

# HOUSING IN SF: Barriers and Solutions



SAN FRANCISCO AIDS FOUNDATION



REPORT COMPILED BY FACENTE CONSULTING

## Table of Contents

Table of Contents .....	1
Introduction and Background .....	2
Background.....	2
Our Vision .....	2
A Call to Action .....	3
Problem 1: Limited access to permanent housing stock.....	4
Background on the Problem:.....	4
Potential Solutions: .....	5
1A. More housing subsidies.....	5
1B. Expand availability of affordable, well-maintained housing options.....	6
1C. Incentivize property owners to use long-term leases .....	6
Problem #2: Non-transparent, inefficient, and inequitable housing systems .....	7
Background on the Problem:.....	7
Potential Solutions: .....	8
2A. Collaboration between City agencies working on housing and health.....	8
2B. New technologies to equitably prioritize unhoused people and maximize the use of existing housing options.....	9
Problem #3: Insufficient supportive housing and other supportive services.....	9
Background on the Problem:.....	9
Potential Solutions: .....	10
3A. Bolster availability of on-site and roving supportive services.....	10
3B. Guarantee housing for people completing residential mental health or substance use treatment .....	11
3C. Ensure that social service workers earn a living wage .....	12
Problem #4: Lack of clear accountability for improving the current housing crisis .....	12
Background on the Problem:.....	12
Potential Solutions: .....	12
4A. Create a mechanism for coordination and collaboration among City agencies .....	12
4B. Designate housing “problem solvers” in each District Supervisor’s office .....	13
4C. Collect and share data to drive continuous quality improvement.....	13
References .....	14

## Introduction and Background

### Background

For the last 10 years, significant improvements in HIV care and prevention have been implemented worldwide, resulting in significant reductions in HIV incidence, morbidity, and mortality among people living with HIV (PLWH). Nevertheless, during the same time period income disparities and homelessness have increased worldwide, a phenomenon that has been especially evident in San Francisco and has contributed to the ongoing local HIV epidemic. In San Francisco in 2019, 1 in 5 people diagnosed with HIV were unhoused at the time of diagnosis.<sup>1</sup> This has direct effect on their health outcomes: 83% of people who were housed when they learned they had HIV in 2017 achieved viral suppression within 12 months of diagnosis, compared with only 53% of those who were unhoused.<sup>1</sup> A 2019 study found that people in San Francisco who were homeless at the time of HIV diagnosis had 27-fold higher odds of death compared with those who were housed.<sup>2</sup> As a result of the housing crisis, unhoused or unstably housed people who living with or at risk for acquiring HIV are being left behind. As a result, in 2018 the San Francisco Getting to Zero (GTZ) consortium recognized that their goals of zero new HIV infections and zero HIV-related deaths could not be met without addressing the housing crisis in San Francisco.

San Franciscans unhoused at the  
time of HIV diagnosis have

**27X**

higher odds of death compared  
to those housed at diagnosis.

San Francisco's elected officials and City Departments are keenly aware of the factors that have led us here and the barriers and challenges we face as a City related to housing and homelessness. The San Francisco Department of Homelessness and Supportive Housing (DHS) Strategic Framework for 2018-2022 identified three primary causes of the increase in homelessness in San Francisco: 1) federal housing policies and funding cuts, 2) state housing policies and limited funding for homelessness, and 3) inequity in the US economy and public health system.<sup>3</sup> The Mayor's Office for Housing and Community Development's 2014 City of San Francisco HIV/AIDS Housing Five-Year Plan identified several trends that make addressing the housing needs of people living with HIV (PLWH) imperative.<sup>4</sup> These included: 1) housing in San Francisco has become increasingly expensive, exceeding the values established by HUD's Fair Market Rents, making it more difficult for subsidy programs to be implemented effectively, 2) the population of PLWH is aging, 3) many people newly diagnosed with HIV are unhoused, and 4) PLWH are living longer with more stable health status due to antiretroviral therapy.

We applaud the many efforts underway in the public and private sector to tackle this difficult problem. Nevertheless, anyone walking the streets of San Francisco can clearly see that more is needed and needed now.

### Our Vision

San Francisco's HIV community envisions a San Francisco where everyone has a home, where housing is seen as a human right and an integral component to addressing health needs, where housing options exist to address each person's unique circumstances, and where people who are unhoused are not stigmatized. We place a high value on equity, and we believe that all populations disproportionately affected by homelessness, and for whom being unhoused can have the most severe consequences, deserve housing — including but not limited to people living with HIV.

## A Call to Action

This report summarizes key findings from a several-month assessment and stakeholder engagement process. Initially, the goal was to identify and promote housing solutions for people living with HIV (PLWH). However, the initial assessment and stakeholder meetings pointed to the need for a different approach. It became clear early on that solving the housing crisis for PLWH could not be done without addressing the underlying root causes of the housing crisis, and that by the HIV community taking a stand in favor of reforms to our current homelessness and housing-related systems and practices, San Francisco has a better chance of developing sustainable solutions to what have largely been intractable problems.

Given this shift in focus, the HIV community developed and endorsed a “Call to Action,” which can be found at [\[url\]](#). This report summarizes the underlying findings of the assessment and stakeholder engagement process that led to the recommendations in the Call to Action. The assessment included a review of the academic literature, the development of estimates of the number of PLWH experiencing homelessness and what types of housing are needed, and key informant interviews with more than a dozen experts in HIV and housing. The stakeholder engagement process included two small group discussion meetings with the key informants and representatives of agencies serving unhoused PLWH, three meetings with the GTZ Steering Committee, three meetings with members of the HIV Community Planning Council, two meetings with the HIV/AIDS Providers Network, and one meeting with San Francisco AIDS Foundation staff who provide direct services to unhoused people. Figure 2 lists the key problems and solutions highlighted in the Call to Action.

**Figure 1. Methods informing the findings in this report**



**Figure 2. Overview of key housing-related problems and solutions from this report**

Problem	Potential Solution
1. Limited access to permanent housing stock	1A. More housing subsidies 1B. Expand availability of affordable, well-maintained housing options 1C. Incentivize property owners to use long-term leases
2. Non-transparent, inefficient, and inequitable housing systems	2A. Collaborations between City agencies working on housing and health 2B. New technologies to equitably prioritize unhoused people and maximize the use of existing housing options
3. Insufficient supportive housing and other supportive services	3A. Bolster availability of on-site and roving supportive services 3B. Guarantee housing for people completing residential mental health or substance use treatment 3C. Ensure that social service workers earn a living wage
4. Lack of clear accountability for improving the current housing crisis	4A. Create a mechanism for coordination and collaboration among City agencies 4B. Designate housing “problem solvers” in each District Supervisor’s office 4C. Collect and share data to drive continuous quality improvement

## Problem 1: Limited access to permanent housing stock

### Background on the Problem:

The city of San Francisco has some existing, available permanent housing stock; however, it currently lacks effective systems for moving people into housing units and keeping them there. The first and most obvious barrier to housing all San Franciscans is lack of affordability. As of

January 2020, the median list price of houses on the San Francisco market was \$1.3 million, averaging \$1,108 per square foot—a cost that has approximately doubled over the past decade.<sup>5</sup> The median rental price in San Francisco is around \$4,500—a cost approximately one third-higher than the San Francisco-Oakland-Hayward Metro average.<sup>5</sup> Such high prices, embedded in a competitive housing market, make purchasing a home impossible for most locals, push renters out of existing homes, and ultimately make it difficult for anyone—and especially people from vulnerable population subgroups—to find suitable, sustainable housing options.



#### In San Francisco (2019):

\$1.3 million median house price

\$4500/month median rent

A second major barrier to housing is the financial incentives that encourage property owners to engage in alternatives to offering affordable housing. One such incentive is investment in the housing market, in which wealthy foreign and local investors buy units (often with all-cash payments).<sup>6</sup> These units often do not become primary residences but are instead left vacant or are “flipped” into non-affordable housing.<sup>7</sup> Although San Francisco requires owners of vacant properties to self-report and register with the City at a fee of \$711/year, this system lacks accountability, with only 38 residential properties on this registry in May 2017.<sup>8</sup> In comparison, in 2019 there were an estimated 11,760 vacant homes in San Francisco<sup>9</sup> (defined as livable residential housing units (a) having no one living in it at the time of interview or (b) as a residence where occupants have usual residence elsewhere),<sup>10</sup> a number 47% higher than the estimated population of people who were unhoused (a conservative estimate of 8,011 in 2019<sup>11</sup>). Another contributor to vacant housing is the Airbnb industry. As of 2020, Airbnb reported more than 7,000 listings in San Francisco. Of these, 62% were entire homes or apartments, and 58% had “high availability” (available for more than 90 days per year), suggesting they were relatively unlikely to be used as full-time residences.<sup>12</sup>

#### In San Francisco in 2019:

 **11,760** vacant homes

 **8,011** people unhoused

A third barrier relates to limited subsidies and other incentives to boost affordable housing. Existing financial incentives—such as tenant subsidies that make housing more affordable—frequently carry burdensome restrictions or are in danger of being discontinued. Our qualitative findings suggest that tenants are not the only ones affected by such discontinuations; community-based organizations that support clients in accessing subsidies are discouraged and frustrated when they have to tell clients that a subsidy is no longer available. Other existing incentives target developers. For example, the City’s Affordable Housing Bonus Program’s rewards developers with increased density and height relative to existing zoning regulations,<sup>13</sup> which provides incentives beyond the federal low-income housing tax credit.<sup>14</sup> However, our qualitative findings suggest that this process is slow, complex, and therefore often dissuades developers from actually following through with affordable housing projects. Despite the fact that developers are interested in building affordable housing, they are often dissuaded by the slow engagement of the City in potential partnerships.

Our qualitative findings also suggest that the City’s continuing focus on expanding temporary shelter options such as navigation centers—while critically needed given the crisis situation—has

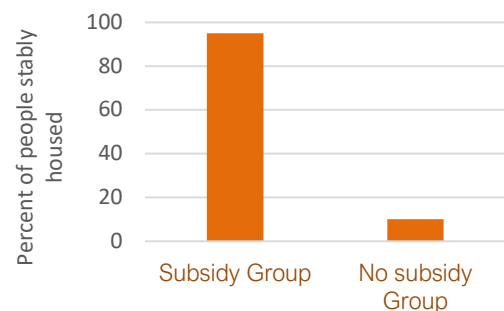
overshadowed the commitment to permanent, sustainable housing. There has, however, been some strong local community and government motivation around housing regulation. In July 2019, a coalition of approximately 50 San Francisco organizations, ranging from community-based organizations, to tech companies, to the San Francisco Giants, announced their intention to secure 1,100 currently vacant housing units in all 11 City districts for people who are unhoused to live in.<sup>15</sup> In 2017, a new short term rental law went into effect in San Francisco, placing increased regulation on Airbnb by requiring all short-term rental properties be formally registered with the City to ensure that listings comply with short-term rental law;<sup>16</sup> the City has even prosecuted Airbnb landlords who violate the short-term rental laws.<sup>17</sup>

## Potential Solutions:

### 1A. More housing subsidies

City government subsidies in various forms could increase accessibility to existing permanent housing stock in San Francisco. Household subsidies, such as “deep” subsidies (where households pay no more than 30% of their monthly income) would make housing more affordable and would allow subsidies to parallel potentially fluctuating household income.<sup>18</sup> The Family Options Study, a multi-site random assignment experiment for homeless families, found that families offered a permanent housing subsidy voucher experienced less than half as many episodes of homelessness and improved in a number of measures related to housing stability, compared to other housing intervention and usual care groups. In addition, the subsidies produced some positive interim impacts on psychological distress and intimate partner violence, and some long-term impacts on food security and economic stress.<sup>19</sup> Smaller, “shallow” subsidies could also offer financial support. For example, studies on the provision of shallow rent subsidies to people living with HIV or AIDS have demonstrated improved housing outcomes. One such study showed that persons given monthly shallow subsidies scaled to the household size, rent, and income were more likely to stay in their rental housing, with 99% stably housed one year into the program and 96% stably housed after two years in the program. In comparison, 32% and 10% of comparison group participants (who did not receive shallow subsidies) were stably housed one and two years into the program, respectively (Figure 3).<sup>20</sup>

Figure 3. Percent of people living with HIV who were stably housed two years into shallow subsidy program



In San Francisco, an increased number of deep and shallow subsidies could be made part of the permanent City budget, increasing subsidy dollar amounts and lowering the threshold for “below market rate” housing to make it truly affordable to more people. Subsidies could be provided both to people looking for housing as well as to those at risk of eviction, to ensure that no one is ever evicted for purely financial reasons. Subsidies would also need to be flexible, allowing residents to vacate their units for medical, substance use, and mental health treatment and be guaranteed return at completion of treatment. Subsidies should also not “time out,” especially for vulnerable populations who are usually unable to rapidly find suitable housing, and there should be a clear expectation of how long the subsidy will last to ensure that service providers do not breach trust with their clients. As part of the subsidy expansion plan, the City could expand master leasing—in which the city leases an entire building for affordable/subsidized housing via agreement with the property owner—to increase the number of units offered at a subsidized rate. Allocating an additional \$3 million per year for the next 5

years in General Fund dollars and other City resources to subsidies could support housing of an additional 300 people with HIV per year (at a cost of \$10,000), for a total of 1,500 people over 5 years.<sup>21</sup>

### ***1B. Expand availability of affordable, well-maintained housing options***

While San Francisco has existing permanent housing stock, it would benefit from expansion of affordable, well-maintained housing options. To do this, the City could enter into new agreements with developers who are currently building housing, to increase stock more rapidly. This would require legislation reducing the length and complexity of the permitting process to prioritize development of affordable housing units. The process should go beyond or at least meet the requirements of state legislation AB 1485<sup>22</sup> (adopted 2020) and SB 25 (adopted 2017)<sup>23</sup>, two bills that streamline the housing development project approval process and enable projects to proceed in a shorter time period. The City could also set regulations that all new construction must include affordable units starting immediately—either via a master lease to the City, requiring a certain percentage of units to be offered below market rate, or some other mechanism. As already noted, the City’s Affordable Housing Bonus Program has already implemented some useful incentives for developers, including increased density and height relative to existing zoning regulations,<sup>13</sup> but the City could take this a step further by mandating the inclusion of affordable units in every development. Lastly, the City could leverage the Housing and Urban Development Rental Assistance Demonstration (RAD) program—an initiative that rehabilitates public housing—to ensure that affordable housing that is available is safe, healthy, and well-maintained.<sup>24</sup>

### ***1C. Incentivize property owners to use long-term leases***

Incentives that encourage property owners to lease to low-income people (rather than leave units vacant or use them for short-term rentals) could result in more affordable housing options. As already noted, the City’s Affordable Housing Bonus Program has already implemented some useful incentives for developers, including increased density and height relative to existing zoning regulations.<sup>13</sup> Similar incentives could be considered for existing landlords or property owners who currently would not experience economic benefit from offering affordable housing. This might include exemptions to certain zoning rules and permitting fees, or offering property tax credits for individual landlords who lease long-term, affordable rentals.

Property owners could also be disincentivized against leaving properties vacant. A hefty vacancy tax, with greater accountability for determining which properties are vacant for a certain proportion of the year, would likely be sufficient to encourage the renting of units. The City is the process of examining a vacancy tax for homes and small businesses, with a measure to be posted to voters on the March 2020 ballot.<sup>25</sup> Other U.S. jurisdictions offer models of policies that could disincentivize housing vacancies in San Francisco. In Washington, D.C., the government levies higher taxes on vacant properties (5% of the assessed value) and blighted properties (10% of the assessed value), compared to 0.85%-1.85% for occupied properties.<sup>26</sup> In Oakland, an annual tax ranging from \$3,000 to \$6,000 per parcel is levied on any vacant properties (defined as in use less than 50 days in a calendar year) for up to 20 years; funds are used to support homelessness programs and services, affordable housing, code enforcement, and clean-up of blighted properties and illegal dumping.<sup>27</sup> At the State level, California State Senator Skinner has introduced a bill that fines corporations that own multiple single-family homes for keeping housing vacant for more than 90 days.<sup>28</sup> Jurisdictions in other countries have also implemented policies that may be of use to San Francisco. For example, consider Vancouver, Canada—a city where housing costs have similarly been driven up by vacancy, non-primary residences, and foreign investment in the real estate market.<sup>29</sup> In 2016, the provincial government implemented a 15% increase in land transfer taxes for



foreign buyers in the real estate market in the Vancouver Metro area; this tax was raised to 20% in 2018, reducing foreign investment since that time. Vancouver also has implemented an "Empty Homes" vacancy tax, which adds a 1% tax (based on the property value) on property owners who cannot prove that their property is either the owner's primary residence or leased for half the year. As a result of the tax, the vacancy rate was reported to have slightly improved.

Lastly, the establishment of a first-right-of-refusal program could incentivize private developers or individual property owners to sell properties first to the City or community groups, who can then use the stock for affordable, long-term leases. Some U.S. cities have first-right-of-refusal housing laws that could be adapted for San Francisco's circumstances. For example, in Portland, Oregon, a first-right-of-refusal program requires that any property owners who plan to opt out of federal project-based rent assistance contracts must give the City 210 days' notice, a time period that allows the City to inspect the property and potentially negotiate for purchase of the property.<sup>30</sup> In Washington, D.C., tenants are given first right of refusal if the owner decides to sell the property they are renting.<sup>30</sup> Oakland is currently considering a similar policy to give tenants first-right-of-refusal to purchase a property if the owner decides to sell,<sup>31</sup> and California State Senator Skinner has introduced a bill that gives tenants the first right of refusal to buy foreclosed properties and local governments first rights on vacant properties to use them for affordable housing.<sup>28</sup>

## **Problem #2: Non-transparent, inefficient, and inequitable housing systems**

### **Background on the Problem:**

Our qualitative findings suggest that the current City systems for matching people who are unsheltered with appropriate housing – including emergency housing for people in acute crisis – are opaque, complicated, and inadequate. They are particularly damaging for people with mental health or substance use disorders, or other chronic illnesses or disabilities. First, the Coordinated Entry system, the DSHS portal to housing for people who are experiencing homelessness, is difficult to navigate and understand, even for professionals charged with finding housing for patients and clients. It does not track outcomes for all persons who request housing and does not clearly articulate the criteria for prioritization, making the outcomes of who gets prioritized difficult to interpret. Today, prioritization is not need-based but instead is based largely upon matching people in need to available stock; most people for whom suitable housing is not available are told to return for re-evaluation in 6 months—a point at which they must start the murky Coordinated Entry process anew, to potentially be denied housing again. There is no ongoing waitlist that helps those who have been repeatedly denied housing through Coordinated Entry stay connected to this system; this leads to repeated applications, inefficiency, and a burden of time investment by clients and social service providers.

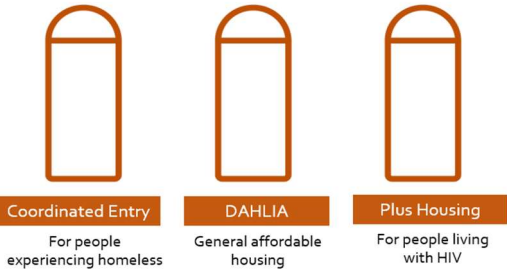
Second, the Coordinated Entry system does not use a true equity approach to prioritization. People living with HIV, people with mental health and substance use disorders, people with disabling conditions, youth, trans women, LGBTQ people, Blacks/African Americans, and other vulnerable populations disproportionately represented among the unhoused<sup>11</sup> need to be at the front of the line for housing to achieve equity. However, our qualitative findings suggest that in reality, people with a history of incarceration or low credit rating are excluded from some rental units, exacerbating racial disparities resulting from a long history of systemic racism. People with substance use disorders are often unnecessarily evicted from housing, going against San Francisco's commitment to harm reduction and



improving the health of people who use drugs. And without a clear prioritization method, it is ultimately difficult to measure equity and the extent to which these vulnerable populations are being prioritized.

Third, despite being known as one of the world’s greatest technology hubs, San Francisco currently has no unified digital platform to match people with housing. The Coordinated Entry "One System"<sup>32</sup> has been praised for its potential to track people who are unhoused and their outcomes.<sup>33</sup> However, it only applies to some people (those who are already unhoused) and addresses only some housing stock, such as master lease buildings, shelters, and navigation centers. Moreover, Coordinated Entry is not integrated with other City housing programs, such the DAHLIA San Francisco Housing portal (for broader affordable, subsidized housing options), and Plus Housing (for low-income people living with HIV). The siloed structures of Coordinated Entry, DAHLIA,<sup>34</sup> and Plus Housing<sup>35</sup> (Figure 4), among other housing systems not detailed here, gives no single system the critical capacity to match all types of people in need of housing with all possible housing opportunities. There is an urgent need for a centralized, digital platform that serves all San Franciscans in need of affordable housing.

**Figure 4. Siloed structure of the Coordinated Entry, DAHLIA, and Plus Housing systems in San Francisco**



**Potential Solutions:**

**2A. Collaboration between City agencies working on housing and health**

To ensure that all San Franciscans in need of affordable housing can find housing in a uniform, streamlined way, a Housing Crisis Task Force (Figure 5) could be formed to DSHS, the Department of Public Health (DPH), and the Mayor’s Office on Housing and Community Development (MOHCD). This Task Force would be charged with developing a coordinated, equitable, transparent housing system that works for all San Franciscans and especially for those with complex health needs, including those living with HIV. First, the system would need to include a range of options depending on the need and life circumstances of the person seeking housing. For example, a person who has been unhoused and living on the streets for several months due to a mental health disorder may require a different type of housing than an elderly person living with HIV. Second, the system would also need a continuum of options to support the evolution of a person’s life circumstances. For instance, a given person might be in residential treatment for mental health or substance use for some time, and then would need to graduate to housing with supportive services, and then someday might be able to graduate to more generic affordable housing; this issue is described more in Section 3. Third, the system also must allow for people to be waitlisted and continuously reprioritized until housing is located that meets their needs. Finally, the system should prioritize all people living with HIV for housing, as viral suppression rates are closely linked to housing status,<sup>36,37</sup> and both individual health and risk of transmission to others is dependent upon a person’s viral load.<sup>38,39</sup>

**Figure 5. A Housing Crisis Task Force that would allow collaboration between relevant City agencies**

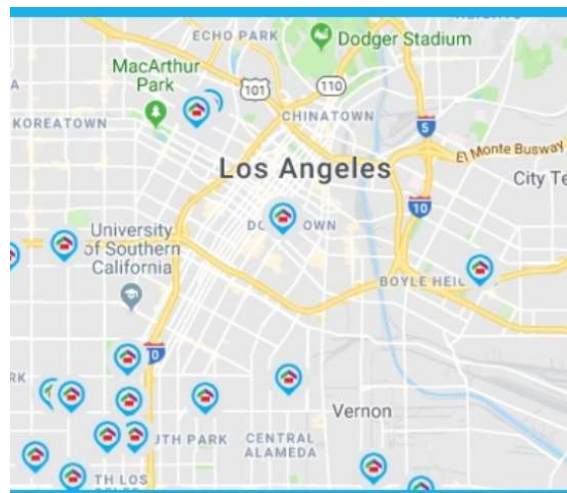


## **2B. New technologies to equitably prioritize unhoused people and maximize the use of existing housing options**

A technological solution for housing placement could centralize the existing Coordinated Entry, DAHLIA, and Plus Housing systems into a streamlined portal usable by landlords, case workers, and City agencies. The system would: a) maintain a list of all people requesting housing, prioritized by clinical circumstances, along with the type of housing needed to meet their needs, b) maintain a real-time inventory of all available units and beds across the full spectrum of housing options, c) automatically match people to appropriate options (both emergency/temporary and longer-term/permanent) and, (d) reprioritize/rematch as new individuals are added to the system or placed in housing – similar to an organ transplant list. The system would also help housed people step up or step down into other types of housing as their support needs change. Importantly, the system could centralize key housing-related data that could be monitored over time to support improvement of the system and broader housing efforts citywide (described in more detail in Section 4C).

Innovative technological solutions are already being piloted in other California counties. For example, LeaseUp—a non-profit developed, user-friendly website and app funded by an LA County sales increase tax in 2016—makes it easier for Los Angeles County landlords to list affordable housing units and for non-profits to find homes that meet the specific needs of their clients (Figure 6).<sup>40</sup> By streamlining the process of listing or finding homes, updating information in real-time, and offering customer service support, LeaseUp substantially reduces the burden on landlords and caseworkers that is typically associated with affordable housing. LeaseUp launched in 2018, and as of February 2019, LeaseUp had 600 landlords using the platform, with a goal to add 2000 by the end of the year. Although the website and app are still relatively new, with more concrete outcomes yet to be published, the organization behind LeaseUp (People Assisting the Homeless) has reported that people were getting into homes faster, improving well-being of those housed while reducing the societal costs of homelessness.<sup>41</sup>

**Figure 6. Screenshot of LeaseUp website. Icons represent available local housing.**



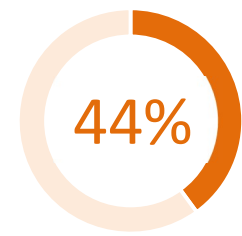
## **Problem #3: Insufficient supportive housing and other supportive services**

### **Background on the Problem:**

There will always be a need for various supportive services to help some people find and maintain their housing. Although San Francisco has been applauded for its relatively high per capita number of permanent supportive housing units (971 per 100,000 in 2017), there is still insufficient transitional and permanent supportive housing to meet the needs of all people with serious disabilities, as well as those with mental illness and substance use disorders.

For example, 44% of people completing residential treatment in San Francisco are discharged to shelters or the streets.<sup>42</sup> This is problematic from a humanitarian and public health perspective—as housing is a critical component of maintaining progress gained during residential treatment. Indeed,

qualitative research on relapse has shown that stable housing can be a major facilitator or barrier to transition out of residential treatment and back into the community. For example, a 2017 study showed that 94% (n=30/32) of participants in a residential substance use treatment program cited housing stability as a facilitator of transition.<sup>43</sup> The failure to successfully house people graduating from residential treatment programs also represents an enormous inefficiency in the current system; investing resources into residential treatment without ensuring that people who complete treatment have a safe, stable place to live severely hinders the overall effectiveness of residential treatment programs. Mirroring those who complete residential treatment, people with substance use and mental health disorders released from incarceration typically experience limited pre-release planning and coordination. For instance, our qualitative findings suggest that those incarcerated are often released at a time of night when no shelter is available and no supportive staff are able to meet them to help with immediate needs.



of people completing residential treatment in SF are discharged to shelters or the streets.

According to our qualitative findings, evictions are a major barrier to stable housing among San Franciscans. Current federal vacancy regulations, in which units not occupied for 90 days must be opened for another person, mean that emergency, low-income, and subsidized housing can be lost when individuals enter inpatient treatment facilities, forcing an impossible choice between substance use or mental health treatment and having a place to live. In addition, people with substance use disorders are often unnecessarily evicted from housing, going against San Francisco's commitment to harm reduction and improving the health of people who use drugs. Housing-affiliated support services would help them maintain housing, but are typically unavailable or difficult to access. For the limited supportive housing options that do exist, there is gridlock on the housing continuum, as people are often kept in supportive housing situations they no longer need, while others who do need it are still waiting. This stems from the lack of a clear system to identify and support graduation, such that tenants can be transferred to less (or more) supportive housing as their needs and life circumstances evolve over time.

Lastly, ensuring sufficient supportive services requires a highly trained direct service workforce – a workforce that is being decimated by San Francisco's economic inequality trend. The Massachusetts Institute of Technology Living Wage calculator estimates that a minimum living wage of \$20.82/hour is needed for a full-time worker in San Francisco to support themselves.<sup>44</sup> A full-time worker with a domestic partner/spouse who does not work and 0, 1, 2, or 3 children would require a living wage of \$31, \$38.44, \$41.19, and \$49.63, respectively. While wages of case managers and other direct service workers who work with unhoused populations vary widely, our qualitative findings suggest they are difficult to recruit, hire, and retain because of salaries that are inadequate for living in, or even near, San Francisco. As these staff are the backbone of services for unhoused people, including unhoused PLWH, insufficient compensation will continue to stand as a barrier to housing, health, and equity among San Franciscans.



One full-time worker with two children requires a living wage of \$41.19/hour in San Francisco.

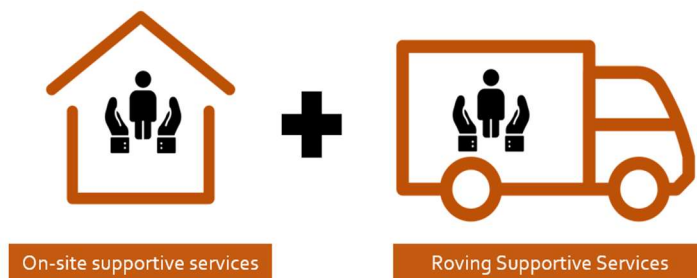
## Potential Solutions:

### 3A. Bolster availability of on-site and roving supportive services

San Francisco could increase the quantity and variety of both stationary services (e.g., permanent supportive housing facilities) and roving services (e.g. case managers providing support services to

persons with more complex needs who are in standard housing; Figure 7), funded and overseen by DPH, DSHS, or the Task Force described in 2A. The City has precedents for both stationary and roving services. The various existing supportive housing programs with on-site social services, as well as those in the works from MOHCD,<sup>45</sup> lay the groundwork for an even wider expansion of permanent supportive housing units. Similarly, the UCSF Citywide Roving Team has already set a precedent for on-site and phone case management services at designated hotels and residences,<sup>46</sup> laying the foundation for an expanded roving team that could reach a larger number of tenants.

**Figure 7. A combination of on-site supportive services at housing units and roving supportive services that come to housing units is needed**



More supportive housing options would also result in increased ability to support people in stepping down from high-threshold, expensive housing situations—including Residential Care Facilities for the Chronically Ill (RCFCIs), which house PLWH who need additional medical support—into more suitable alternatives. The City needs to preserve RCFCIs for people who need them, but must also continue to assess the need for RCFCI-level care and implement and sustain changes based on assessment findings. This will ensure that as many people as possible have access to an appropriate level of housing-affiliated support services.

Lastly, to support people who are unhoused who may need supportive services, safe-hold lockers and medication storage facilities should be expanded in select locations throughout the city. This expansion would allow people who are unhoused to store, access, and retrieve vital medications (such as HIV medication) without risk of loss or having them removed from their control by police, the Department of Public Works (DPW), or shelter staff. In addition to pilot programs at the San Francisco AIDS Foundation and other community sites, models can be drawn from other U.S. jurisdictions that have already implemented such a program, such as the University of Miami Health system’s “IDEA Exchange”, which offers medication lockers at secure converted shipping container offices, and also allows social workers to deliver medicine to populations that are unhoused.<sup>47</sup>

### **3B. Guarantee housing for people completing residential mental health or substance use treatment**

Guaranteed safe, stable housing for all people completing residential mental health and substance use treatment, immediately upon discharge, is critical to ensuring their continued wellness and to the efficiency and cost-effectiveness of residential treatment programs. Required coordination and planning between residential treatment programs and City agencies (such as DSHS, DPH, or the Task Force described in 2A) is needed to achieve such an outcome. Improved coordination and planning by Jail Health Services could also help ensure that people with mental health or substance use disorders are released from jail at a time of day when social service staff are available to assist the person with any needs or navigation. The approval of comprehensive *Mental Health SF* legislation in late 2019—which calls for an Office of Coordinating Care to better support those in need of treatment and case managers, including those leaving emergency psychiatric services and jail, among a wide range of other suggested mental health services such as a drug sobering center and a 24/7 crisis response team<sup>48</sup>—provides the backing for this needed policy.

### **3C. Ensure that social service workers earn a living wage**

The City could provide a cost-of-doing-business increase and a cost-of-living increase on all HIV prevention, care, and housing contracts (regardless of funding source) annually, with continuous City investment to ensure nonprofits can pay staff a livable wage as required by the Minimum Wage Ordinance.<sup>49</sup> The City could also to continue to make critical, expanded investments in the Nonprofit Sustainability Initiative<sup>50</sup> to help nonprofits achieve or maintain livable wages, rather than diverting limited financial resources to rent and other overhead. Such investments would help the City maintain a sustainable social service work force to support people in finding affordable, appropriate housing.

## **Problem #4: Lack of clear accountability for improving the current housing crisis**

### **Background on the Problem:**

In our qualitative interviews and focus groups, we heard numerous reports of tenants and service providers who struggled to find the person or office who could help them fix fairly simple housing unit-related issues. For instance, one person described a landlord refusing to address pest-infested units in which cockroaches were falling from the ceiling. Another described Housing Opportunities for Persons with AIDS (HOPWA) units for PLWH sitting vacant for 8 months while awaiting a simple, required 20-minute inspection preventing people from moving in. In both of these scenarios, people described frustration with the countless hours spent trying to solve the problem, to no avail. These stories exemplify how the current systems lack accountability, without a clear entity ensuring that unacceptable housing scenarios are solved in a timely fashion. On a micro-level, tenants, case managers, and social workers spend a substantial amount of their limited time trying to navigate issues like these, but often can't make progress. On a macro-level, when unhoused persons and those serving them have tried every solution they can find, there is no entity to hold City departments accountable for failure to act. The lack of City-level accountability relates to the fact that there is no single City department accountable for ensuring a seamless continuum of housing and housing services. DSH only addresses people already homeless, DPH provides health services for unhoused people but doesn't actually run housing programs, MOHCD offers housing for PLWH, and no one is responsible for homelessness prevention. Moreover, these agencies lack the coordination to address the housing issue collectively.

### **Potential Solutions:**

#### **4A. Create a mechanism for coordination and collaboration among City agencies**

The Housing Crisis Task Force already recommended in 2A could establish an ongoing mechanism for overall coordination and accountability of the various City departments charged with addressing housing, if all housing-related activities are not ultimately centralized in one department. The current siloed systems – particularly the separation of DSH and DPH – cannot be allowed to continue unchecked, at the expense of people who are unhoused. The Task Force could designate specific staff members responsible for solving different types of housing-related issues (such as the pest- and inspection-related issues described above), ensuring that tenants and service providers are not burdened unnecessarily for issues they are unable to easily resolve themselves.



#### **4B. Designate housing “problem solvers” in each District Supervisor’s office**

Until a more centralized accountable entity or accountability system is established, the City could station one or more housing ombudspersons in each Board of Supervisor’s office to resolve problems of people who are unable to find affordable housing or are living in unsafe or otherwise unsuitable housing situations, when routine options have been exhausted. Tenants and service providers would have a direct phone line to the ombudsperson to report their unresolvable issue. The ombudsperson could also be the point of contact for property owners with vacant units that can be used as options for unhoused people. Beyond providing an interim structure for accountability, this solution would also give elected officials direct and valuable insight into the breadth and depth of housing-related problems in their districts.

#### **4C. Collect and share data to drive continuous quality improvement**

The centralized technological solution in 2B could be used to accurately document each person who requests housing on an ongoing, real-time basis. This documentation would include a record of their specific housing needs and the outcome (housing placement, waitlisted, etc.), along with the dates of each of these steps, and the names of people who assisted them. These data are critical for evaluation and continuous quality improvement of our city’s systems for housing placement. The data must be publicly reported in aggregate on a regular basis, building trust in the system and a community-wide commitment to addressing the housing crisis by allowing for transparency and systems accountability with a set of clear, public-facing metrics.

**Figure 8. Overview of solutions 4A, 4B, and 4C for promoting macro-level accountability for unacceptable housing situations**

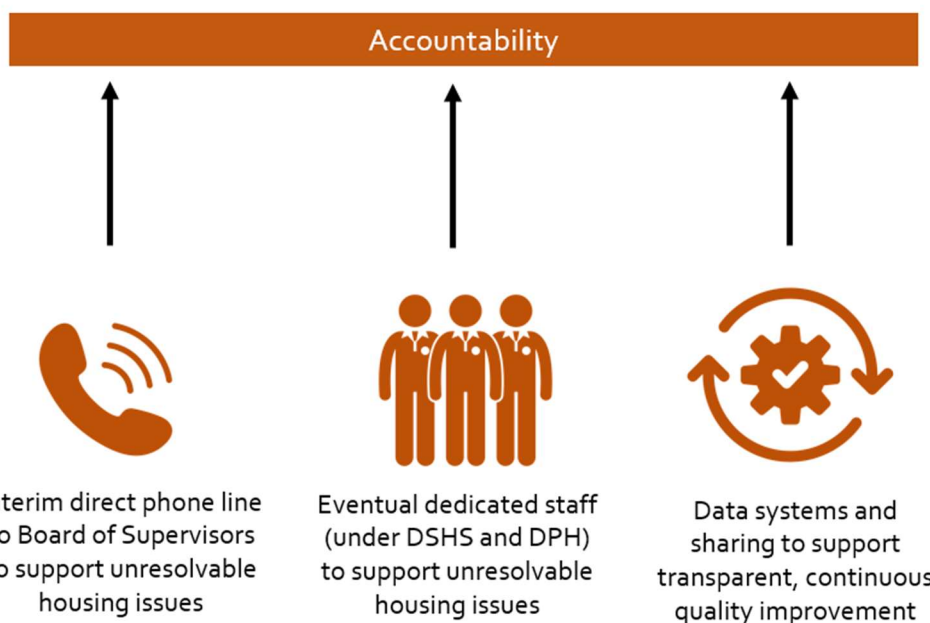


Figure 8. summarizes the accountability solutions proposed in 4A, 4B, and 4C.

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