community development, consumer law, veterans' issues, women's rights, equal opportunity, and immigration.

Public Counsel's newest program area — the Audrey Irmis Project for Women and Girls' Rights — focuses on securing economic justice for low-income women and girls and addressing the root causes of gender inequality. In this context, we are working to expand our services for the most vulnerable women in our communities, and promote long term economic and housing security for women and families.

In Los Angeles, where the population of homeless women has grown 55% percent since 2013, and women now make up one third of the homeless population, concerted action is needed. We support the recommendations made to the Committee to:

- Expand funding for homelessness prevention, including emergency and short-term rental assistance, "know your rights" education, eviction defense and other critical legal services;
- Expand the total number of emergency beds/transitional housing units available to homeless women across the county to reflect the growing need for services; including DV-specific housing and services.

- Investigate reports by DWAC, LACAN and others that landlords in downtown LA are leaving designated low-income units empty rather than making them available to homeless individuals and families.
- Encourage development of gender-specific shelter and services to enhance women's safety and minimize secondary trauma for victims of violence, while at minimum, requiring all funded shelters to increase security, and adequately train staff to provide trauma-informed and non-discriminatory, female- and transgender- friendly services.

In addition, given the staggering percentage of homeless women who have

experienced violence or abuse in their lifetimes, and/or become homeless as a direct or indirect result of domestic violence, urgent steps are required to protect homeless women (including transgender women) from harassment, violence, and exploitation, and to treat the long-term effects of trauma, before, during, and after their transition to permanent housing. To this end, we urge the City and County to:

- Prioritize women's safety and security on the street, in temporary housing and shelters. Develop and support community-based "neighborhood watch" programs or other violence prevention mechanisms in consultation with the communities and individuals affected.
- Work with stakeholders to establish more 24-hour safe zones for women. In addition to shelters, these might include areas set-aside for women to park or sleep, with adequate security and sanitation facilities provided.
- Eliminate city and local ordinances that criminalize homelessness, including, in particular, sleeping overnight in vehicles, as this is a safer option for many women than either tents or emergency shelters.
- Review screening and intake procedures/tools to ensure that both recent and historical abuse, sexual violence, trafficking and sexual exploitation are captured and taken into account in determining risk and need for housing.
- Specifically include history of violence, abuse and trauma (and not merely immediate risk of DV) as a substantial risk factor in determining priority for housing and other assistance.
- Expand outreach to inform homeless and recently housed women of available services for diagnosing and treating trauma and PTSD, and to increase access to specialized support. Support community-based organizations to provide free counseling and specialized services for survivors of trauma and abuse.

Thank you for your time and consideration of these recommendations. Please feel free to reach out to Public Counsel if I can be of further assistance.

Sincerely,



Jill Thompson

Directing Attorney

Audrey Irmes Project for Women and Girls' Rights

Appendix VI: Los Angeles LGBT Center Tip Sheet



Trans Tips Sheet: For Housing Providers: Transitioning Our Shelters

<https://srlp.org/wp-content/uploads/2012/08/TransitioningOurShelters.pdf>

INTAKE:

All incoming residents are to be told that:

1. This facility respects transgender residents.
2. Private information, such as medical information and information about whether a person is transgender, etc., is kept confidential unless the resident wishes otherwise.
3. No harassment of other residents is allowed.

If resident reveals to staff that he or she is transgender, the intake conversation should include the following additional topics:

1. Housing placement and sleeping arrangements, including the availability of beds close to night staff if the resident prefers
2. Shower and bathroom placement, including the availability of private showers and bathrooms that the resident may use if he or she prefers
3. The name and pronouns (“he”, “she”, “they”) the resident would like staff to use

Do:

- Developed written policies covering issues of respect, confidentiality, housing placements, bathroom and shower policies, harassment, and topics for intake conversation.
- Make alterations to bathrooms and showers, including installing locks or doors and putting up curtains to increase the amount of privacy in your facility without placing extra financial burden on trans resident.
- Change your intake forms to ask “Gender: _____” followed by a statement that transgender people are respected at your facility.
- Put up a sign in your lobby that indicates that transgender people are welcome in your facility.
- Training all staff and residents.
- Integrated a training segment into the training program for all new staff.

HOUSING, BATHROOMS, AND SHOWERS:

- -People who identify as men are to be housed with the men and are to use the men's showers and bathrooms. -People who identify as women are to be housed with the women and use the women's showers and bathrooms.
- -People who do not clearly identify as male or female are to be housed in and use the bathrooms and showers in whichever section they feel safest. If this bothers the other residents of that section, staff should patiently explain to those residents that the person is not a threat to them and that they should be respected.
- -Residents who are worried about privacy should be reminded that all showers and bathrooms in the facility allow for bodily privacy and that single-use showers and bathrooms are available if they more comfortable using those.

MODEL POLICY FOR SAFE HOUSING:

At this facility, we have a policy of respect for all people, including transgender people. Our policy is to respect the gender of each person as they self-identify it. For example, if someone says she is a woman, she is a woman. A person's gender does not depend on whether they have had surgery or other medical treatments. People are who they say they are.

Don't:

1. Avoid "Susan was born a man."
2. Don't make assumptions about people's identity.
3. Do not assume that someone who is transgender is also lesbian, gay or bisexual, or that the person will transition to become heterosexual.
4. Do not say "she wants to be called," "she calls herself," "she goes by Susan," or other phrases that cast doubt on the transgender person's identity.
5. Never ask transgender people about how they have sex or what their genitals look like. This is inappropriate in every situation
6. Never use words such as "it" or "whatever" when referring to someone who is transgender.

For more info contact: Transgender Economic Empowerment Project/djuarez@lalgbtcenter.org/+1 (323) 860-3713 | +1 (323) 308-4034 (fax)