

Recommendations

Report on Families with Children Living in Single Room Occupancy Hotels in San Francisco

Recommendation:

Institutionalize a continuous improvement process between departments, families living in SROs, and their advocates.

The objectives would be to address the findings and recommendations for each goal outlined in this report, to routinely assess the progress made, and to continually improve the situation. These collaborations would (1) have a lead department that staffs and coordinates the workgroup, (2) adopt the goals as outlined in this report, (3) aggregate City-wide data regarding the number of homeless families, and (4) give routine status reports to City leadership and Board of Supervisors.

Goals:

1. Families with children move from SROs into stable housing,
2. Families with children are preserved while residing in SROs,
3. Families with children live in clean, safe conditions when residing in SROs, and
4. Families with children improve their socioeconomic and health status while residing in SROs and until housing stability is achieved.

San Francisco Agency	Workgroup			
	Goal 1	Goal 2	Goal 3	Goal 4
Department of Building Inspections		Member	Member	
Department of Children, Youth, and Families				Member
Department of Human Services	Member	Lead	Member	Member
Department of Public Health	Member	Member	Lead	Lead
Mayor's Office of Homelessness	Member	Member	Member	Member
Mayor's Office of Housing	Lead			
Redevelopment Agency	Member			
San Francisco Fire Department			Member	
San Francisco Housing Authority	Member			
San Francisco Police Department			Member	
San Francisco Recreation and Park Department				Member
San Francisco Unified School District		Member		Member

Goal 1: Families with children move from SROs into stable housing.

Goal 1 – Recommendations

Goal 1: Families with children move from SROs into stable housing.

Recommendation 1

Assure parents residing in SROs and their advocates sit on all housing committees so that they may influence housing advocates, non-profit housing development agencies, the State of California and the City and County of San Francisco when housing policies are being developed and to assure that they adopt child- and family-focused planning priorities.

“The needs of the child must have priority in the planning of human settlements.

- Ensure that children and young people can participate in making decisions that affect their surroundings and their access to them.
- When planning new, or reorganising existing developments, recognise the child's small size and limited range of activity.
- Disseminate existing knowledge about play facilities and play programmes to planning professionals and politicians.
- Oppose the building of high-rise housing and provide opportunities to mitigate its detrimental effects on children and families.
- Enable children to move easily about the community by providing safe pedestrian access through urban neighborhoods, better traffic management, and improved public transportation.
- Increase awareness of the high vulnerability of children living in slum settlements, tenements, and derelict neighborhoods.
- Reserve adequate and appropriate space for play and recreation through statutory provision.”¹³

One example where legislation could go further is Board of Supervisor Mark Leno's Affordable Housing Initiative requiring that developments with 10 or more units make 12% of their units available to households making \$30k or less to rent, or \$50k or less to buy. The Workgroup recommends further that the legislation:

- include new Live/Work units,
- apply to units for a long time to avoid the quick "turn over" of low income tenants, thus allowing rents to be raised,
- carve out units for very-low income families, i.e., those making less than 15% of the Area Median Income (AMI).

Assure childcare facilities and programs are integrated into all low-income housing developments in the City.

Recommendation 2

Expand the number of permanent housing units planned for “very low income” families and add supportive services onsite.

- a. Planning departments assure that family units are incorporated into the non-profit, City and State's priorities. For example, new housing developments in the City have been primarily live-work lofts...and these are not conducive to families with children.
- b. Identify existing abandoned buildings in San Francisco and consider ways to rehabilitate them into accessible housing for families.

Goal 1: Families with children move from SROs into stable housing.

Recommendation 2

continued

- c. Negotiate Master Leases with apartment buildings that have floor plans that can accommodate families and that have private bathrooms and kitchens.
- d. Consider developing and using a Land Trust to build or develop affordable housing. A Land Trust would enable the city to regulate rental rates since it would own the land where the development resides. A Land Trust would eliminate the problem of dealing with escalating land values, taxes and rents, thereby enabling the development to offer low cost housing over a long period of time without the danger of raising rents to stay competitive.
- e. Consider using "Blight Ordinances" to acquire buildings to convert into affordable housing for Very Low-Income families.
- f. Increase Cooperative Housing Arrangements and other alternatives to development, e.g., scattered housing, shared housing.
- g. Utilize data secured from SRO Census Project to influence unit configuration for new capital dollars invested in affordable housing by San Francisco Redevelopment Agency and the Mayor's Office on Housing.
- h. Increase coordination between San Francisco Housing Authority, Redevelopment Agency and Mayor's Office on Housing in the long-term development of low-income housing. Maintain wait-lists that can be merged to determine San Francisco's overall demand for low-income family housing. Assure coordination and parents in SROs and their advocates are included in the development of Request-for-Proposals (RFPs). Assure that family-focused guidelines (Attachment 2, page 43) adopted by the Department of Public Health are integrated into RFPs and contracts.

Recommendation 3

Assure "very low income" families living in SROs can compete in the low-income housing market.

- a. Standardize and define "Very Low Income" as families making \$15,000 or less annually. Assure "low income" criteria used by all agencies and departments are realistic. Assure relevant income scales are realistic, e.g., not just "income", but:
 - number of members in the family's household,
 - ratio of parents to children in the household,
 - number of incomes per household,
 - number of people at-large in the household, and/or
 - % of income going to rent.When defining Performa, consider the reductions in assistance a family may experience as their income gradually increases. These reductions may put a family in a more precarious financial situation even though it would appear that they are improving their financial condition.
- b. Increase rent subsidies for very low-income families (in amount and length of time) so that more units can be allocated to very low-income families in housing developments.
- c. Allocate funds for credit repair, move-in costs, back rent, and eviction defense.
- d. Assure families in SROs, and their advocates are reached with information of housing opportunities.

Goal 1: Families with children move from SROs into stable housing.

Recommendation 3
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- e. Assure families, their advocates and providers have easy access to the information updated regularly in the Mayor's Office of Housing's Housing Information System (offered through an internet site by the Mayor's Office of Housing: www.sfmoh.org.) The Housing Information System is a database that contains all of the affordable housing in the City and includes unit and building sizes, neighborhood, building amenities, and wait list status and process.
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Recommendation 4

Develop housing policies to support economic stability and development of families.

- a. Develop incentives for builders and contractors who train and hire tenants in the improvement or building of their dwellings.
 - b. Enable CalWORKs recipients to be exempt from welfare-to-work activities until stable housing is secured.
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Goal 2: Families with children are preserved while residing in SROs.

Goal 2 – Recommendations

Goal 2: Families with children are preserved while residing in SROs.

Recommendation 1

Child Protective Services (CPS) collaborate with Family Resource Centers, SRO Collaboratives, SRO management and families to develop prevention policies and practices where the family is given appropriate support and intervention and the least negative impact results.

- a. When staff at CPS believe physical environment is “child endangering”, use SRO Collaborative teams and Family Resource Centers to intervene and develop “workplans” with the family, the SRO management, and DPH Environmental Health Section.
- b. Develop training for CPS staff regarding “reality” of families living in SROs with children.
- c. Educate SRO owners regarding CPS and other resources so that they know what are the appropriate and available options available to a family; i.e., do not have CPS be the “default” call.
- d. CPS work together with community outreach case management teams and family preservation centers to develop “prevention and intervention” for families in SROs, i.e., to advocate and make linkages.
- e. Assure CPS is coordinating and joint planning with DHS Housing and Homeless Programs at a system level and for individual families.
- f. CPS, Shelters, and Family Resource Centers maintain databases to determine extent that unstable housing contributes to reports to CPS and families being separated.

Recommendation 2

Develop Family Respite Programs

Examples:

- Fund a place where parent can have time for self, or where families can go together to cook and have dinners on weekends and holidays.
 - Fund a bus that picks up children in SROs and takes them to supervised functions.
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Goal 3: Children live in clean, safe conditions when residing in SROs.

Goal 3 – Recommendations

Goal 3: Children live in clean, safe conditions when residing in SROs.

Recommendation 1

Increase responsiveness and accountability of SRO hotel owners.

- a. Force landlord to live in chronically sub-standard SROs.
- b. Publish public notices of hotel with poor ratings in newspaper, internet, etc. (similar to restaurants)
- c. Mandate “if problem is not fixed by SRO owner, the City will do it and charge them for it.”
- d. Identify incentives (e.g., tax credits) for SRO owners who turn-around substandard hotels and who maintain excellent standards.
- e. Tie rehab dollars to improved living conditions and tenant’s rights.

Recommendation 2

Increase responsiveness and accountability of City inspectors, planners, and enforcement.

- a. Officially integrate DPH’s Children’s Environmental Health Section to the inspection process in SROs where families with children reside.
- b. Analyze current and revised inspectors’ codes/checklists to assure they are family- and child-focused. For example, insure safety of children from falls by regulating stair gates, window guards, and fencing. Also important is to assure elevators are in working condition so parents do not pull baby strollers up and down stairs and risk child falling out of stroller.
- c. Mandate that inspection parties (DBI, EH, Children’s EH, City Attorney, and Fire Department) * :
 - Increase the number of routine inspections
 - Improve inspection enforcement
 - Develop and abide by Citywide coordination and reporting policy (who notifies / coordinates with whom and when)
 - Report back to the complainant regarding the disposition of the complaint.
- d. Create relationships with SRO managers and owners, e.g., attend Manager Association meetings.
- e. Develop regional teams and Memorandum of Understandings between representatives from each department, SRO residents, managers, advocates and providers to create relationships and to routinely identify and solve problems in the neighborhood SROs.
- f. Train inspection workers about children’s issues and referrals.
- g. Enforce and expand licensing and zoning requirements so that the neighborhood has fewer liquor stores, etc.
- h. Enforce laws against selling drugs to minors in the neighborhood.
- i. Assign specialist on the Police Force that understands the issues of families in SROs.

* A policy change and agreement has been developed by and agreed to by DPH Environmental Health Section and the Mission and Chinatown SRO Collaboratives (Attachment 3, page 44).

Recommendation 3

Develop and fund an SRO Collaborative for the South of Market / Tenderloin neighborhood, similar to the Mission and Chinatown Collaboratives.

Goal 4: Families with children improve their socioeconomic and health status while residing in SROs and until housing stability is achieved.

Goal 4 – Recommendations

Goal 4: Families with children improve their socioeconomic and health status while residing in SROs and until housing stability is achieved.

Recommendation 1

Define families with children living in SROs as “Homeless.”

Coordinate with City Departments to standardize the definition of “homelessness” to include families with children who live in SROs – whether or not they have tenancy rights so that they are eligible for City-subsidized services targeted to this vulnerable population.

Recommendation 2

Implore the public education system to respond to the distinct needs of children living in SROs.

“When looking at the issue of homelessness from the perspective of education, there seems to be little that can be done to significantly impact the problem because the immediate solution will come only through the provision of adequate affordable housing. Yet, if we fail to do what we can about educating homeless children, then as a nation, we may forfeit our opportunity to make a dramatic difference in the lives of hundreds, thousands, or hundreds of thousands of children and youth.”³⁵

- a. “A school can provide a special place where homeless children can go for a chat with a counselor or other sympathetic person, or simply some quiet time between the chaos of a shelter and the start of the school day
- b. It should also offer privacy so that children can seek help without fear of being overheard. If possible, the room should remain available in the evening so students have a safe place for homework or play.
- c. A school may also provide these resources:
 - Nutritious meals, including dinner for students who participate in after-school activities.
 - Storage space for personal belongings.
 - Clothing, second-hand or new items solicited from apparel companies.
 - Personal hygiene items and bathing facilities.
 - Health services or clinic referrals.
 - Information on public assistance and services.”³¹

Work with SRO Advocates to post “What you need to know about the Education of Homeless Children”⁵² list of rights in all SROs where families in children are living. Assure that educators understand that these rights apply to families with children living in SROs.

Goal 4: Families with children improve their socioeconomic and health status while residing in SROs and until housing stability is achieved.

Recommendation 3

Educate service providers on the issues facing families living in SROs and assure that their services are responsive and adhere to the family-focused guidelines (as adopted by the Department of Public Health in Attachment 2, page 43).

Experts serving homeless families believe that addressing mental health and substance abuse in a way that does not make parents feel threatened that CPS will take their children away at any moment may be the single most powerful intervention. Detox and recovery programs that take in whole families often appeal to the families.

The following guidelines were established by the American Pediatrician Association³⁰, but could be applied to all providers:

- a. Pediatricians should be aware that homelessness is a pervasive societal problem and children need permanent dwellings. They should be knowledgeable about the existence of homelessness in their own communities and are encouraged to become involved in local relief and advocacy programs. Pediatricians need to be supportive of collaborative efforts on behalf of homeless children.
- b. Pediatricians should be involved in the development of national guidelines regarding health and safety standards for temporary residences that house children and families that can be distributed to all states, local governments, and agencies involved with issues of homelessness.
- c. Pediatricians should educate social service agencies about the medical problems for which homeless children are at risk, and they should work with these agencies to develop comprehensive systems of care and to strive to ensure that every homeless child and family has a medical home.
- d. Comprehensive and coordinated services should be integral to all efforts on behalf of homeless children and families; this is especially critical for children with chronic illnesses and mental health problems.
- e. Pediatricians should encourage federal, state, and local governments to support and provide adequate funding for comprehensive homeless prevention programs (including mental health and dental care) to ensure a continuum of care for homeless children and their families.
- f. Pediatricians should encourage federal, state, and local governments to appropriate sufficient monies to fund primary health care grants for the provision of comprehensive health care for all homeless people, with a focus on continuity of preventive care.
- g. Pediatricians should encourage Congress to fund additional mental health grants for community-based organizations that serve homeless children.
- h. As welfare and health care reform move forward, pediatricians should ensure that monitoring systems be devised that will track potentially untoward, as well as positive, effects of these reform initiatives.³

Goal 4: Families with children improve their socioeconomic and health status while residing in SROs and until housing stability is achieved.

Recommendation 4

Develop Multidisciplinary SRO Family Outreach Teams

The fear of losing children, mistrust in the System and the simple lack of time keeps adults from getting the help they need to move into stable work and housing. Outreach by a persistent multidisciplinary team with a good reputation in the community also can play an important role - at first, they give out Tylenol, cough syrup, answer questions, eventually they may be trusted with concerns about more sensitive topics.

The SRO team composed of an Peer Parent, Case Manager, Mental Health Social Worker, and Public Health Nurse will provide comprehensive, coordinated, non-threatening, and culturally-relevant services to reach out and engage families and to provide (or link to) appropriate intervention and supportive services. One team should be housed in each of the three target communities: Chinatown, Tenderloin/South of Market, and Mission.

Statement of Need for SRO Family Outreach Teams

The target client population is one that has difficulty accessing appropriate levels of care, and for whom linkage with support and follow-up services may be problematic. Families in SROs may have multiple medical problems, mental health, and/or substance use issues, in addition to other contingencies, such as inadequate housing, lack of family support, lack of health insurance, language or other barriers to effective use of the health care system.

Specifically,

- a. Parents do not know their rights and basic needs are not being met.
- b. Families living in SROs are isolated, neither aware of nor supported in the progressive steps for improving their families' health and housing situations. A family's situation, their options and available resources are so dynamic that it is unrealistic to believe that each family can stay on top of it all.
- c. Often a family may be fleeing from a domestic violence situation and may find themselves homeless, without insurance and supports for the first time. They may be fearful of others knowing where they are.
- d. Systems don't respond. There is no one available to broker or link complex needs with resources and benefits available to them and to follow-up.
- e. Homeless families without phones and resources need face-to-face support.
- f. Families in SROs make enough to pay rent; they may disqualify for "homeless" services.
- g. Our provider networks do not understand the distinct needs of families in SROs.
- h. Department of Building Inspections, Environmental Health, Fire Department, and landlords do not have anyone to turn to when a family is under duress (except Child Protective Services, which may or may not be appropriate).
- i. Families in poverty may not have the life, job, parenting, credit repair or money-management skills to plan and move toward self-sufficiency.

Goal 4: Families with children improve their socioeconomic and health status while residing in SROs and until housing stability is achieved.

Recommendation 4
continued

Goals of the Outreach Team

To help families with children:

- (1) Move from SROs into stable housing
- (2) Stabilize and improve while they reside in SROs

In ways that will enable them to:

- a. Preserve their families
 - b. Restore and improve their quality of life
 - c. Regain and sustain self-sufficiency
 - d. Avoiding homelessness in the future
 - e. Stabilize children in school
 - f. Take advantage of every opportunity available to them
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Ruling Principles of the Outreach Team

- a. Team will be utilized as “first response” for Child Protective Services (CPS) intervention (to develop a workplan) so that fewer children are taken away from parents simply due to environmental reasons.
 - b. Family will be stabilized at each step and before the next step is taken.
 - c. Families will be able to “see where they are” and how they are progressing.
 - d. Services will be family-focused (Attachment 2, page 43).
 - e. Families will be engaged into a community with long-term supports.
 - f. Program will “walk the talk” and will develop a model whereby clients become peers, who then become professionals, who then get placed.
 - g. Program will integrate “community and family-to-family collaboration” in its design and development.
 - h. Service will be customized to each family.
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Eligibility

To be eligible for the services, a family must reside in a SRO. Continued services will remain available to clients who move out of SROs into less stable situations (e.g., shelters or street) and for six months following exits into more stable living situations.

Engagement

- a. Referrals from landlords, CPS, Department of Building Inspections, Environmental Health, Fire Department, Primary Care and other Service Providers, San Francisco Unified School District, agencies who serve homeless families, hotlines, etc.
 - b. Outreach, e.g., marketing, knock on doors.
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Goal 4: Families with children improve their socioeconomic and health status while residing in SROs and until housing stability is achieved.

Recommendation 4
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Services to be Provided by the Outreach Team

A Public Health Nurse, Mental Health Social Worker, Case Manager and Peer Parent will work in team with a variety of community agencies to shape the nature of the service and intervention with the family. The overall focus will be on strength-based case management, linkage to health care, and continuity of health care for the families.

As appropriate to skill and pay levels, members will:

- a. Provide mobile outreach and home visits.
- b. Screen/Assess:
 - Environment and Home
 - Physical Health
 - Childhood development
 - Substance Abuse
 - Domestic Violence
 - Depression
 - Housing and economic situation
 - Eligibility for benefits and entitlements
- c. Develop priorities and interventions with family to promote health and wellness and housing stability.
- d. Develop “life plan” with family to stabilize and move out of poverty: Parent, money management, job training, literacy, nutrition, housing, credit repair, etc.
- e. Advocate, coordinate, assist, and monitor interventions with family and on behalf of family. For example:
 - Link with primary care providers and other support agencies.
 - Facilitate referrals to other providers for families who may move to another area.
 - Organize on-site or neighborhood linkages to services.
 - Provide and/or engage families in legal and tenants right’s counsel
 - Engage in credit repair process
 - Broker into resources when family finds barriers; e.g., childcare, housing wait lists, entitlements, immigration
- f. Advocate for families and educate the “System”
 - Develop forum/fair to cross-educate about services available to families in SROs (target audience would be providers)
 - Coordinate / collaborate with resources, e.g., educate providers re SRO tenants needs and rights and other resources
 - Formal and routine feedback and communication with School District and City institutions to identify policy issues and recommendations for improvement.
 - Develop Regional Teams, including SRO residents, managers, advocates and providers
- g. Coordinate and increase presence positive traffic in SROs.
- h. Provide SRO-eviction prevention funds.

Goal 4: Families with children improve their socioeconomic and health status while residing in SROs and until housing stability is achieved.

Recommendation 5

Other Ways City Departments can help:

- a. Provide cell phones to families who are engaged in one or more City institution that requires immediate contact with family or vice versa.
- b. Support the development of "211" line for families to utilize when homelessness and/or hunger appear eminent (Attachment 4, page 45).
- c. Relocate families in SROs together.
- d. Prioritize "homeless" families and children on waiting lists for programs offering services.
- e. Fund sufficient childcare services.
- f. Link gyms and churches to SROs.
- g. Allocate resources for Department of Recreation and Parks to open more sites.

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