**BACKGROUND**

Single Room Occupancy Hotels (SROs) are an important source of low-income and transitional housing in San Francisco. However, numerous conditions exist within and around these facilities that result in negative health outcomes for their residents and the surrounding community. In September 2013, the San Francisco Health Commission passed a resolution to improve the health of SRO residents. The resolution requested that the San Francisco Department of Public Health (SFDPH) carry out a health impact assessment (HIA) to evaluate to identify the key issues associated with food security and other conditions to improve the health of residents in SROs.

The traditional objective of an HIA is to examine a specific proposed policy, plan, or program with regards to potential future health benefits or risks to inform decision making. This HIA is unique because we are not starting with a discrete policy in mind, but rather look to solicit, synthesize, and understand the “policy wish lists” of diverse SRO stakeholders first.

The outcome would be an HIA report detailing the magnitude of the problem the policy would address and the potential changes in health that could result if the identified policy, plan, or program were implemented, in an effort to motivate and support necessary change.

To facilitate more productive group brainstorming, SFDPH conducted a number of key informant interviews to understand potential issues that could be addressed at a policy level. This report details the findings from these interviews.
METHODS

The HIA team interviewed key individuals that interface with SROs and their residents. The objectives of the interview were to help Environmental Health staff gain insights into the SRO system and guide future group policy brainstorming sessions. The HIA team developed a semi-structured questionnaire to guide interviews with SRO stakeholders (see Appendix 1), specifically focusing on:

- key health issues
- optimal living conditions for a healthy environment
- ideas for policies to improve residents’ health.

We met with 22 key informants for hour-long, in-depth interviews between October 2013 and January 2014, including informants (see Table 1) affiliated with SFDPH, other city agencies, non-profit providers, SRO tenant advocacy collaboratives, and a business working with private SROs.

Typically, two HIA team members were present in the interviews, with at least one person taking detailed notes. In-depth interviewing allowed participants to discuss the complexities of improving health in SROs with more depth and candor, than other data collection methods like focus groups. Interviewing such a broad spectrum of stakeholders enabled us to:

- better understand common trends and policies that could benefit the health of residents living in SROs
- more efficiently lead policy brainstorming sessions and research scoping.

Two team members analyzed and coded notes from the interviews which are presented as major themes and sub-themes. The goal of this summary document is to facilitate brainstorming around concrete policies that can be explored through an HIA. We purposefully did not separate findings by stakeholder type.

Table 1: Identifying organizations of key informants (number of interviews), n=22

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SRO Hotels: Complex Challenges, Vibrant Opportunities

private SRO hotels
removing accessibility barriers
protecting tenants from victimization
security
peer-based model

a sense of care
tenant appreciation days
keeping people in houses that are safe and healthy places

a livability standard
resources
MAIN THEMES

Using the frequency by which major areas of concern were mentioned, we provide a brief description of five major themes followed by short descriptions of the sub-themes. Content is organized based on how often it was expressed.

1) Building Conditions
   a) Owner Negligence
   b) Tenant Behaviors
   c) Regulatory Coordination
   d) Management Incentives & Support
   e) Outdated Housing
   f) Accessibility
   g) Violence
   h) Management-Tenant Relationships

2) Supportive Services
   a) Case Management
   b) Social Interaction
   c) Successful Movement Through System
   d) Tenant Empowerment
   e) Negative Feedback Loop

3) Housing Fit
   a) Housing Matched to Ability
   b) Housing for Each Step in Stabilization
   c) Assessment of Housing Needs
   d) Family Housing
   e) Housing as Healthcare

4) Real Estate Pressures
   a) Tenant Protections
   b) Unaffordable Rent
   c) Supportive Housing Growth
   d) Hotel Conversion Ordinance

5) Healthy Eating
   a) Cooking Facilities
   b) Nutrition and Cooking Education
   c) Food Access
   d) Building Community with Food

When asked what conditions were necessary for SRO resident health and wellness, not surprisingly, the two most commonly mentioned overarching themes were the environmental conditions in and around SRO buildings and the importance of supportive services for SRO residents to be successful in their housing and to attain overall wellness. Three other broad themes emerged, including housing fit, real estate pressures, and healthy eating. These last three themes likely emerged because of their importance in current work and the general housing climate.

Each of the sub-themes summarizes some of the concerns and ideas for improving life in SROs that arose in the interviews. Few concrete policy suggestions emerged from these interviews given the questionnaire's focus on understanding current conditions and lack of time. Our goal is to use these themes to facilitate policy ideation by SRO stakeholders who will help select potential policies or programs ripe for analyzing prospective impacts on health.
Building Conditions
One of the most prominent areas of concern that emerged in our interviews was the environmental conditions within and around SROs. The subthemes below are an attempt to summarize some of the issues and ideas that emerged and in our conversations, to help narrow the process of policy selection.

Owner Negligence
Some respondents were more inclined to feel that the approach to improving housing conditions needed to target building managers and owners that were not properly caring for their property. Issues include unclean bathrooms (4 cleanings per day was one recommendation), poorly done repairs, deferred maintenance, improperly heated and ventilated rooms, unsecured garbage leading to pest infestations, etc. People mentioned that in buildings that the City master leases, it is easier to make sure that the facilities are maintained because resolution of code violations is part of the master lease agreement.

Both “carrot and stick” approaches were mentioned. Some suggested that landlords be penalized and pay for temporary rehousing fees for their tenants while violations are corrected. Others suggested a more conciliatory approach, using trusted allies in the community to work with owners to see value in making building improvements. One example was a short-lived forgivable loan program through Redevelopment (prior to the closure of redevelopment agencies) for major improvements – to be eligible the hotel owner had to resolve all outstanding violations.

Tenant Behaviors
It was acknowledged that tenants can be the cause of many sanitation issues. Hoarding, lack of cleaning individual rooms, destructive behaviors, or simply being too disabled to leave one’s room were noted to result in unhygienic and disruptive conditions for the individual, and eventually neighboring units. One person mentioned that unlike in the past where extremely volatile persons would be placed in more restrictive environments, SROs have become both the first and last stop between the streets for the most problematic tenants. The most commonly mentioned solution to tenant generated problems was more frequent interaction with case workers or the provision of supportive services in the form of In-Home Supportive Services. Other suggestions included making buildings more accessible so that individuals with disabilities could leave their rooms and use the facilities or transferring tenants to a housing situation that could better fit their needs.
**Regulatory Coordination**
Some informants said a more coordinated inspections approach between DBI-DPH-Fire may improve housing conditions. While the city has developed more structured inspection processes for buildings that the City master leases, most private SROs are only inspected based on complaints. Some interviewees mentioned that city agencies could work with 311 to make sure that requests are better logged and responded to. It was noted that in some cases, judges dealing with DBI violations are more compelled to act in the City’s favor when they see that DPH and Fire are also part of the complaint. It was mentioned that better coordination or integration between city agencies had been discussed before.

**Management Incentives & Support**
As mentioned above, effective approaches to working with owners and managers generally have to entail “carrots and sticks” to incentivize private operators to maintain facilities that foster healthy living conditions. Some approaches that were mentioned include obtaining grant or loan funds to make repairs, providing culturally-appropriate owner/operator education on good business practices, or finding ways to save owners money by renting out ground floor retail or doing building energy upgrades. It was noted that trust is generally very low between City agencies and private SRO owners and operators. Successful engagement is often most effective when undertaken by stakeholders who understand the private SRO business model and can help find projects that benefit the owner and tenants, for example renting out the ground floor retain to generate revenue to make building improvements. Some felt that a management centered approach may contribute to improved housing conditions, while easing the operational challenges of running an SRO.
Outdated Housing
A number of respondents questioned when we should declare that an aging SRO has reached the end of its operational life. They noted that the challenges of maintaining this aging infrastructure required repairs should be weighed against today’s standard design elements like individual bathrooms, kitchenettes, proper heating and ventilation, and desirable common spaces. Are there mechanisms to support rebuilding our aging SRO housing in way that does not displace residents?

Accessibility
The “silver tsunami” is coming and most our buildings are not amenable for aging in place. Interviewees mentioned problems like broken elevators and non-ADA compliant spaces make even the most basic functions like bathing, accessing food, and socializing a struggle for some residents. Recently a Grab Bar Ordinance was passed for SROs, and some mentioned that they are working with tenants to inquire about whether the ordinance has been enforced. Do we have the infrastructure to allow SF’s residents in these buildings to age in place?

Violence
Violence and fear were other popular issues raised by respondents. Being subjected to violence, either directly or indirectly, physically or verbally, is a reality in many SROs. The issue of women’s safety has been raised and in some hotels they have established female only floors. Children living in facilities with violent or predatory adults was also mentioned and even the presence of needles in hallways was noted as something that instilled fear. Fear of violence in the neighborhood is also common and was noted to prevent youth from traveling to positive community events after dark. Interviewees mentioned that generally everyone who lives in SROs recognizes that the status quo in some SROs is not acceptable. Some solutions offered by interviewees included educating
managers about the installation and use of surveillance cameras, clear tenant rules at the front desk, and employing residents as outreach workers to have a watchful eye and resolve conflicts.

**Management-Tenant Relationships**
Some key informants stated that cultural differences can lead to conflicts between owners/property managers and tenants. Managers may not have a good understanding of the structural and personal issues that their residents are contending with and are not informed of free resources that could contribute to a more compliant tenant.

**Supportive Services**
*After building conditions, the need for more supportive services was the second most voiced concern. In our summarization supportive services encompass effective case management, successful movement and connection of individuals once they enter the system, continuing availability and access to services and enrichment activities, prevention of isolation, and maximization of eligible resources (County Adult Assistance Programs, Supplemental Security Income, CalFresh, etc.). The sub-themes below detail specific concerns and ideas that were raised in our interviews.*

**Case Management**
Several people stated that Care Not Cash is successful in getting people off the street and into housing, but the support to ensure residents thrive while in housing has been insufficient. Some interviewees mentioned that residents would be disconnected from their social network on the streets and have a difficult time shedding the behaviors that they adopted while living outside, such as hoarding. Others mentioned that there are individuals that need to be connected to other supportive services such as In-home supportive Services or Adult Protective services. How can we make sure that people are connected to positive daytime activities and services to leverage the benefits of being housed and continuously improve residents’ quality of life?

**Social Interaction**
One of the things we heard the most was that people are getting isolated in housing. People wanted both spaces for social interaction in housing facilities and the community as well as programming to engage
residents. Some mentioned the need for checking on people in their rooms, even if just by a maintenance worker. Other ideas for social interaction included opportunities for people to gather around memorials, traumatic events, difficult issues, and of course, celebratory occasions like birthdays and tenant occupancy anniversaries.

Successful Movement Through System
Like case management, informants noted that some residents come in and out of the system and may not connect with the proper supports to maintain housing and improve wellbeing. Can we find a cost effective way to facilitate how residents navigate the web of social and housing services to prevent them from dropping out and re-entering in a time of crisis? Several informants mentioned the availability of services, resident’s willingness for self-care, and meeting unique client needs as barriers. Some respondents also mentioned the need to maximize benefit eligibility and enrollment because of the larger return on investment.

Tenant Empowerment
Individuals noted that empowering residents to improve their living conditions, particularly through peer-to-peer approaches, could play a role in recovery and improve the quality of life for other residents. Some successes include tenant councils and allowing tenants to share their stories with policy makers and peer organizing models to outreach to families in SROs to make sure that they were receiving social and health supports. Some focused on the value of meaningful work and pointed to examples like Hayes Valley Bakeworks that provides work to people with disabilities that are homeless or at risk. Others mentioned using tenants as community guides or helpers, similar to the Central Market Community Benefit District. Opportunities for appropriate physical activity were also noted as important for self-efficacy and empowerment.

Negative Feedback Loop
Several informants called out that when some of the city’s most mentally and physically ill are housed in close proximity to each other, a culture of negative behaviors become normalized or difficult to resist. However, respondents noted that there are few options to de-concentrate persons with harmful behaviors. Some mentioned that making housing beautiful and comfortable resulted in far better health outcomes, even in hard parts of the city. Are there ways that a culture of self-care can prevail over a culture of drug-use and violence, and how can this be supported?
Housing Fit
The housing fit theme encompasses whether individuals are living in housing that meets their physical and mental needs and whether the City has a supply of housing to meet the needs within the population. The sub-themes below touch on conversations about persons living in poorly matched housing, issues with supply and sustainability of an appropriate housing stock, and means by which we can improve matching and sustainability.

Housing Matched to Ability
The theme housing match refers to an individual’s ability to live successfully within a residence based on their physical, mental, or behavioral abilities. The elevator problem is already noted in the building conditions section of this report; however, many respondents noted this problem in the context of declining health and the need to transition individuals to housing deemed a good fit based on their physical and mental capacities to date, not seven ago when they might’ve first moved in. Interviewees noted that isolation because of the mismatch between a person’s physical condition and their environment was leading to very problematic hygiene issues because residents were unable to leave their room to access bathrooms. We also heard that some severely mentally ill individuals struggle to live harmoniously in SROs, but that we don’t have sufficient supportive housing for them. Their behaviors can be disruptive and harmful to their fellow residents. Can we better ensure that people are in housing that matches their physical and mental abilities?

Housing for Each Step in Stabilization
Interviewees mentioned the need for a tiered housing system where we have short-term transitional housing and then appropriate housing for individuals based on the level of support they need to be successfully housed. Some interviewees described the difficulty of finding housing for homeless individuals being discharged from the hospital and then finding a more difficult permanent housing placement process – noting that sometimes people just fall back into homelessness. Others wondered if there was a way to get better referrals for promising individuals living in SROs so that they could further advance in an environment with more wraparound services. Is our current system sufficient and can we make sure that people are transitioned to best-fit housing?
Assessment of Housing Needs
Some interviewees mentioned that the way we are currently assessing people’s housing needs is not working. They mentioned that a better one page assessment could be done to continually evaluate whether a potential housing situation was optimal. Others mentioned that we need to be tracking what specific services and situations stabilize versus destabilize people to improve our placement and services. Can we more systematically evaluate and track clients so that they are receiving the housing and services that allow them to thrive most?

Family Housing
It was explained that in 2001 a report came out detailing the volume of families living in SROs. Changes were made to allow families in SROs to be classified as homeless so that they could continue to receive additional assistance. Family SRO buildings were also then inspected more regularly for health and safety hazards. Respondents mentioned that there has been some success in getting families into “family only” SROs, but there are still many families that are living in facilities with other tenants that have hazardous behaviors. Other issues mentioned were the lack of facilities to allow children to develop properly when there is not sufficient safe space to move. One respondent mentioned that a mother was worried that lack of space was impairing her child’s motor skills development. Given the lifelong implications of growing up in an unsafe and overcrowded environment, what can we do to make sure that this issue continues to be addressed?

Housing as Healthcare
One interviewee mentioned that we currently have a “wrong pockets” situation because Medicare/Medical is reaping the financial benefits of their recipients being housed, but housing is not paid for as a healthcare intervention. This respondent noted that there are a few “right pockets” experiments in Illinois, where Medicaid reform will include permanent supportive housing. Can we have housing recognized as a healthcare intervention so that funding can be more sustainable?

Real Estate Pressures
Everyone is aware that the cost of renting residential or commercial space in San Francisco is rising at a rapid pace. Beyond just the challenge of affordability, interviewees touched on other issues related to real estate pressures from San Francisco’s insufficient and aging housing stock. Stakeholders mentioned that residents who must live in SROs are subject to a number of abuses due to landlords wanting to prevent residency as well as difficulties upgrading buildings due to inability to take units offline or regulations that disincentivize rebuilding.

Tenant Protections
Many respondents mentioned that in some hotels residents are prevented from gaining residency through “musical rooms,” where tenants are moved from one room to another to prevent them from gaining
resident rights after 30 days in a single room. Other issues mentioned were failure to give tenants adequate notice before a maintenance fix, lack of mailboxes and disruptive renovations that force tenants to move out so that hotels can attract more favorable tourist clientele. It was voiced that we need to do a better job of enforcing construction regulations to protect existing tenants. If SROs are the last, most affordable housing option, what can we do to address barriers to stability and tenant protection in some private hotels?

Unaffordable Rent
San Francisco’s rents are skyrocketing and this was echoed as a major concern in many interviews. According to one interviewee, persons attempting to get housing in private hotels using SSI/SSDI are finding that that rent would cost up to 90% of their income, but have no other option because there is a long wait list for subsidized housing. Even some affordable housing like Mercy is unaffordable on the fixed income that some residents receive. One respondent recommended that the magnitude of the rising costs of SRO housing be studied further. In Chinatown some residents can get subsidies to move out of SROs, however, the cost of larger sized housing makes this prohibitive. In Chinatown in particular we heard that overcrowding is an issue, but that this is not the case in master leased units. Respondents also noted that rising commercial rents for non-profits and affordable businesses separates these services from the people who use them.

Supportive Housing Growth
We heard that while there has been some amazing new supportive housing built recently, we are currently in a steady state, even though need and value are ever present. It was mentioned that the dissolution of the Redevelopment Agency and lack of access to the Housing Trust Fund will make it difficult to grow more permanent supportive housing. One respondent mentioned that they didn't feel like growing PSH was considered as an important component in SF’s ACA planning, even though it could be an important healthcare intervention.

Incentive to Improve Buildings
People mentioned that it is difficult to improve affordable SRO units/buildings for a number of reasons, including: difficulty taking units off line permanently or temporarily because of the housing shortage, the lack of monetary financing incentives because of loss of Redevelopment, and lack of protections for existing tenants to move back in if the whole building was gutted or rebuilt (similar to HOPE SF).

Residential Hotel Conversion Ordinance
It was mentioned that there is a need to update Chapter 41 of the Residential Hotel Conversion Ordinance to incentivize improvements. Some SRO buildings have reached the point where no amount of surface
repairs will make them a good place to live, but Chapter 41 makes it difficult to rebuild buildings in ways that increase their value and ultimately could improve livability for tenants. Can we incentivize owners to rebuild and retain SRO units while also adding additional valuable uses?

**Healthy Eating**

A number of interviewees mentioned that access to fresh food and food storage and preparation equipment were important issues for residents living in SROs. The sub-themes below detail their comments on needs and solutions to food access issues and how food can also be a powerful tool to build a sense of community and wellness.

**Cooking Facilities**

Among the people we spoke with many respondents felt that open community kitchens often problematic, unless there were structures to manage cleanliness and safety; however, most agreed that residents should have access to personal refrigerators and microwaves unless otherwise indicated. However, some mentioned that the physical infrastructure was not there to power these devices. What can we do to ensure that all residents have food storage and preparation facilities?

**Nutrition and Cooking Education**

People mentioned that there were a number of good efforts going on to teach residents to cook without a stove, using microwaves, rice cookers, or electric woks. It was noted community organizations are working on cookbooks for SRO residents to teach them how to prepare affordable food in SRO rooms. People also mentioned the importance of teaching residents about healthy food in the process of teaching them how to cook.

**Food Resources & Access**

Food resources refers to the ability to secure sufficient financial resources to purchase enough nutritious food to support a healthy diet on a consistent basis while food access is the ability to obtain affordable, nutritious, and culturally appropriate foods safely and conveniently. Both were mentioned as important concerns. Some ideas were to bring food pantries into the lobbies of SROs, to get a full service grocery store in the Tenderloin, and to retain and attract restaurants that sell nourishing food for a low price.

**Building Community with Food**

Food was also mentioned as a way to build community and positive emotions. Holiday and communal meals were recommended, noting that the smells of good food can be healing and promote self-care.
Appendix 1:

**Improving the Health of SRO Hotel Residents – 1st Rd. Interview Guide (~60 mins.)**
Thank you for taking the time to meet with us. We’re completing informational interviews with experts to better understand healthy SRO living. Using health impact assessment as our tool, we will work with stakeholders to collectively identify and analyze policies which can contribute to improved health for SRO residents. Part of this project is funded through a healthy community design grant from the Centers for Disease Control.

**Guiding Questions:**
What we want to know...
1. *What are the key health issues of SRO residents?*
2. *What are the optimal living conditions to ensure SRO residents are healthy?*
   How can we improve the health of SRO residents?

**Specific questions:**
1. Define the community you serve? Please describe.
2. What are the health and well-being results you want for the SRO community?
3. Generally, how would you assess the progress towards the health results you described (see #2)?
   a. Trends over the **past 10 years** (or more)
   b. Tell us about progress **today**
   c. **5 years from now?**
4. What is your organization doing (objectives and activities) related to SROs?
   a. What success has your organization had in improving the health of SRO residents?
5. What elements/projects/programs/policies in the SRO environment (defined as “inside the building”) support the health of SRO residents? What does NOT support?

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6. Who are your partners?
   a. City agencies / Non-profit / Private / Others
7. What framing advice do you have for reaching out to non-health agencies?
8. **Wish list.** Provide 3 wishes to advance health and well-being in SROs (e.g., people/orgs you want to work with, “wild ideas”, etc.).
9. Any questions for us?