

# Substandard Housing Conditions in San Francisco Chinatown: Health Impacts on Low-Income Immigrant Tenants

Chinese Progressive Association, August 2005

## INTRODUCTION

The wooden banisters in my apartment building are ripped up and give us painful splinters when we use the stairs. The bathroom floor is wet and slippery. It is very inconvenient for elderly people to bathe, and I have slipped and fallen myself. There is no kitchen and no laundry. We have a lot of blackouts, there are loud noises at night, and I'm worried someone will break through my window because there are no bars on it. I'm scared, have headaches, and often can't sleep. Our landlord does not react quickly when we report our problems.

– Tenant at 1351 Stockton Street<sup>1</sup>

Low-income renters in San Francisco often live in unhealthy and unsafe housing. Tenants trace the roots of these conditions to the lack of affordable housing, living wage jobs, and support in knowing their rights and health risks. In Chinatown, specifically, they also point to barriers of language and public transportation to explain why they put up with Chinatown's poor housing conditions. Given the extremely limited options for low-income immigrant tenants in San Francisco, it is particularly important for government agencies to ensure that housing, health, and fire codes are adequately enforced in these communities and the health and safety of vulnerable residents are protected.

## BACKGROUND

Since 1997, the Chinese Progressive Association (CPA) has educated and organized thousands of low-income immigrant tenants to improve housing conditions in Chinatown and advance social justice. In 1999, Chinatown tenants and CPA succeeded in pushing the City's Department of Building Inspection to improve enforcement of the Housing Code through conducting routine code enforcement inspections, hiring Chinese and Spanish speaking housing inspectors, and funding targeted outreach to Chinese speaking tenants. Over the past five years, CPA has also built citywide collaborations with other tenant rights groups to create systems of education and peer support for very low-income tenants living in single-room occupancy (SRO) residential hotels in Chinatown and the Mission, Tenderloin, South of Market Districts.



A few residents at my apartment building went to CPA years ago. Since then, we've been able to change a lot of the environment so it's a lot better now. There was a fire, and I used my

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<sup>1</sup> Unless otherwise noted, direct quotes from tenants are as told to Chinese Progressive Association, July 2005

knowledge from the fire prevention workshop to use the fire extinguisher. A young girl helped me cut open the tube, and helped extinguish the fire. So everyone was saved.  
– Tenant at 809 Stockton Street

Although there have been some improvements to and abatement of substandard housing conditions, most tenants in Chinatown and other low-income central city neighborhoods, continue to live in unsafe and unhealthy housing. In particular, unhealthy conditions in Chinatown apartment buildings, while serious, have not received as much attention as those in SRO hotels. Also, due to frequent turnover of residents in SRO hotels, the tenant education efforts of the past years must be continually renewed.

## 2005 CHINATOWN TENANT SURVEY

To document housing-related health threats, volunteers from CPA surveyed 197 tenants in 157 different apartment buildings and SRO hotels in San Francisco Chinatown to assess the extent of violations of the City's Housing, Health and Fire Codes. The survey also sought to assess: 1) what actions tenants have taken to address their housing problems, 2) the extent of support for routine code enforcement inspections, and 3) tenants' willingness to get involved in a community advocacy campaign. All surveys were conducted in Chinese either through door to door canvassing or tabling on the street or at neighborhood events from October 2004 through February 2005.

### KEY FINDINGS:

#### **1. Housing, Health and Fire Code violations are widespread in Chinatown housing.**

87% of tenants surveyed reported one code violation, and 62% reported multiple code violations.

**2. Violations of the Health Code were the most widespread problems.** Four of the five most reported problems are violations of the Health Code: Insect and Rodent Infestation, Unsanitary Conditions, Noise Disturbances and Second Hand Smoke Exposure. The fifth most frequently reported problem was Lack of Heat, a violation of the Housing Code.

**3. Very few tenants have complained to their landlord and even fewer have complained to a government code enforcement agency or a community organization.** 28% of tenants reported that they have complained to their landlord about a problem. Only 11% of tenants reported that they have complained to a government agency or a community organization about their housing problems.

**4. Tenants overwhelmingly support stronger government responsiveness to these housing problems through pro-active routine code enforcement inspections.** 82% of tenants surveyed agreed with the statement that the government should conduct routine code enforcement inspections.

**5. Tenants expressed a strong interest in getting involved in a community-wide effort to improve housing conditions.** 61% of tenants surveyed said that they wanted to get involved in a campaign to improve housing conditions.



*812 Grant Avenue*

## HEALTH IMPACTS OF SUBSTANDARD HOUSING

We have problems sleeping because of the noise. The doors slam when they close, making our bed vibrate. Last year, I had to go to the hospital and now I use a cane. I have balance difficulties and dizziness because of an inner ear problem. My wife has leg pain, and can't go up stairs easily. She also has a chronic breathing problem. She coughs and has a runny nose all the time. The kitchen is often very stuffy. And there are so many people trying to use the kitchen and bathrooms that we often have to wait.

– Tenant at 917 Kearny Street

Tenants' lives are negatively affected by a wide variety of health problems related to residence in substandard housing, both SROs and apartment buildings. Some of these problems, such as asthma, tuberculosis, lead poisoning, infection, and accidental injury, arise directly from unsafe and unsanitary living environments. Other factors more indirectly increase tenants' overall vulnerability to illness.

Low-income tenants residing in substandard housing are commonly exposed to mold, mildew, rodent and cockroach waste, second-hand smoke, dust mites, and chemical fumes.<sup>2</sup> The presence of these substances is often compounded by inadequate ventilation. Inhalation of them can lead to asthma and other respiratory ailments. San Francisco County has the fourth highest asthma hospitalization rate in the state, and

<sup>2</sup> These problems are commonly cited in reports and in CPA's own surveys. They were also discussed at the Chinatown SRO Tenants Summit on May 15, 2005, according to the SRO Hotel Safety and Stabilization Task Force, *2004-05 Report to the Board of Supervisors*, 2005.

there are more Asians hospitalized for asthma in San Francisco than in any other county in California. (African-Americans are hospitalized at about triple the rate of other ethnicities, however). While outdoor levels of pollen and pollution contribute to asthma rates, levels of exposure to indoor irritants may be even higher.<sup>3</sup> In a study of families living in Chinatown SRO's, 79% reported breathing and respiratory problems.<sup>4</sup> Such families also listed hygiene and air quality in their living environment as their two top health concerns. According to one parent, "We always have to bring our kids to see their doctors because ventilation in our building is very bad and they got sick all the time."<sup>5</sup>

My husband has asthma, and so do some of our neighbors. It is very stuffy and humid in my apartment. The ventilation is bad, the ceiling is moldy, and there is no fan in the kitchen. But we can't open the windows because there is no screen and the mice and cockroaches will come in.  
– Apartment building tenant at 812 Grant

Tuberculosis is an infectious disease that also adversely affects people living in poorly ventilated, overcrowded housing. Asians and Pacific Islanders have the highest rate of tuberculosis in San Francisco.<sup>6</sup> While many new immigrants to San Francisco may have had tuberculosis prior to their arrival, their subsequent housing conditions have only contributed to the spread of this contagious disease. In the city's residential hotels, particularly, one in three tenants is infected with the TB germ.<sup>7</sup>

Because of the high density and poor ventilation and indoor air quality of the buildings, the high smoking rate among older Chinese immigrant males and the relatively low health awareness of the population, secondhand smoke exposure is a serious health hazard for Chinatown tenants. Cigarette smoke from one unit easily drifts throughout the common areas and into other units. Many of these cramped buildings are constantly filled with secondhand smoke in the common areas which include kitchens, bathrooms and hallways that are used as living spaces. Secondhand smoke exposure is a known risk factor for lung cancer and it is also linked to cancers of the nasal sinus, cervix, breast and bladder as well as noncancerous conditions such as severe and chronic heart disease, asthma and sudden infant death syndrome. In 2003, CPA conducted a survey of 199 randomly selected SRO hotel tenants in Chinatown. When asked if people smoked in the common areas of their buildings, 52.8% (105) tenants said that they did. 79.4% of those surveyed said they "occasionally" or "frequently" smelled secondhand smoke in their buildings common areas.

Lead poisoning primarily afflicts children, though adults are also susceptible to its toxic effects. Most of the homes in San Francisco were built before 1978, when the use of lead-based paint became restricted; therefore lead-based paint, dust, and soil hazards

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<sup>3</sup> San Francisco Asthma Task Force, *Strategic Plan on Asthma*, 2003.

<sup>4</sup> Citywide Families in SROs Collective, *Census of Families with Children Living in SROs in San Francisco*, October 2001.

<sup>5</sup> SRO Families United, *Healthcare Survey Narrative Report*, 2004.

<sup>6</sup> Hospital Council of Northern and Central California and collaborative, *Building a Healthier San Francisco: 2004 Community Assessment Report*, 2004.

<sup>7</sup> *San Francisco TB and Homelessness Task Force report*, First Edition, Fall 2000

are prevalent in San Francisco homes. Increased Cantonese-speaking capacity and community involvement have improved lead level screenings in San Francisco's Asian population, but children of low-income tenants living in poorly maintained buildings with peeling paint and old plumbing continue to be at risk.<sup>8</sup> A number of tenants have told CPA that their children have physical and psychological development issues, but further investigation is needed to determine the precise situation.



*381 Broadway*

Hygiene hazards in communal bathrooms and kitchens include infestation by rodents and insects, along with generally unsanitary conditions. These may lead to or aggravate respiratory problems, food contamination, or fungal skin infections. For example, 10% of surveyed families living in Chinatown SROs said they had experienced infections due to the unsanitary conditions.<sup>9</sup> Residents have suggested that buildings be cleaned at least twice a week, with particular attention to cleaning common areas.<sup>10</sup>

Accidental injuries also arise directly from poor maintenance of housing, including dim lighting of hallways and rooms, ceiling leaks and poor drainage. For example, tenants note that floors in shared bathrooms and showers are often wet and very slippery.<sup>11</sup> These conditions pose significant hazards to elderly tenants, many who may already have mobility difficulties.

I have been living here for 11 years. I can't get good sleep. The chimneys on the nearby buildings are really noisy and hot, and when it's rainy I can't sleep on my bed because the rain will leak through the wall. The ceiling is leaky and it gets very humid indoors. My husband had a stroke and can't walk well. He slipped and fell because the floor was wet from the leaky ceiling. After

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<sup>8</sup> Ahmad, H. and Christine Martin. *Childhood Lead Prevention Program Data Evaluation, 1991-1997*

<sup>9</sup> Citywide Families in SROs Collective, October 2001.

<sup>10</sup> SRO Hotel Safety and Stabilization Task Force, 2005.

<sup>11</sup> *Ibid.*

more than a month of calling, the landlord sent someone to patch the holes and cracks that were everywhere, using tape.

– SRO tenant at 833 Kearny Street

We have a faulty alarm that rings and forces everyone outside even when there is no problem. Now someone jammed the alarm with a key so that it won't go off all the time. The hallways are very dim, the stairway is dark, and elderly people have trouble walking. The lights are off at the fire exit. My room is right next to the kitchen vents. So when they are on I have to close the window. It is hard to breathe because the air smells bad.

– Apartment building tenant at 847 Clay Street

As the above examples indicate, numerous stresses may contribute more indirectly to tenants' increased susceptibility to illnesses of all kinds. For example, 19% of families living in Chinatown SROs complained of lack of sleep due to noise. 40% cited lack of light as a problem, and 19% noted space constraints for children.<sup>12</sup>

Poverty, malnutrition, and stress increase the susceptibility of residents to disease. Families living in Chinatown SRO's listed having a weakened immune system as their third highest health concern. SROs may have crowded or unsanitary kitchens, or even no kitchen at all, in which tenants may cook healthy meals. As one tenant stated, "there is no kitchen in our SRO and my family and I eat out a lot. This type of diet is not very good for our health".<sup>13</sup>

As a final note, the negative health impacts of substandard housing experienced by low-income tenants are compounded by inadequate healthcare. According to a focus group of Chinese (Cantonese-speaking) San Francisco residents, 10 of 12 participants ranked San Francisco's quality of health care as "Poor" to "Terrible." 5 of the 12 ranked their ability to see a health professional when needed as "Poor" to "Terrible." Hopefully, increasing tenant involvement around substandard housing issues will also help empower community members to address broader social challenges.

## **CODE ENFORCEMENT NEEDS**

The Department of Building Inspection (DBI) and the Department of Public Health (DPH) share responsibility for code enforcement in rental housing. DBI enforces the Housing Code, performing both complaint-based and routine inspections on structural issues (e.g. plumbing, heating, etc.). DPH's Environmental Health section responds to complaints and referrals regarding violations of the Health Code (e.g. rats, bedbugs, unsanitary conditions, etc.). Environmental Health also manages a special hotels/housing program. Under this program, two inspectors conduct both complaint-based and routine inspections of a set list of 203 buildings: SROs (those housing families or master leased by the city), shelters, etc.

While these departments have made positive steps toward improving code enforcement over the years (e.g. DBI increasing the number of inspectors and emphasis on routine

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<sup>12</sup> Citywide Families in SROs Collective, October 2001.

<sup>13</sup> SRO Families United, 2004.

inspections, DPH working with multilingual community organizations to identify SROs with families for routine inspections, DPH committing to enforce the smokefree workplace law in SRO's), in reality much room for improvement exists in Chinatown housing code enforcement.

First only about 60% of Chinatown housing stock is SROs, and only a small proportion of the SROs are on the list for routine inspections by DPH. However, the conditions in Chinatown apartment buildings often pose similar health hazards to those in SROs. In addition, the routine inspection list already seems unrealistically demanding for only two inspectors.

Both DBI and DPH still primarily rely on a complaint-based enforcement strategy. Chinese immigrants and families and other socially marginalized and vulnerable tenants are often reluctant to initiate complaints for various reasons (language barriers, fear of retaliation by landlords, lack of time to lodge the complaint, lack of awareness of services, etc.).

A code enforcement program that both lacks capacity and prioritizes complaints cannot address the needs of Chinatown tenants. The recommendations below would increase DPH's ability to handle routine inspections of *both* SROs and apartment buildings, expanding on the current collaborations between government and community groups.

CPA believes that a longer-term vision for effective code enforcement would include collaboration among DBI, DPH, the Fire Department, and community tenant organizations to empower tenants to do outreach, education and basic routine inspections. For the time being, however, as Health Code violations are most prevalent in Chinatown, the current recommendations are directed specifically toward DPH.





## POLICY RECOMMENDATIONS

To strengthen enforcement of the San Francisco Health Code in Chinatown housing and protect the health of vulnerable tenants, Chinatown tenant leaders and CPA developed the following policy recommendations for the City:

1. Create a community-based code enforcement system to conduct tenant-led outreach, education and basic routine inspections of all SROs and apartment buildings in Chinatown
2. Allocate \$200,000 more per year of the Tourist Hotel Tax Fund to low-income housing, designated toward community-based code enforcement
3. Increase fines for code violations and fees for inspections paid by building owners, and designate revenue toward community-based code enforcement
4. Subsidize the creation of a special janitorial company specializing in maintaining residential hotels
5. Require property managers to complete a fee-based training on landlord responsibilities and tenant rights



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