**City of Minneapolis**

**Gender Identity Equity Terms and Conditions**

**for the Provision of Emergency Shelter Services**

(Revised: March 24, 2022)

Discrimination on the basis of gender identity is prohibited based on Minneapolis City Code [Section 139.10](https://library.municode.com/mn/minneapolis/codes/code_of_ordinances?nodeId=COOR_TIT7CIRI). Note that discrimination based on other protected classes, including non-compliance with ADA, is also prohibited by local, state, and federal law.

Consultants can connect with their contract manager and with the City of Minneapolis Division of Race and Equity ([RaceEquity@minneapolismn.gov](mailto:RaceEquity@minneapolismn.gov)) for technical assistance in implementing these requirements, identifying potential trainers for staff trainings, and resolving additional questions. For more detailed information, please consult the Resources section at the end of this document.

If the program funded by this Contract has previously been subject to these requirements, these requirements shall be in force at all times during the term of this Contract. If the program funded by this Contract has not previously been subject to these requirements, Consultant shall make reasonable efforts toward compliance by the date that is ½ of the way through the term of this Contract and shall achieve full compliance with these requirements by the date that is ¾ of the way through the term of this Contract.

1. **Policies & Publications**
2. Non-discrimination standards, including the requirements of this Contract, will be documented clearly in personnel handbooks applicable to the program funded by this Contract, communicated to clients during resident orientation (along with consequences for harassment), and publicly posted in each facility in which Consultant provides services under this Contract in a location where clients, volunteers, visitors, and staff can view them.
3. If the Consultant has a non-discrimination policy applicable the program funded by this Contract, that policy will be updated to include both gender identity and gender expression as protected classes.
4. If/when internal and/or external publications applicable to the program funded by this Contract are updated by Consultant during the term of this Contract, they will be amended to include gender-neutral and trans-inclusive language.
5. External publications/outreach applicable to the program funded by this Contract will explicitly state the shelter’s commitment to trans inclusion and racial equity.
6. **Staff Hiring and Training**
7. Consultant will incorporate training on gender identity and racial equity into their new employee and new volunteer orientation for all employees performing work under the program funded by this Contract. Gender identity and racial equity training for existing employees and volunteers performing work under the program funded by this Contract will be provided annually to account for staff turnover.
8. All other staff training materials applicable to the program funded by this Contract will be updated during the term of this Contract so that they are trans-informed (i.e. use gender-neutral language where appropriate; incorporate trans-inclusive practices in any relevant contexts).
9. Prioritize finding and retaining staff and board members who are representative of the populations served in terms of race, gender identity, (dis)ability, and lived experience of homelessness.
10. **Client Intake**

If the Consultant has an intake process for clients applicable to the program funded by this Contract, that process will be updated as follows:

1. Phone and in-person intake will avoid gendered greetings.
2. Staff will only refer to clients by name and/or gender-neutral pronouns until the client shares their pronouns.
3. Clients will be asked for a chosen name and pronouns and be able to self-identify gender, both on forms and in conversational intake. Clients–not their external case managers or parents–will be the authority on their gender, pronouns, etc. All staff will use a client’s chosen name and pronouns in all contexts moving forward.
   1. In the case of group intake, clients will only have to self-identify name and pronouns on a form, to respect privacy.
   2. In one-on-one intake, clients will also be asked in conversation, but allowed to only answer on the form if preferred.
4. Clients will be asked what name/pronouns to use when coordinating with other service providers about services for the client. Clients will not be required to report the same gender identity or present the same gender expression to different service providers, in order to avoid “outing” clients in spaces that feel unsafe. If clients are only out at some service providers, service providers will work with clients to confirm how they want their identity marked in shared databases.
5. Clients will be given the option for staff to ‘out’ them to other staff within Consultant’s organization or at partner organization, if the client would prefer to be out as trans or gender non-conforming but to not have that conversation themselves.
6. Staff will inform clients of which information they’re able to withhold from partner organizations, and clients will be able to select whether to withhold that information from certain providers. Protected information will not prevent referrals to services and resources of partner organizations.
7. Staff will not ask for documentation or information unrelated to services provided by Consultant, especially questions regarding medical transition history.
8. Staff will inform clients about any gender-segregated spaces included in Consultant’s services and will offer accommodations to meet transgender and gender non-conforming clients’ needs. However, transgender and gender non-conforming clients will not be required to accept an available accommodation.
9. Grievance options provided by the shelter will be communicated to clients when they enter the shelter, as well as upon request at any point during their stay. Clients will be given examples of what the content of their grievance could be, and of the protected classes around which they could file a grievance.
10. **Shelter Services**
11. Staff members who observe harassment based on any protected identity trait will act immediately to stop the harassment, speak to supervisors, and document the action in relevant case notes.
12. If Consultant imposes a dress code, that dress codes will be non-gendered (ie. “Clothing must cover shoulders to mid-thigh,” rather than “Women must wear shirts that cover their chests”) and will not be culturally or racially biased.
13. Consultant will not deny access to a mixed-gendered space based on a client’s perceived, self-identified, or expressed gender identity, a client’s medical transition history, a client’s inability to produce documentation of their self-identified gender identity, the existence of opposite or conflicting gender markers on a client’s identification documents, or because a client’s appearance or behavior does not conform to gender stereotypes or providers’ expectations.
14. In the case of gender-segregated spaces, clients will be assigned to the gender-segregated space which, as identified by the client, most closely conforms to the client’s self-identified gender identity. Transgender and gender non-conforming clients will have the same access to space as cisgender clients and will not be subject to any additional rules about use of or presence in said spaces. Clients will never be forced to use alternative facilities as an accommodation for another client’s discomfort about their gender identity or expression. Consultant will not deny clients access to gender-segregated spaces or supplies, materials, etc. based on a client’s perceived, self-identified, or expressed gender identity, a client’s medical transition history, a client’s inability to produce documentation of their self-identified gender identity, the existence of opposite or conflicting gender markers on a client’s identification documents, or because a client’s appearance or behavior does not conform to gender stereotypes or providers’ expectations.
15. All clients will be allowed to use individual bathroom stalls and single-stall showers, or have other accommodations made for privacy upon requested.
16. Medication and personal care items related to gender transition (scar tape, etc.) will be subject to the same policies around confidentiality and access as other medications. These items will not be more difficult to access than comparable, non-gender-transition-related items. If these items pose low risk, they will be less restricted/easier to access.
17. Consultant will inform transgender and gender non-conforming clients of the following options, to the extent available:
    1. Availability of beds closer to night staff, or beds set aside for residents with increased vulnerability (these beds will not be reserved exclusively for transgender and gender non-conforming clients, because use of these beds would then ‘out’ a client).
    2. Availability of private rooms, shared rooms with curtain dividers, or other accommodations for privacy in changing.
    3. Availability of private showers/bathrooms, private rooms, or alternate times to use showers.
    4. Vacancies in, and the opportunity for a referral to, other shelters that can provide comparable services and will be better suited to support transgender and gender non-conforming clients.
18. **Client Grievance Procedures**

If the Consultant has a grievance process for clients applicable to the program funded by this Contract, that process will be updated as follows:

1. The grievance policy will give examples of the types of consequences associated with different types of grievances, and the severity of the consequences will reflect the severity of the grievance.
2. The grievance policy will include progressive discipline for repeated harmful behavior, including behavior for which the initial recommendation was additional training/education.
3. Staff responsible for accepting, tracking, and investigating grievances will be trained to run a trauma-informed process focused on reducing harm to all those named.
4. Staff will provide grievant with a timeline for their grievance process that lists each step of the grievance process.
5. Staff will use best efforts to provide the client filing a grievance with options that will help them feel safe while still seeking support if desired (for example: interfacing with a different staff member).
6. The client filing a grievance will have the right to not talk to the person allegedly causing the harm until the grievance is addressed.
7. The remedy for a confirmed grievance will consider both individual and organizational culpability for the incident.
8. Resolution will not involve the discontinuation of services for the client who filed the grievance, nor limitations on their freedom, unless the grievance process reveals that said client committed conduct also worthy of grievance and of a severity level comparable to said consequences. The shelter may not impose consequences as retaliation for a client filing a grievance.
9. Staff handling grievances will always attempt to follow up with the person who filed the grievance to inform them of what the outcome and response were.
10. **Data Management**
11. Data collected on clients will include optional questions on, and be able to be disaggregated by, race, ethnicity, gender identity, and household size. This data will be reported to the City annually, if it is possible to do so while still retaining client anonymity.
12. Consultant will attempt to track the number of times that clients are referred out to other organizations (particularly after filing grievances), diverted, and/or turned away for reasons *other than*lack of space, the results of grievances, the number of clients that return to homelessness/return for services, and will track client and staff satisfaction at least annually. This information will be disaggregated by race, ethnicity, and gender identity, and analyzed to identify race- and/or gender identity-based barriers to services. This data will be reported to the City annually including, if possible while still retaining client and staff anonymity, data disaggregated by race, ethnicity, and gender.
13. Past and present clients will be allowed to have Consultant’s staff change their gender marker, gender pronouns, and chosen name as recorded in Consultant’s records system at any time, and will not be required to present any documentation in order to request said changes.
14. Staff will not share client information with partner organizations, except as authorized by the client pursuant to Section C above or where required by law or contract. When possible, clients should be informed when and where their information will be shared.
15. Staff will safeguard client information within Consultant’s organization as possible, including data encryption if available, so that sensitive information (trans status, medical transition history, HIV status) is only accessible to staff who need access to this information to carry out Consultant’s services.
16. **Facilities & Equipment**
17. At least one gender-neutral restroom that is conveniently located and accessible to individuals with disabilities will be available to staff and clients. Accommodation can simply involve signage updates and does not necessitate building renovations.
18. If signage around the building is updated during the term of this Contract, that signage will be modified to include gender-neutral language and to be multilingual if needed, reflecting the primary languages of clients served.
19. If requesting donations or purchasing supplies, Consultant will seek out items that would specifically support transgender and gender non-conforming clients (masculine clothes & shoes in smaller sizes, feminine clothes & shoes in larger sizes, wigs or wig alternatives, razors, makeup, gender-affirming products including breast forms, gaffs, binders, etc.) and will support clients of various races (culturally specific hair products, makeup for deeper complexions, etc.). Donations will not be restricted by gender.

**Resources:**

1. Model Trans/GNC-Inclusion Policy [Model Policy & Legal Guide For Homeless Shelters and Housing Programs, Transgender Law Center, 2016](http://transgenderlawcenter.org/wp-content/uploads/2016/02/03.09.2016-Model-Homeless-Shelter-TG-Policy-single-pages.pdf) (page 5-7)
2. Model document communicating anti-discrimination policies and grievance processes to clients: [Equal Access for Transgender People: Supporting Inclusive Housing and Shelters, US Department of Housing and Urban Development, undated](https://www.transequality.org/sites/default/files/docs/resources/Equal-Access-for-Transgender-People-Supporting-Inclusive-Housing-and-Shelters.pdf) (page 8)
3. Additional Reading:
   1. [Sheltering Transgender Women: Providing Welcoming Services](https://vawnet.org/sites/default/files/materials/files/2016-09/NRCDV_TAG-TransWomenShelter-Sept2014.pdf), FORGE, 2014
   2. [The Alliance’s Racial Equity Network Action Steps: Addressing Racial and Ethnic Disparities in the Homelessness System](https://endhomelessness.org/wp-content/uploads/2020/02/REN-Action-Steps-final.pdf), National Alliance to End Homelessness
   3. [Racial Equity & Coordinated Entry: Where Can Disparities Happen in the Process? Flowchart](https://endhomelessness.org/wp-content/uploads/2020/06/NAEH-CE-Processes-Racial-Disparities-Flowchart-FINAL.pdf), National Alliance to End Homelessness
   4. [Racial Equity and Emergency Shelter: Access and Outcomes Flowchart](https://endhomelessness.org/wp-content/uploads/2020/10/RE-ES-Access-Outcomes-flowchart.pdf), National Alliance to End Homelessness