



STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



EDMUND G. BROWN JR.  
GOVERNOR

November 8, 2018

ALL COUNTY LETTER (ACL) NO. 18-133

TO: ALL COUNTY WELFARE DIRECTORS  
ALL CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO  
KIDS (CALWORKS) PROGRAM SPECIALISTS  
ALL CALFRESH PROGRAM SPECIALISTS  
ALL COUNTY REFUGEE PROGRAM COORDINATORS  
ALL CONSORTIA PROJECT MANAGERS  
ALL CASH ASSISTANCE PROGRAM FOR IMMIGRANTS PROGRAM  
MANAGERS

SUBJECT: IMPLEMENTATION OF ASSEMBLY BILL (AB) 959: LESBIAN,  
GAY, BISEXUAL AND TRANSGENDER DISPARITIES  
REDUCTION ACT AND SENATE BILL (SB) 179: GENDER  
RECOGNITION ACT

REFERENCE: [ASSEMBLY BILL \(AB\) 959; SENATE BILL \(SB\) 179; SAWS 2 PLUS;  
SOC 814; THE FENWAY INSTITUTE; THE WILLIAMS INSTITUTE  
\(2009\); THE WILLIAMS INSTITUTE \(2014\); UNITED STATES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES;  
ADMINISTRATION FOR CHILDREN AND FAMILIES \(ACF\); PARENTS  
FAMILIES AND FRIENDS OF LESBIANS AND GAYS \(PFLAG\)  
NATIONAL; ACL 18-46](#)

The purpose of this letter is to provide County Welfare Departments (CWDs) with guidance on the implementation of Assembly Bill [\(AB\) 959](#) (Chapter 565, Statutes of 2015): Lesbian, Gay, Bisexual and Transgender Disparities Reduction Act, and Senate Bill [\(SB\) 179](#) (Chapter 853, Statutes of 2017): Gender Recognition Act, for the CalWORKs, Refugee Cash Assistance (RCA), Cash Assistance Program for Immigrants (CAPI) and CalFresh programs. In addition, this letter provides instructions for use of the new “Demographic Questionnaire for CalWORKs, Refugee Cash Assistance (RCA), Entrant Cash Assistance (ECA), Trafficking and Crime Victims Assistance Program (TCVAP) and CalFresh Programs” form (CW 2223) in order to collect the demographic data required by [AB 959](#).

## BACKGROUND

### **AB 959**

[AB 959](#) was passed in 2015 and requires the California Department of Social Services (CDSS), the Department of Health Care Services (DHCS), the California Department of Public Health (CDPH) and the California Department of Aging (CDA) to request voluntary self-identification data on sexual orientation and gender identity (SOGI), effective July 1, 2018. This data is required to be requested by the CWD when demographic information is collected. The data shall be reported by the CDSS to the Legislature and made available to the public in accordance with state and federal law.

Demographic information is currently used to understand and improve public services. Currently, SOGI data is not consistently collected by the State of California. Information from other sources indicate members of lesbian, gay, bisexual and transgender (LGBT) communities experience higher rates of poverty, health and mental health issues.<sup>1</sup> Therefore, data collection on LGBT communities is crucial to informing policy decisions and addressing these communities' unique needs and barriers.

### **SB 179**

[SB 179](#), which took effect September 1, 2018 and legally recognizes "non-binary" as a third gender option on identification documents issued by the State of California, including birth certificates, driver licenses and identification cards in the State of California. [SB 179](#) is separate from but related to [AB 959](#), and the CW 2223 form includes an option for clients to select "non-binary" as a response for gender identity. The national organization, [Parents, Families and Friends of Lesbians and Gays' \(PFLAG\) National](#) defines non-binary as "...individuals who identify as neither man nor woman, both man and woman, or a combination of man or woman..." Additional information on "non-binary" and other terms are located on Attachment Two of this letter.

## IMPLEMENTATION

### **CalWORKs, RCA/ECA, TCVAP and CalFresh (CW 2223)**

[AB 959](#) requires the CDSS, DHCS, CDPH and CDA to request clients to voluntarily self-identify sexual orientation and gender identity (SOGI). Although the CWDs are required to ask clients about SOGI, the applicant's or recipient's response is entirely voluntary. Responses provided on the CW 2223 are unrelated to the verification requirements for aid (i.e., birth certificate) and the responses are only for data collection purposes. The CW 2223 shall be used in conjunction with the [SAWS 2 Plus](#), [CF 285](#) and [CF 37](#) forms at application and each redetermination/recertification. The CWD shall also provide clients with the CW 2223 for the client to complete any time the client requests to change their SOGI information.

The CWDs shall begin using the CW 2223 for applications and redeterminations/recertifications that occur after the release of this letter. All primary caretaker relatives (including minor

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<sup>1</sup> [United States Department of Health and Human Services, Low-Income LGBT Populations And Programs To Support Self-Sufficiency: A Snapshot Of The Knowledge Base And Research Needs](#)

parents/caretaker relatives) who elect to disclose this data shall complete their own CW 2223 forms, unless they request CWD assistance. Applicants and recipients must be given an opportunity to complete the form, regardless of whether the application or redetermination/recertification is completed by phone, online or in-person. For example, if the interview is completed by phone and no in-person interaction occurs (i.e., the application was also initiated online), the form should be mailed with other documentation sent in accordance with CWD business practices.

While the CW 2223 is not programmed into the State Automated Welfare Systems (SAWS) at this time, the SAWS has the capability to collect the data. The questions and responses are not currently programmed in the applicant/recipient version of the SAWS. Therefore, the CWDs shall enter information collected on the CW 2223 into the SAWS (explained later in this letter) and the CDSS will use the data entered to report this information to the Legislature as required by [AB 959](#).

When entering information collected on the CW 2223 form into the SAWS, CWDs are instructed to do the following: if a client selects “Transgender Female” on the CW 2223, the response should be manually entered into the SAWS as “Transgender: Male to Female.” If the client selects “Transgender Male” on the CW 2223, the response should be entered into the SAWS as “Transgender: Female to Male”. The tables below provide additional detail.

Currently, the SAWS does not include a “decline to state” option. Therefore, if a client selects “decline to state,” the CWD shall not select any response in the SAWS and indicate in the case comments that the client declined to answer the optional questions. If a client does not return a completed CW 2223 or refuses to complete the form, the CWD shall not select any response in the SAWS and shall indicate the reason in the case comments.

### **Cash Assistance Program for Immigrants (CAPI)**

The [SOC 814](#) (1/18) Statement of Facts for CAPI includes optional SOGI questions and responses. If an applicant only applies for CAPI, only the [SOC 814](#) needs to be provided and the applicant does not need to receive the CW 2223. On the [SOC 814](#), the question “What sex was listed on your original birth certificate?” includes “non-binary” as one of the options, although this option is not yet programmed in the SAWS. Therefore, the CWD shall not select any of the responses in the SAWS and should then indicate the response “non-binary” in the case comments. Definitions and terminology on Attachment Two of this letter should be utilized if the CWD needs to provide assistance.

### **Future Guidance**

All County Letters (ACL) providing guidance related to the revision of required reporting, applicant and redetermination/recertification forms and updates to the SAWS necessary to consistently collect this information are forthcoming.

### **Use of the State Automated Welfare System (SAWS) for the CW 2223 and SOC 814**

The following table provides a comparison of the SAWS questions and responses on the CW 2223 form (left column), SOC 814 form (middle column), and the questions and responses in the SAWS (right column) in the order seen by Eligibility Workers.

CW 2223 Form	SOC 814 Form (CAPI only)	CalWIN
<b>What sex was listed on your original birth certificate?</b> <b>Please check one:</b>  Female Male Decline to state	<b>What sex was listed on your original birth certificate? Please check one:</b>  Female Male Decline to state Non-binary	<b>Birth Gender:</b>  Female Male
<b>What is your gender identity?</b> <b>Please check one that best describes your gender identity:</b>  Another gender identity Female Male Non-binary Transgender male Transgender Female Decline to state	<b>How do you identify your gender identity? Please check one:</b>  Another gender identity Female Male Non-Binary (neither male nor female) Transgender: Female to Male Transgender: Male to Female Decline to state	<b>Current Gender:</b>  Another Gender Identity Female Male Non Binary (Neither male nor female) Transgender: Female to Male Transgender: Male to Female
<b>What is your sexual orientation?</b> <b>Please check one that best describes your sexual orientation:</b> Another sexual orientation Bisexual Gay or lesbian Queer Straight or heterosexual Unknown Decline to state	<b>How do you identify your sexual orientation? Please check one:</b>  Another sexual orientation Bisexual Gay or lesbian Queer Straight or heterosexual Unknown Decline to state	<b>Sexual Orientation:</b>  Another Sexual Orientation Bisexual Gay or Lesbian Queer Straight or Heterosexual Unknown

CW 2223 Form	SOC 814 Form (CAPI only)	CalACES North
<p><b>What is your gender identity? Please check one that best describes your gender identity:</b></p> <p>Female Male Another gender identity Transgender female Transgender male Non-binary Decline to state</p>	<p><b>How do you identify your gender identity? Please check one:</b></p> <p>Female Male Another gender identity Transgender: Male to Female Transgender: Female to Male Non-Binary (neither male nor female) Decline to state</p>	<p><b>Gender Identity</b></p> <p>Female Male Another Gender Identity Transgender: Male to Female Transgender: Female to Male Non Binary (neither male nor female)</p>
<p><b>What sex was listed on your original birth certificate? Please check one:</b></p> <p>Female Male Decline to state</p>	<p><b>What sex was listed on your original birth certificate? Please check one:</b></p> <p>Female Male Decline to state Non-binary</p>	<p><b>Birth Certificate Gender</b></p> <p>Female Male</p>
<p><b>What is your sexual orientation? Please check one that best describes your sexual orientation:</b></p> <p>Straight or heterosexual Gay or lesbian Bisexual Another sexual orientation Unknown Queer Decline to state</p>	<p><b>How do you identify your sexual orientation? Please check one:</b></p> <p>Straight or heterosexual Gay or lesbian Bisexual Another sexual orientation Unknown Queer Decline to state</p>	<p><b>Sexual Orientation</b></p> <p>Straight or Heterosexual Gay or Lesbian Bisexual Another Sexual Orientation Unknown Queer</p>

CW 2223 Form	SOC 814 Form (CAPI only)	CalACES South
<b>What is your gender identity?</b> <b>Please check one that best describes your gender identity:</b>  Another gender identity Female Transgender male Male Transgender female Non-binary Decline to state	<b>How do you identify your gender identity? Please check one:</b>  Another gender identity Female Transgender: Female to Male Male Transgender: Male to Female Non-Binary (neither male nor female) Decline to state	<b>Gender Identity</b>  Another Gender Identity Female Transgender: Female to Male Male Transgender: Male to Female Non Binary (neither male nor female)
<b>What sex was listed on your original birth certificate?</b> <b>Please check one:</b>  Female Male Decline to state	<b>What sex was listed on your original birth certificate? Please check one:</b>  Female Male Decline to state Non-binary	<b>Birth Certificate Gender</b>  Female Male
<b>What is your sexual orientation?</b> <b>Please check one that best describes your sexual orientation:</b>  Another sexual orientation Bisexual Gay or lesbian Queer Straight or heterosexual Unknown Decline to state	<b>How do you identify your sexual orientation? Please check one:</b>  Another sexual orientation Bisexual Gay or lesbian Queer Straight or heterosexual Unknown Decline to state	<b>Sexual Orientation</b>  Another Sexual Orientation Bisexual Gay or Lesbian Queer Straight or Heterosexual Unknown

## **SEXUAL ORIENTATION AND GENDER IDENTITY SENSITIVITY AND BEST PRACTICES**

Individuals are more likely to respond to SOGI questions through self-administered surveys, rather than by telephone or in-person interviews.<sup>2</sup> Individuals may also be hesitant when providing responses to SOGI questions due to concerns about confidentiality, prejudice and discrimination.<sup>3</sup> For these reasons, all primary caretaker relatives (including minor parents/caretaker relatives) shall complete their own CW 2223 forms, unless they request CWD assistance.

CWDs should make efforts for periodic training of all front-line staff on SOGI sensitivity and best practices. Many organizations provide LGBT-sensitivity training and CWDs are encouraged to contact local LGBT organizations. Attachment Two is a list of terms used on the form CW 2223 that may be useful when collecting SOGI data. The following are some best practices when working with the LGBT community<sup>3</sup>:

- Explain why the questions are being asked and responses are confidential.
  - By law, the questions are *required* to be asked, but responses from the client are *optional*. If assisting the client with completing the questions, the client shall be informed the questions are *optional*.
    - The response “Decline to state” was added to distinguish whether the question was declined intentionally.
  - Reassure the client the responses are used for data purposes only and will not impact eligibility or grant/benefit amounts.
- Use gender-neutral language, such as “partner” or “significant other.” In addition, use the language the applicants use to describe themselves, such as their preferred names and pronouns.

## **CAMERA READY COPIES AND TRANSLATIONS**

For a camera-ready copy in English, contact the [CDSS Forms Management Unit](#). If your office has internet access, you may obtain these forms from the [CDSS Webpage: Forms Listed by Program](#).

When all translations are completed per MPP Section [21-115.2](#), they are posted on an on-going basis on the CDSS webpage. Copies of the translated forms can be obtained at [Translated Forms and Publications](#).

For questions on translated materials, please contact the CDSS Language Services at (916) 651-8876. Until translations are available, recipients who have elected to receive materials in languages other than English should be sent the English version of the form or notice along with the [GEN 1365 - Notice of Language Services](#) and a local contact number.

The CWDs shall ensure that effective bilingual services are provided. This requirement may be met through utilization of paid interpreters, qualified bilingual employees and qualified employees of other agencies or community resources. These services shall be provided free of

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<sup>2</sup> [The Williams Institute \(UCLA\), Best Practices for Asking Questions to Identify Transgender and Other Gender Minority Respondents on Population-Based Surveys](#)

<sup>3</sup> [The Fenway Institute, Policy Focus: How To Gather Data On Sexual Orientation And Gender Identity In Clinical Settings](#)

charge to the applicant/recipient. In the event that CDSS does not provide translations of a form, it is the CWD's responsibility to provide interpreter services if an applicant or recipient requests them. More information regarding translations can be found in MPP Section [21-115.2](#).

If you have any questions regarding the contents of this letter, please contact the CalWORKs Eligibility Bureau at (916) 654-1322, the Refugees Programs Bureau at (916) 654-4356, the Cash Assistance Program for Immigrants (CAPI) at (916) 651-1174 or the CalFresh Policy Bureau at (916) 651-8047.

Sincerely,

***Original Document Signed By:***

KIM JOHNSON  
Deputy Director  
Family Engagement and Empowerment Division

Attachments



## DEMOGRAPHIC QUESTIONNAIRE FOR CALWORKS, REFUGEE CASH ASSISTANCE (RCA), ENTRANCE CASH ASSISTANCE (ECA), TRAFFICKING AND CRIME VICTIMS ASSISTANCE PROGRAM (TCVAP) AND CALFRESH PROGRAMS

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Legal Name:

Case Number:

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(Optional) Preferred Name and Pronoun(s):

**The following personal information is optional and confidential.** It is asked to make sure that benefits are given without regard to sexual orientation or gender identity. Your answers will not affect your eligibility or benefit amount. The law says the county must ask your sexual orientation and gender identity, but you are not required to answer. Your name and case number are only used to be sure the county asked you the questions. The county will only use this information for civil rights statistical purposes. You can ask the county for another form to change your responses at any time.

- ☐ Check this box if you do not want to give the county information about your sexual orientation or gender identity. You can also select “decline to state” on each of the questions below.

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**1. OPTIONAL:** What is your gender identity? Please check one that best describes your gender identity:

- ☐ **Female** (assigned female at birth and identify as female)
- ☐ **Male** (assigned male at birth and identify as male)
- ☐ **Transgender female** (assigned male at birth and identify as female)
- ☐ **Transgender male** (assigned female at birth and identify as male)
- ☐ **Non-binary** (neither, both or a combination of male or female)
- ☐ **Another gender identity**
- ☐ **Decline to state**

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**2. OPTIONAL:** What sex was listed on your original birth certificate? Please check one:

- ☐ **Female**      ☐ **Male**      ☐ **Decline to state**

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**3. OPTIONAL:** What is your sexual orientation? Please check one that best describes your sexual orientation:

- ☐ **Straight or heterosexual** (attracted to people with the opposite gender)
- ☐ **Gay or lesbian** (attracted to people with the same gender)
- ☐ **Bisexual** (attracted to people with both the same and different genders)
- ☐ **Queer** (do not identify with straight/heterosexual, gay/lesbian or bisexual)
- ☐ **Another sexual orientation**
- ☐ **Unknown**
- ☐ **Decline to state**

## ATTACHMENT TWO

### Sexual Orientation and Gender Identity (SOGI) Definitions and Terminology

The following is an excerpt from the organization [Parents, Families and Friends of Lesbians and Gays' \(PFLAG\) National](https://www.pflag.org/glossary) Glossary of Terms. The terms below include only the terms used on the CW 2223. Additional related terms and information can be accessed at <https://www.pflag.org/glossary>.

**Bisexual:** *Refers to an individual who has the capacity for attraction—sexually, romantically, emotionally, or otherwise—to people with the same, and to people with a different, gender and/or gender identity as themselves. People who identify as bisexual need not have had equal experience- or equal levels of attraction- with people across genders, nor any experience at all: it is merely attraction and self-identification that determine orientation. Bisexuality, as it is frequently used today, can act as an umbrella term that encapsulates many identities such as pansexual. Sometimes referred to as bi or bi+.*

**Gay:** *The adjective used to describe people who are emotionally, romantically, and/or physically attracted to people of the same gender (e.g., gay man, gay people). In contemporary contexts, lesbian is often a preferred term for women, though many women use the term gay to describe themselves. People who are gay need not have had any sexual experience; it is the attraction and self-identification that determine orientation.*

**Gender identity:** *One's deeply held core sense of being a girl/woman, boy/man, some of both, or neither. One's gender identity does not always correspond to biological sex. Awareness of gender identity is usually experienced as early as 18 months old.*

**Lesbian:** *Refers to a woman who is emotionally, romantically, and/or physically attracted to other women. People who are lesbians need not have had any sexual experience; it is the attraction that helps determine orientation.*

**Nonbinary:** *Refers to individuals who identify as neither man nor woman, both man and woman, or a combination of man or woman. It is an identity term which some use exclusively, while others may use it interchangeably with terms like genderqueer, gender creative, gender nonconforming, gender diverse, or gender expansive. Individuals who identify as nonbinary may understand the identity as falling under the transgender umbrella, and may thus identify as transgender. Sometimes abbreviated as NB.*

**Preferred Gender Pronouns:** *A preferred gender pronoun, or PGP—sometimes called proper gender pronoun—is the pronoun or set of pronouns that an individual personally uses and would like others to use when talking to or about that individual. In English, the singular pronouns that we use most frequently are gendered, so some individuals may prefer that you use gender neutral or gender-inclusive pronouns when talking to or about them. In English, individual use they and their as gender-neutral singular pronouns. Others use ze (sometimes spelled zie) and hir or the pronouns xe and xer.*

**Queer:** A term used by some people—particularly youth—to describe themselves and/or their community. Reclaimed from its earlier negative use, the term is valued by some for its defiance, by some because it can be inclusive of the entire community, and by others who find it to be an appropriate term to describe their more fluid identities. Traditionally a negative or pejorative term for people who are gay, queer is still sometimes disliked within the LGBTQ community. Due to its varying meanings, this word should only be used when self-identifying or quoting someone who self-identifies as queer (i.e. “My cousin identifies as queer”).

**Sex:** Refers to anatomical, physiological, genetic, or physical attributes that define if a person is male, female, or intersex. These include both primary and secondary sex characteristics, including genitalia, gonads, hormone levels, hormone receptors, chromosomes, and genes. Sex is often conflated or interchanged with gender, which is more social than biological, though there is some overlap.

**Sexual orientation:** Emotional, romantic, or sexual feelings toward other people. While sexual behavior involves the choices one makes in acting on one’s sexual orientation, sexual orientation is part of the human condition, one’s sexual activity does not define one’s sexual orientation; typically, it is the attraction that helps determine orientation.

**Transgender:** Often shortened to trans. A term describing a person’s gender identity that does not necessarily match their assigned sex at birth. Other terms commonly used are female to male (or FTM), male to female (or MTF), assigned male at birth (or AMAB), assigned female at birth (or AFAB), genderqueer, and gender expansive. Transgender people may or may not decide to alter their bodies hormonally and/or surgically to match their gender identity. This word is also used as a broad umbrella term to describe those who transcend conventional expectations of gender identity or expression. Like any umbrella term, many different groups of people with different histories and experiences are often included within the greater transgender community—such groups include, but are certainly not limited to, people who identify as transsexual, genderqueer, gender variant, gender diverse and androgynous.