Landmark No. 272
Community-Sponsored
Article 10 Landmark Designation

INITIATED BY THE HISTORIC PRESERVATION COMMISSION: FEBRUARY 17, 2016
APPROVED BY THE BOARD OF SUPERVISORS: JUNE 7, 2016
SIGNED BY MAYOR EDWIN M. LEE: JUNE 17, 2016

Staff Contact: Shannon Ferguson – (415) 575-9074
shannon.ferguson@sfgov.org

Reviewed By: Timothy Frye – (415) 575-6822
tim.frye@sfgov.org

<table>
<thead>
<tr>
<th>Historic Name:</th>
<th>Alemany Emergency Hospital and Health Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>35-45 Onondaga Avenue</td>
</tr>
<tr>
<td>Block/Lot:</td>
<td>6959/016, 017</td>
</tr>
<tr>
<td>Zoning:</td>
<td>P – Public / NCD – Excelsior Outer Mission Street Neighborhood Commercial District</td>
</tr>
<tr>
<td>Year Built:</td>
<td>1933</td>
</tr>
<tr>
<td>Architect:</td>
<td>Charles H. Sawyer</td>
</tr>
<tr>
<td>Applicant:</td>
<td>New Mission Terrace Improvement Association / Lisa Dunseth</td>
</tr>
<tr>
<td>Prior Historic Studies:</td>
<td></td>
</tr>
<tr>
<td>Prior HPC Actions:</td>
<td>On May 20, 2015 the Historic Preservation Commission voted to add 35-45 Onondaga Avenue to the Landmark Designation Work Program.</td>
</tr>
</tbody>
</table>

Significance Criteria:

- **Events:** Associated with events that have made a significant contribution to the broad patterns of our history.
- **Architecture:** Embodies the distinctive characteristics of a type,
period, or method of construction, and possesses high artistic values.

<table>
<thead>
<tr>
<th>Statement of Significance:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The following excerpts are from the Landmark Designation Application:</td>
</tr>
</tbody>
</table>

Funded by a 1928 public bond measure and built in 1933, they [these buildings] extended the City’s emergency hospital system to cover a growing and underserved part of town which today remains predominately populated with modest, single-family homes in a district with few architecturally significant buildings. These buildings were the final piece of the citywide emergency hospital system to be built. It was a system which was once nationally known and respected. The buildings are remnants of a noble, and once controversial, effort to provide free and efficient emergency health care to the district.

The buildings were planned and designed by City Architect Charles H. Sawyer who began his career with the city during the hectic rebuilding of San Francisco after the 1906 earthquake and fire. He also ushered the Bureau of Architecture through the Great Depression. He oversaw the department during a period when innumerable civic buildings were built: schools and hospitals were his domain. San Francisco’s schools and emergency hospital buildings were once the envy of other cities and earned the respect of professionals across the country. As an administrator, Sawyer was responsible for overseeing the work of the entire department, hiring architects as appropriate. However, there are several buildings for which he himself prepared the plans: the Alemany buildings are two of those and they are significant examples of his work.

The Alemany Hospital was opened and dedicated on 16 August 1933. During the same period of time, across town, painter Bernard Zakheim was organizing artists to win the first federal Public Works of Art Project (PWAP) grants to create the Coit Tower frescos. PWAP was a predecessor of the WPA programs: Works Progress Administration/Work Projects Administration. Zakheim painted the Library fresco at Coit Tower, and later in 1934, he painted the two frescos at the Alemany Health Center building: Community Spirit and Growth. These frescos were funded by PWAP, under the sponsorship of the State Emergency Relief Administration (SERA). The Alemany frescos, which depict the neighborhood and a healthcare theme, are important examples of Zakheim’s work and contribute to the overall aesthetic significance of the buildings.
In the summer of 1978, the threatened closure of the [Emergency Healthcare System] system galvanized the neighbors to organize a protest against the loss of this free emergency healthcare service to the working class residents of the Excelsior and Outer Mission. During the previous era of citywide elections, neighborhood organizations collaborated to make sure their voices were heard at City Hall. The COMO (Communities of the Outer Mission Organization) was one of those groups. It was instrumental in organizing the “sit-in” at the Alemany Hospital. Neighbors moved into the building, eating and sleeping there for over a month and a half in the summer of 1978. They attempted to continue offering free first aid and emergency services to patients. They waxed the floors, did the laundry, and referred to their effort as “the greatest grassroots movement in San Francisco.”

This event, while modest in scale, and largely forgotten, is in keeping with San Francisco’s heralded tradition of civic engagement. These buildings represent the most important moment of social activism in the Excelsior District’s history which occurred just months before the fatal and fateful shootings at City Hall. The buildings, the frescos, the hospital system, and this particular act of social engagement should be acknowledged and remembered.

**List of Character-Defining Features:**

**35 Onondaga / Alemany Emergency Hospital: Exterior Features**

- All exterior elevations, architectural ornament and roofline
- Four bay composition consisting of three symmetrical arched bays toward the west and an arched bay with a lower roofline toward the east.
- Brick cladding consisting principally of red-colored stretchers alternating with darker-colored headers.
- Cream-colored terra cotta cladding and ornament, including bands of profiled terra cotta outlining the arched bays and entry, terra cotta ornament within the typanums of the arched window bays featuring scrolls topped by urns and crosses, and terra cotta beltcourses featuring pairs of colonettes topped by finials
- Central recessed entry accessed by steps clad in a chevron pattern and scrolled metal handrails featuring a pair of partially-glazed
and paneled wood doors with an elaborate cream-colored terra cotta surround featuring flanking colonnettes and a floriated frieze with a central cartouche crowned by scrolling ornament, candles, and a plaque reading “Alemany Emergency Hospital,” surmounted by an entablature and a shield with a cross at center.

- Metal and glass pendant light fixture hanging from the center of the entry arch.
- Arched bay to the west (former ambulance entrance) featuring terra cotta cladding and a wood frame opening, surrounded by rusticated terra cotta cladding.
- Roofline featuring two course of dog-tooth brick crowned by a parapet covered with red clay tiles.
- Double-hung, wood sash windows with shouldered surrounds.
- Wire-glass skylights (some screened with non-historic materials on the interior) and their relationship to the space below.

35 Onondaga Avenue: Interior Character-Defining Features (see significant spaces map)

- Entry vestibule featuring tan-colored wall tiles with blue-colored tile borders, blind arches and a vaulted ceiling.
- Open volume of former hospital ward at front of building with cream-colored tile wainscot with tan-colored tile border outlining the wood door and transom openings.
- Former operating room and scrub room configuration with blue-green-colored wall tile and built in cabinets at south end. Contemporary walls and cabinets dividing the operating room are not character defining.
- Staircase to basement featuring cream-colored tile with tan-colored border.

45 Onondaga / Alemany Health Center: Exterior Features

- All exterior elevations, architectural ornament and roofline.
- Flat roofed wing and combination hip and gable roof clad with Spanish Clay tiles.
- Irregular massing with a one-story wing fronting Onondaga
Avenue connecting to a two-story wing toward the rear.

- Two-story rounded tower at the intersection of the one- and two-story wings featuring an arched recessed entry flanked by grid niches and metal and glass lights, a recessed window opening, and a roofline featuring zig-zag stucco relief, pipe vents and a conical roof clad with Spanish clay tiles.
- Courtyard featuring rounded stucco walls, a decorative iron gate with shield ornament, and a curving seat bench on the interior.
- Double-hung wood windows with ogee lugs.
- Pointed arch tripartite window with wood sashes and turned wood mullions, as well as clay pipe vents beneath the gable end facing Onondaga Avenue.
- Brick chimneys.
- Copper rain gutters (portions missing).

45 Onondaga Avenue: Interior Character-Defining Features (see significant spaces map)

- Lobby with double-height volume, gable ceiling with wood beams, and vertical board wainscot with flat board trim throughout.
- Central fireplace featuring tile cladding with a floral tile accent, wooden brackets with carved floriated ornament and Fleur-des-lis supporting a wood mantle, and a tapered plaster chimney rising through a wood balcony with a decorative iron railing at the second floor.
- Bernard Zakheim frescoes on the fireplace chimney at first floor (partially painted over) and at second floor.
- Metal candle sconces flanking the fireplace.
- Wood staircase with turned wood balusters and vertical board wainscot.
- Gabled ceiling at second floor landing of staircase.
- Door openings with paneled wood doors and flat board trim flanking the fireplace on the first floor and arched openings flanking the chimney on the second floor.
- Metal railing in punched window opening at second story of
rounded tower.
Additional Photos (35 Onondaga – Alemany Emergency Hospital)
Entry vestibule; note tan-colored wall tiles with blue-colored tile borders, blind arches and a vaulted ceiling.

Detail of tile work in entry vestibule
Former ward room, view northwest; note cream-colored tile with tan-colored tile borders.

Former ward room, view southeast; note cream-colored tile with tan-colored tile borders.
Detail of scrub room interior. Note blue-green-colored wall tile.

South ward room, view southeast.
Entry to scrub room, note built in cabinets (left), former ambulance entrance to operating room, note blue-green-colored wall tile (right).

View toward Onondaga Avenue.
Former ambulance bay and corridor, view southwest

Detail of corridor, view southwest (left), typical bathroom finishes (right)
Detail of stair; note cream-colored tile with tan-colored border.

Typical skylight
Basement boiler room showing apparent connection to 45 Onondaga Avenue
Significant Spaces Map (35 Onondaga – Alemany Emergency Hospital)

First floor plan; location of character defining features represented by green shading.
Additional Photos (45 Onondaga – Alemany Health Center)
Lobby, view south; note double height volume, gable ceiling with wood beams, balcony, central fireplace with tapered chimney, metal candle sconces and openings flanking fireplace and chimney, and vertical board wainscot with flat board trim throughout.
Lobby, view north; note metal railing in punched window opening at second story.

Detail of staircase and fireplace; on fireplace note tile cladding, wood brackets supporting mantle and over-painted fresco above.
View of stair landing at second floor; note turned wood balusters, vertical board wainscot at staircase, and vaulted ceiling.

Fresco facing second floor balcony.
Detail of fresco at second floor (left); detail of balcony railing (right).

Details from fresco at second floor.
Typical examination room finishes.

Basement mechanical rooms.
Significant Spaces Map (45 Onondaga – Alemany Health Center)

First floor plan; location of character defining features represented by green shading.

Second floor plan; location of character defining features represented by green shading.
Since 1967, San Francisco’s Historic Preservation Program has helped preserve important facets of the city’s history. The list of designated city landmarks and landmark districts includes iconic architectural masterpieces, monuments to historic events, and places associated with cultural and social movements that have defined our city. However, there are still many more untold stories to celebrate through landmark designation.

Most San Francisco landmarks are buildings. But a landmark can also be a structure, site, feature or area of special historical, architectural or aesthetic interest. Collections of properties can also be designated as landmark districts.

Landmarks can be significant for a variety of reasons. The criteria are based on those used by the National Register of Historic Places. They include:

- Properties significant for their association with historic events, including the city’s social and cultural history
- Properties significant for their association with a person or group important to the history of the city, state or country
- Properties significant for their architecture or design
- Properties that are valued as visual landmarks, or that have special character or meaning to the city and its residents
- Collections of properties or features that are linked by history, plan, aesthetics or physical development.

Landmark designation recognizes the property as a significant element of San Francisco history. There are also various incentives, including the following:

- Eligibility for the Mills Act program, which can result in property tax reduction
- Eligibility to use the California Historical Building Code
- Eligibility for land use incentives under the San Francisco Planning Code
- Eligibility to display a plaque regarding the building’s landmark status
How to Apply to Designate a Landmark

Any member of the public may nominate a property for landmark designation. The application must contain supporting historic, architectural and/or cultural documentation. More information about the Planning Department’s Historic Preservation program can also be found here: http://www.sf-planning.org/index.aspx?page=1825

The Landmark designation process is a multi-step process. This includes the following:

1. Set a preliminary application review meeting with Planning Department Preservation staff. The meeting will focus on reviewing the draft designation application. Preservation staff can provide advice for improving the application, including any additional research which may be needed.

2. Submit the completed final application for review. Once it is determined to be complete, Preservation staff will place the application on the agenda for a Historic Preservation Commission (HPC) hearing.

3. During the hearing, the HPC will hear public testimony and determine if the property meets the criteria for landmark designation. If so, the Commission will vote to initiate landmark designation and schedule a follow-up hearing.

4. If the landmark designation is for a district, the Planning Commission will provide its review and comment on the proposed designation prior to the HPC making a final recommendation to the Board of Supervisors.

5. At the second hearing, the HPC will hear public testimony and vote on whether to recommend landmark designation to the Board of Supervisors.

6. An HPC recommendation supporting landmark designation will be forwarded to the Board of Supervisors and will be heard by its Land Use and Economic Development Committee. This is a public hearing where the owner(s) and members of the public can offer testimony.

7. The Land Use and Economic Development Committee will forward its recommendation on the designation to the full Board of Supervisors for a first reading. The Board of Supervisors will vote on the designation. A majority of Supervisors must vote in favor of the landmark designation for it to be approved. This is a public hearing, although no public testimony will be heard.

8. At a following Board of Supervisors hearing the proposed designation will have a second reading. This is a public hearing, although no public testimony will be heard. If the majority of Supervisors remain in favor of the landmark designation, the designating ordinance is sent to the Mayor for final signature.

Completing the Application

Please fill out all of the sections of the application. Use the checklist at the end of this application to ensure that all required materials are included. If more space is needed, please feel free to attach additional sheets as necessary. If you are unsure how to answer any of the questions, please contact Planning Department preservation staff.

Please submit the completed application to:
San Francisco Planning Department
Attn: Landmark Designation Application
1650 Mission Street, Suite 400
San Francisco, CA 94103-9425
Application for Historic Landmark Designation - Alemany Emergency Hospital & Health Center & Bernard Zakheim murals

Historic Landmark Designation Application

1. Current Owner/Applicant Information

<table>
<thead>
<tr>
<th>PROPERTY OWNER'S NAME:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>City &amp; County of San Francisco - Real Estate Dept.</td>
<td></td>
</tr>
<tr>
<td>Property Owner's Address:</td>
<td></td>
</tr>
<tr>
<td>25 Van Ness Avenue, Suite 400</td>
<td></td>
</tr>
<tr>
<td>Telephone:</td>
<td>(415) 554-9850</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:RealEstateAdmin@sfgov.org">RealEstateAdmin@sfgov.org</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>APPLICANT NAME:</th>
<th>Telephone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Hooper, President, NMTIA</td>
<td>(415) 585-0472</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:nmtia.sf@gmail.com">nmtia.sf@gmail.com</a>; <a href="mailto:dunsethl@hotmail.com">dunsethl@hotmail.com</a></td>
</tr>
</tbody>
</table>

2. Location of the Proposed Landmark

<table>
<thead>
<tr>
<th>STREET ADDRESS OF PROJECT:</th>
</tr>
</thead>
<tbody>
<tr>
<td>35 and 45 Onondaga Avenue</td>
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<tr>
<td>Alemany Blvd.</td>
</tr>
<tr>
<td>ZIP CODE:</td>
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<tr>
<td>94112</td>
</tr>
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<table>
<thead>
<tr>
<th>LOT MEASUREMENT:</th>
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<tbody>
<tr>
<td>Lot Size: 6959/0.17 &amp; 0.16</td>
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<tr>
<td>7,110 total</td>
</tr>
<tr>
<td>TOWN DISTRICT:</td>
</tr>
<tr>
<td>P (or NC-3 for 45?)</td>
</tr>
<tr>
<td>HISTORICAL DISTRICT:</td>
</tr>
<tr>
<td>40-x</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OTHER GENERAL HISTORIC INFORMATION:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alemany Emergency Hospital (35) &amp; Alemany Health Center (45)</td>
</tr>
</tbody>
</table>

3. Property Information

<table>
<thead>
<tr>
<th>HISTORICAL NAME OF PROPERTY (IF APPLICABLE):</th>
</tr>
</thead>
<tbody>
<tr>
<td>see #2 above</td>
</tr>
<tr>
<td>DATE OF CONSTRUCTION:</td>
</tr>
<tr>
<td>1932-33</td>
</tr>
<tr>
<td>ARCHITECTURAL STYLE:</td>
</tr>
<tr>
<td>Spanish Baroque (35) &amp; Spanish Colonial (45)</td>
</tr>
<tr>
<td>Source of Information:</td>
</tr>
<tr>
<td>Architect &amp; Engineer, Jan. 1930, p. 111</td>
</tr>
<tr>
<td>Hospital, Health Center:</td>
</tr>
<tr>
<td>VACANT</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PROPERTY INCLUSE IN OTHER HISTORIC SURVEY:</th>
</tr>
</thead>
<tbody>
<tr>
<td>45 in 1976 SF Survey (SFPLM)</td>
</tr>
<tr>
<td>SURVEY NUMBER:</td>
</tr>
<tr>
<td>?</td>
</tr>
</tbody>
</table>
4. Statement of Significance
The proposed landmark is significant for the following reasons [ ]. Please check all that apply:

- It is associated with significant events or persons, or reflects important aspects of social or cultural history
- It is associated with a person or persons important to our history
- It is significant for its architecture or design, or is a notable work of a master builder, designer or architect
- It is valued as a visual landmark, or has special character or meaning to the city and its residents
- It contains archaeological deposits that have the potential to yield important information about history or prehistory

Please summarize why the property or district should be designated a San Francisco landmark. Whenever possible, include footnotes or a list of references that support the statement of significance. Copies of historic photographs, articles or other sources that directly relate to this property should also be attached.

Please see attached document.

5. Property/Architecture Description
Please provide a detailed description of the exterior of the building and any associated buildings on the property. This includes the building's shape, number of stories, architectural style, and materials. For example, is the building clad with wood, brick or stucco? What materials are the windows and exterior doors made of? Please be sure to include descriptions of the non-publicly visible portions of the building. Attach photographs of the property, including the rear facade.

Please see attached document.

6. Neighborhood or District Description
Please provide a narrative describing the buildings both adjacent to, and across the street from, the subject property. This includes describing their architectural styles, number of stories, exterior materials (e.g., wood or stucco cladding) and landscape features, if any. Attach representative photographs.

If the application is for a landmark district, please provide similar information describing the architectural character of the district. Also be sure to include a map outlining the boundaries of the district, as well as a list of all properties including their addresses, block and lot numbers, and dates of construction. This information may be gathered using the San Francisco Property Information Map, available online at: [http://geoservices.sfgov.org/relationships/propertyinfo.map](http://geoservices.sfgov.org/relationships/propertyinfo.map)

Please see attached document.
7. Building Permits and History of Alterations

Please list all building permits from the date of reconstruction to present. Be sure to include any alterations or additions to the building. These include changes such as window replacement, construction of a new garage, or installation of roof dormers. Also attach photocopies of building permits. Copies of building permits are available from the Department of Building Inspection, 1600 Mission Street, 5th Floor (415)673-3636, or online at www.sfgov.org.

*Note: Do not complete this section if the application is for a landmark district.

<table>
<thead>
<tr>
<th>PERMIT</th>
<th>DATE</th>
<th>DESCRIPTION OF WORK</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>#45: 2/21/2002</td>
<td>folding gates</td>
</tr>
<tr>
<td>2.</td>
<td>#45: 9/30/2002</td>
<td>window guards</td>
</tr>
<tr>
<td>3.</td>
<td>#45: 2/6/1996</td>
<td>fire escape, fire wall, lattice over balcony</td>
</tr>
<tr>
<td>4.</td>
<td>#45: 12/27/1995</td>
<td>fire escape</td>
</tr>
<tr>
<td>5.</td>
<td>#45: 8/10/1994</td>
<td>ADA ramp and sidewalk</td>
</tr>
<tr>
<td>6.</td>
<td>#45: 3/15/1994</td>
<td>ADA ramp</td>
</tr>
<tr>
<td>7.</td>
<td>#45: 2/28/1994</td>
<td>ADA ramp</td>
</tr>
<tr>
<td>8.</td>
<td>#45: 9/23/1993</td>
<td>fire escape</td>
</tr>
</tbody>
</table>

Please describe any additional alterations that are not included in this table. For example, have any obvious changes been made to the property for which no building permit record is available?

8. Ownership History Table

Please list all owners of the property from the date of construction to present. Building ownership may be researched at the San Francisco Assessor-Recorder’s Office, located at City Hall, Room 190.

*Note: Do not complete this section if the application is for a landmark district.

<table>
<thead>
<tr>
<th>OWNER</th>
<th>DATES [FROM - TO]</th>
<th>NAME(S)</th>
<th>OCCUPATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>1932 - 2010</td>
<td>C&amp;C of SF: Dept. of Public Health</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>2010 - present</td>
<td>C&amp;C of SF: Real Estate Division</td>
<td></td>
</tr>
</tbody>
</table>

If the property is significant for its association with a person important to history, please be sure to expand on this information in Section 9.
9. Occupant History Table

Please list all occupants of the property (not just the owner) from the date of construction to present. It is not necessary to list the occupants in each year. A sample of every five to seven years (e.g., 1920, 1927, 1932, etc.) is sufficient. For multi-unit buildings, please use a representative sampling of occupants. A chronological list of San Francisco city recreation from 1850 - 1892 is available online. Consulting the "FAM" link will take you to a copy of the original document:
http://www.cygnus.ucsf-edu/fam2.html

Beginning with the year 1930, a "reverse directory" is available in the back of each volume, allowing you to look up a specific address to see the occupants.

*Note: This and complete this section if the application is for a Landmark District.

<table>
<thead>
<tr>
<th>No.</th>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Aug. 1933</td>
<td>C&amp;C of SF: Dept. of Public Health</td>
</tr>
<tr>
<td>2.</td>
<td>1943</td>
<td>bldg services closed due to WWII</td>
</tr>
<tr>
<td>3.</td>
<td>1956</td>
<td>campaign to keep AEH open</td>
</tr>
<tr>
<td>4.</td>
<td>1978</td>
<td>sit-in to keep AEH open</td>
</tr>
<tr>
<td>5.</td>
<td>1980</td>
<td>ambulance service from AEH site</td>
</tr>
<tr>
<td>6.</td>
<td>1982</td>
<td>lease; St. Luke's Hospital</td>
</tr>
<tr>
<td>7.</td>
<td>1982-2011</td>
<td>lease; St. Mary's Hos. &amp; Keystone Voc. Tr. Sch.</td>
</tr>
<tr>
<td>a.</td>
<td>2011-2015</td>
<td>vacant</td>
</tr>
</tbody>
</table>

If the property is significant for having been used by an occupant, group or tenant important to history, please expand on this information below.

10. Public Information Release

Please read the following statements and check each to indicate that you agree with the statement. Then sign below in the space provided.

- I understand that submitted documents will become public records under the California Public Records Act, and that these documents will be made available upon request to members of the public for inspection and copying.
- I acknowledge that all photographs and images submitted as part of the application may be used by the City without compensation.

David Hooper
Name/Print

May 6, 2015
Signature

L.S. Dunseth, 5 October 2015
Signature
# Submittal Checklist

Use the checklist below to ensure that all required materials are included with your application.

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Photographs of subject property, including the front, rear and visible side facades</td>
<td></td>
</tr>
<tr>
<td>Description of the subject property (Section 5)</td>
<td></td>
</tr>
<tr>
<td>Neighborhood description (Section 6), with views of adjacent properties and properties across the street</td>
<td></td>
</tr>
<tr>
<td>Building permit history (Section 7), with copies of all permits</td>
<td></td>
</tr>
<tr>
<td>Ownership history (Section 8)</td>
<td></td>
</tr>
<tr>
<td>Occupant history (Section 9)</td>
<td></td>
</tr>
<tr>
<td>Historic photographs, if available</td>
<td></td>
</tr>
<tr>
<td>Original building drawings, if available</td>
<td></td>
</tr>
<tr>
<td>Other documentation related to the history of the property, such as newspaper articles or other references</td>
<td></td>
</tr>
</tbody>
</table>
Statement of Significance: The Architect, the Architecture, the Murals

The Alemany Emergency Hospital and Health Center buildings anchor the corner of Alemany Boulevard and Onondaga Avenue, just one short block from Mission Street, in the heart of the Excelsior District. They are valued by residents as unofficial neighborhood landmarks and have special meaning to those who remember when they were operational.

Funded by a 1928 public bond measure and built in 1933, they extended the City’s emergency hospital system to cover a growing and underserved part of town which today remains predominately populated with modest, single-family homes in a district with few architecturally significant buildings. These buildings were the final piece of the citywide emergency hospital system to be built. It was a system which was once nationally known and respected. The buildings are remnants of a noble, and once controversial, effort to provide free and efficient emergency health care to the district. These important and interesting buildings are the subject of this landmarking application.

The buildings were planned and designed by City Architect Charles H. Sawyer who began his career with the city during the hectic rebuilding of San Francisco after the 1906 earthquake and fire. He also ushered the Bureau of Architecture through the Great Depression. He oversaw the department during a period when innumerable civic buildings were built: schools and hospitals were his domain. San Francisco’s schools and emergency hospital buildings were once the envy of other cities and earned the respect of professionals across the country. As an administrator, Sawyer was responsible for overseeing the work of the entire department, hiring architects as appropriate. However, there are several buildings for which he himself prepared the plans: the Alemany buildings are two of those and they are significant examples of his work.

Built during a time when the City’s population was continuing to grow, the Alemany Emergency Hospital and Health Center buildings were funded by voter-approved bond monies. There was overwhelming public support for them, during a period when people faced hard economic times and the City faced a “depression load of indigent sick.”¹ This was during the Great Depression when state and federal monies were being made available to keep people, including artists and writers, employed.
The Alemany Hospital was opened and dedicated on 16 August 1933. During the same period of time, across town, painter Bernard Zakheim was organizing artists to win the first federal Public Works of Art Project (PWAP) grants to create the Coit Tower murals. PWAP was a predecessor of the WPA programs: Works Progress Administration/Work Projects Administration. Zakheim painted the Library mural at Coit Tower, and later in 1934, he painted the two murals at the Alemany Health Center building: Community Spirit and Growth. These murals were funded by PWAP, under the sponsorship of the State Emergency Relief Administration (SERA). The Alemany murals, which depict the neighborhood and a healthcare theme, are important examples of Zakheim’s work and contribute to the overall aesthetic significance of the buildings.

Statement of Significance: The Emergency Hospital System

The five hospitals (in the citywide system) have different problems depending on the zone each is in. Harbor has many serious cases—stevedores who have been injured on the job or waterfront prowlers who have been brawling. Park, especially over the weekends, handles dog bites, tick bites and children who have fallen from swings. Alemany largely handles domestic accidents, but the crew out there will tell you that when they get an auto accident “it’s a lulu.” That’s because the number of boulevards—Bayshore Highway, Alemany Boulevard, Sloat Boulevard and Nineteenth Avenue—allow drivers to get up considerable speed before they smack into each other.2

San Francisco’s Emergency Hospital System is fondly remembered by those old enough to have used it and a surprising historical note to younger people and to those who did not grow up here. Alemany Emergency specifically is remembered by many longtime residents of this stable, working class community which still includes many families who have lived in the neighborhood for three and four generations.

The citywide system was created to address the needs of a quickly growing population and became a professionally respected organization.3 It was known as “one of the most comprehensive and elaborate public health services of its kind in the United States.”4 Its origins can be traced to the treatment rooms attached to the city’s prison circa 1870s5 and it evolved into the well-developed system of emergency care “recognized as one of the finest in the United States.”
The history of San Francisco’s free emergency healthcare system features colorful characters and dedicated civil servants, such as City Architect Charles H. Sawyer and Director of Public Health Dr. Jacob Geiger. They worked together with elected officials and strategized the political system of the time to accomplish their work. The development and growth of the hospital system, which began in the 19th century with Central, Park, and Harbor hospitals, expanded to include Mission, Potrero, Ocean Beach and finally Alemany.

The system was gradually folded into what eventually became the first complete municipal trauma center at General Hospital. Its financial and political support fluctuated during times of extreme population growth, the Great Depression, the World Wars, the passage of local bond measures, the availability of state and federal funds, and the passage of Proposition 13 in the 1970s. Social changes in health care reform and Medicare/Medicaid laws and the expansion of emergency rooms in private hospitals played a role in the development and changes to the system. Technological improvements in communications systems, like the 911 call system, had broad and sweeping effects. The evolution of the system’s origins is complex and the reasons for the eventual demise of this free health care system are equally complicated. The system was officially disbanded in the summer of 1978 despite organized civic engagement and protest. What remains is the story and several of the original buildings -- one of which, the Park Emergency Hospital, has already been landmarked.

**Statement of Significance: The Community’s Social Engagement**

Sawyer and Geiger’s dedication to civic buildings and public health were embodied in these two buildings. In the summer of 1978, the threatened closure of the system galvanized the neighbors to organize a protest against the loss of this free emergency healthcare service to the working class residents of the Excelsior and Outer Mission.

In 1978, the newly instituted District Elections had named Dan White the City Supervisor for the Excelsior/Outer Mission area. He spoke publicly in favor of keeping the Alemany hospital open. District Elections were designed to make sure the voices of the neighborhoods were heard downtown and this was the first year of that experiment.
During the previous era of citywide elections, neighborhood organizations collaborated to make sure their voice were heard at City Hall. The COMO (Communities of the Outer Mission Organization) was one of those groups. It was instrumental in organizing the “sit-in” at the Alemany Hospital. Neighbors moved into the building, eating and sleeping there for over a month and a half in the summer of 1978. They attempted to continue offering free first aid and emergency services to patients. They waxed the floors, did the laundry, and referred to their effort as “the greatest grassroots movement in San Francisco.”

This event, while modest in scale, and largely forgotten, is in keeping with San Francisco’s heralded tradition of civic engagement. These buildings represent the most important moment of social activism in the Excelsior District’s history which occurred just months before the fatal and fateful shootings at City Hall. The buildings, the murals, the hospital system, and this particular act of social engagement should be acknowledged and remembered.
Architectural Description: 35 & 45 Onondaga Avenue

35-45 Onondaga Avenue was built as a single project that housed two closely-related city programs. The Emergency Hospital was located at 35 Onondaga, while the Health Center was at 45 Onondaga. Over time these buildings have been referred to as: Health At Home; Alemany Aid Center; and Alemany Treatment Center. In order to highlight the fact that each part of this building was dedicated to a separate program, each received its own, distinct architectural treatment. Although both halves were designed to convey a Mediterranean feeling, the Emergency Hospital had a lavish and colorful composition executed in brick and terra cotta, while the Health Center was a more restrained exercise in stucco. It would be difficult to tell, just by looking, that the entire building was designed and built as a single project.
The Emergency Hospital, 35 Onondaga Avenue
The Emergency Hospital at 35 Onondaga has a simpler, rectangular plan and a richer ornamental scheme which could be described as Spanish Baroque. Its facade is divided into four bays: the main body of the hospital, which is symmetrical and composed of three bays, and a slightly lower ambulance bay at left. Structurally, it is reinforced concrete with a brick front.

The main body of the hospital has a brick facade composed principally of red stretchers alternating with blackened headers. At the parapet, two courses of red bricks are turned at forty-five degree angles for a zig-zag effect. All other ornament is cast in cream-colored terra cotta.

In composition, the facade is symmetrical and consists of an elaborate parapet, entablature, and frieze over three bays. The center bay is devoted to an arched entrance, and each outer bay is devoted to an arched window.
The parapet is topped by a course of clay tiles over the above-mentioned courses of zig-zag bricks. The entablature below is made of profiled terra cotta with cast floral ornament. Below it is a frieze of brick, and below this is a belt course of terra cotta, again with cast floral ornament. Elaborate Baroque columns rise from below the belt course to above the entablature and into the parapet, uniting the different parts of this composition. All of these features survive unaltered, but the condition is only fair; cleaning and perhaps other restoration is needed.

The arched openings below -- the entrance and windows -- are each defined by bands of profiled terra cotta. In the windows, the inside perimeter of each terra cotta band is lined by brick headers. Also in the windows, terra cotta panels decorated with an urn, cross and candles fill the interiors of the arches. The recessed central entrance is decorated by a classical panel reading “Alemany Emergency Hospital” plus a shield and candles, a classical overdoor, and colonnettes, all of terra cotta. The colonnettes flank paired paneled wooden doors with upper-level glazing. The windows are now filled by dense protective wire screens.
At far left (to the east), is an ambulance bay which is clad almost entirely by cream-colored terra cotta. This terra cotta facade is divided by joints to resemble a masonry arch. The dominant feature of this bay is a vehicle entrance whose segmental-arched head is profiled with many layers. One of the layers has a floral motif; another continues downward along the sides of the opening as spindles. A thinner profiled course with a floral molding stretches across the top of this bay. An ornamental urn at far left and a scroll bracket at far right, both made of terra cotta, top the composition. A thin column of alternating red and black bricks defines the left edge of this bay. The original ambulance doors have been replaced by a glass pedestrian door, transom, and sidelight, all in a modern metal frame surrounded by a profiled wooden casing. This wooden casing is painted red and appears to be original.

Remaining original interior details include teal-green, cream, and terracotta ceramic tile wall cladding, including tile trim outlining doors and windows, transoms above doors, and built-in wooden cabinetry. The space was originally filled with natural light from the approximately eighteen skylights some of which are visible — others appear to have been covered up.

**Alterations**

Alterations to the exterior of 35 Onondaga have been very few. The original paired wooden vehicle doors have been removed from the ambulance bay and were replaced by the present glass and metal pedestrian entrance. The wire screens over the windows are also non-original. The original First Aid sign on a bracket to the left of the front door and visible in old photos is gone.
The Health Center, 45 Onondaga Avenue

The Health Center occupies the corner of the lot, at the intersection of Onondaga Avenue and Alemany Boulevard. Its form is irregular and its style could be described as Spanish Colonial. The main body of the building forms a gabled, two-story, rectangular block that is built to the lot line on Alemany but is set far back from Onondaga Avenue. A one-story wing is built in front of this block, and it extends almost, but not quite, to Onondaga. Where the two-story block and the one-story wing meet, a rounded tower rises to just above the roofline. All of these parts are clad in stucco. The overall effect is that of a medieval Mediterranean hilltown house that was built in stages over time, resulting in an irregular massing.

The angle between the two-story block and the one-story wing creates a small courtyard, which is reached from the sidewalk by a series of three steps. This court is enclosed by a high stucco wall (on the Alemany side) and an ornamental iron fence (at the corner). These features show in early photographs and are original. The building’s public face would have provided a welcoming entrance, as if to a private home, which is in direct contrast to the Hospital building’s facade.
The roof of the Health Center, like the form, is irregular. The two-story block is hipped where it faces Alemany and gabled where it faces Onondaga. The corner tower has a low-pitched conical roof, and the one-story wing has a flat roof. All parts of this roof are covered with curved Spanish clay tiles except for the one-story wing, where the roof perimeter is lined with such tiles.

With one exception, windows are rectangular, with traditional double-hung wooden sash and stucco-clad sills. These are variously single and paired. Those in the first story have non-original protective steel grilles. The exception is a tripartite window with a triangular head in the recessed second story, facing Onondaga Avenue. This window has wooden sash with turned spindles for mullions.

As mentioned above, the Health Center’s ornamental scheme is restrained. The entrance in the corner tower takes the form of a steeply arched void. A zig-zag course can be found impressed in the stucco in the corner tower, just below the roofline. Grids of small recesses flank the arched entrance and are topped by ornamental lanterns. Gutters and downspouts, parts of which are missing, are copper, with profiled surfaces.

Remaining interior original details include: the lobby which includes its double-height volume, gable ceiling with wood beams, and vertical board wainscot with flat board trim; balcony with wrought iron railing; and paneled wood doors throughout.

The centerpiece of the main room is the terracotta fireplace which makes a distinctive home-like statement referenced in the building’s later name: the “Health At Home” building. The “battered” chimney features two murals painted in 1934: the mural above the fireplace on the main floor is mostly painted over; the mural on the chimney at the balcony level is intact but in need of conservation. Sconces flank the fireplace at the first floor. On the balcony there are arched walkway openings on either side of the chimney.
Alterations
Alterations to the exterior at 45 Onondaga include: faux balconies have been removed from four second story windows, protective grilles have been added to the first story windows, and parts of the copper downspouts have been removed. The pepper trees flanking the entrance gate seem to occupy boxes intended as planters, but these trees do not show in an early photograph. They partially obscure the building behind them. The original freestanding First Aid sign, at the front of the building and visible in old photos, is gone.

Photo: Health at Home, 45 Onondaga. The gate, with trees and a sign that says "Health at Home." Photo courtesy of Lisa Dunseth, 2015.
Application for Historic Landmark Designation - Alemany Emergency Hospital & Health Center & Bernard Zakheim murals

Photo courtesy of Lisa Dunseth, 2015

Photo courtesy of Lisa Dunseth, 2015

Photo courtesy of Lisa Dunseth, 2015

Photo courtesy of Lisa Dunseth, 2015
Photo courtesy of Jonathan Lammers, 2015
The origins of the emergency hospital system which evolved into a citywide system can be traced to the treatment rooms attached to the city’s prison circa 1870. The city’s first emergency room was located in the basement of the old City Hall circa 1876 -- it was destroyed in the earthquake and fire of 1906.

Beginning in 1889, William Randolph Heart, used his newspaper, the *Examiner*, to campaign against San Francisco’s lack of a proper ambulance and emergency service and to expose how San Francisco “lagged far behind the other major East Coast cities.” In 1896, Annie Laurie, the well-loved newspaperwoman who wrote for the *Examiner*, dramatized the City’s lack of service in a scathing piece. She pretended she was injured, sought help, and then wrote about her abominable treatment. (Incidentally, she was such a beloved public figure that, after her death in 1936, her body was laid in state at City Hall.) These protests brought results.

In 1897, just a year after Annie Laurie’s dramatic exposé, two Emergency Hospitals were built. One was the Park Emergency Hospital at Golden Gate Park and Stanyan. (Today, the Park Emergency Hospital building is a City Landmark and fully restored.) The second was Harbor Emergency Hospital at the foot of Clay Street. (In 1926, it moved to 88 Sacramento and later moved to 1490 Mason Street, atop the Broadway Tunnel. The original Harbor building is gone. Today 1490 Mason Street is the location for the Chinese Public Health Center.)

By 1903 when the Potrero Emergency Hospital was opened there was a formally-established citywide Emergency Hospital Service. (Potrero was moved in 1914 to the Potrero Police Station at 2312 3rd Street. It was closed in 1933 just after the Alemany Hospital was opened. The building is extant and derelict.)

Mission Emergency (“attached to but administratively separate from” the General hospital) was established in 1909 near 23rd and Potrero Avenue. (The original Mission building is extant and part of the General Hospital complex.)
Central Emergency was rebuilt as part of the municipal complex at Civic Center in 1917 and served as the headquarters of the City’s ambulance service. Later, in 1932 the new Health Administration building at Civic Center was being planned which would not include emergency services. But until the mid 1930s many major surgical procedures were done at Central Emergency.  

Additional support services operated later at the Mission Health Center, 3000 24th Street, and at a “dressing station” which opened at Fleishhacker Pool in 1925. (The original Fleishhacker Pool first aid station building had been vacant and derelict for many years when it burned down in 2012.)

By 1916, major, and much needed, improvements to the system had been made. One headline read: “S.F. Emergency Hospitals Lead” ... “Four Great Eastern Cities Adopt” our system. In that article, Charles Bucher, who had by that time, been Chief Steward of the Emergency Hospitals for twenty years, reported on the impressive work done at the Central, Harbor, Mission, Park, and Potrero Emergency Hospitals.

The City’s emergency hospital system grew during the long career and under the administrative support of Edmund Butler, who was the Chief of the citywide emergency and ambulance system from 1919 until his death in 1954 -- a period of time which spanned the Great Depression and World War II. Butler’s Assistant Chief of Emergency Service was George Rhoads who served from 1920 until his untimely death in 1944. Both men were considered “fine men” and “excellent teachers.” They would have provided a stable and supportive environment for the service to thrive.

But in 1920, a headline reads: “S.F. Hospital Forces Oppose First Aid Cut--Full Emergency Service Restoration to Be Asked of Supervisor’s Today.” The article describes how the staff of the hospitals, facing drastic cuts, went themselves to the Board of Supervisors to protest. Apparently this was effective and the Chief Surgeon Edward Butler’s rank and salary was restored.
HISTORY: The Health and Hospital Bond #56: November 6, 1928

In April 1928, Dr. Hassler, from the Board of Public Health was campaigning for the Health and Hospital Bond No. 56. It passed with an overwhelming “Yes” vote of 73% and provided $3.5 million dollars for construction. (Initially it had been a $2.8 million bond.) The bond provided for:

Permanent buildings within and without the City and County of San Francisco to be used as additions to the Tuberculosis Preventorium Health Farm in San Mateo County, and in San Francisco County construct a Psychopathic Building, Cancer Institute, additions to the Laguna Honda Home, additional stories to be added to the present Ward Buildings and Tuberculosis Hospital on the San Francisco Hospital site, enlarge Central Emergency Hospital, including a Health Center Buildings on lands adjacent to the Civic Center and additional lands, allowing for the extension of the San Francisco Hospital and the purchase of existing hospitals or institutions, erection of Health Centers in districts throughout San Francisco, and the purchase of necessary lands, buildings, equipment and furnishings.23

While the language in the bond does not mention Alemany specifically, it refers to the “erection of Health Centers in districts throughout San Francisco.” In the public relations campaign for the bond, this translated into an “emergency hospital unit and health center at Ocean Avenue and Alemany Boulevard.”24 By August of 1928, the Board of Health was urging passage of this bond and the need for the Alemany Hospital (still at Ocean Avenue)25 and by October 1928 thirty-five civic clubs were working on the passage of this bond which had increased to $3.5 million dollars.26 An appeal by civic leaders, in November 1928, for passage of the bond reminds voters that the bond will also “provide for a cancer institute, will enlarge the tubercular preventorium near Redwood City (eventually the Hassler Health Farm) and will provide an adequate psychopathic hospital.”27

The bond passed by a wide margin and in November 1930 the City chose an alternate site at Alemany and Onondaga and purchased it for the “Outer Mission District Health Center.”28 The January issue of Architect and Engineer reported: “1930 promises to be an active one in new building construction for the City and County” and lists several health and school building projects, one of which is the Alemany Hospital.
The “Tuberculosis Preventorium Health Farm,” which was funded by this bond, was later called the Hassler Health Farm -- it operated roughly between 1926-1972, was sold by the City, and, since 1983, has been known as the Pulgas Ridge Preserve Open Space in San Mateo County.\textsuperscript{29} The Central Emergency Hospital at Civic Center, including the Health Center Administration Building, is extant. The improvements at Laguna Honda and General Hospital were also major elements of this bond -- we assume these wings are extant and part of those two existing and renovated hospital campuses.

Despite the success of the bond measure, sustainable funding for the emergency hospital system continued to be a problem during the Depression years\textsuperscript{30} which, incidentally, was also a time of continued population growth in San Francisco.
HISTORY: The Alemany Hospital, The Last To Be Built: 1933

Charles H. Sawyer, as City Architect, “prepared the plans” in 1931 for the one of the “eight health centers for the city, with the Civic Center Building as headquarters.” The plan was approved for construction by the Board of Supervisors in October 1931. It is obvious that the plan for eight emergency hospitals was scaled down indicating how the plans for bond monies could be changed over the years. It was planned for the southeast corner of Alemany Boulevard and Onondaga Avenue, would cost $65,000, and would feature a two-story, brick and tile building with the emergency hospital on the ground floor and the health center upstairs.

This original Alemany plan was modified. It eventually became a one-story hospital and two-story health center. The cost was later revised showing an increase of over $17,000 -- perhaps to account for those changes. This increase foreshadows the ongoing funding problems: it’s one thing to build the building, but an entirely different problem to sustain the equipment and staff to run the services.

Nevertheless, the buildings were built to meet the needs of the growing southeastern side of town. It was 20% finished in 1932 and it was reported in the newspapers that “work will not be halted for lack of funds.” The Alemany Hospital was only 50% complete in May 1932. Meanwhile, Dr. Geiger was already asking for more money to run the existing hospitals due to an increase in demand for services.

By January 1933 the City declared it couldn’t keep promises made in the 1928 hospital building plan because of over-spending on the “lavish” Public Health building at Civic Center and the new wards at San Francisco General Hospital. Just as today, there were problems with contractors and the City’s bidding process which probably made it impossible to have an efficient and streamlined building program. Also in January 1933, it was reported that Geiger was able to hire seven new doctors for the emergency hospital system and the local newspapers reported “the City should be proud of its emergency services...often called the best in the country.”

27
Finally, the Alemany Health Center, but not the Alemany Hospital, began operating in April 1933. The Alemany Hospital had funding issues even before it was fully opened for business. Dr. Geiger planned to open the Alemany Hospital with “Mrs. Frank Eickhoff, new Mission counselor” on May 19th. But the opening was postponed: the Board of Supervisors adopted a resolution protesting the removal of equipment from the Potrero Hospital which was to be used at the new Alemany Hospital. The Alemany Emergency Hospital was not officially opened until August, after funds were procured to fully equip it. On August 16th, this headline appeared in the newspaper: “Alemany Hospital Open Without Blare” with Acting Director of Health, Dr. Jacques Gray officiating, on August 16, 1933. One wonders about Geiger’s absence.

In December 6, 1933, Dr. Geiger is reporting a public health crisis due to a “depression load” of indigent sick; he complains that the Board of Supervisors won’t appropriate more funds. Geiger threatened to close Potrero Emergency hospital, wards at San Francisco Hospital, and possibly, the recently opened Alemany Hospital. On December 8, 1933, “peace reigned over the city hospital situation” after the Board of Supervisors approved emergency appropriations. The new Alemany Hospital stayed open, but the Potrero Hospital was closed: funding issues, shifts in population, and changes in land use along Third Street -- all certainly contributed to its closure.

During the same period of time, across town, painter Bernard Zakheim was organizing artists to win the first federal Public Works of Art Project (PWAP) grants to create the Coit Tower murals. PWAP was a predecessor of the WPA programs: Works Progress Administration/Work Projects Administration. Zakheim painted the Library mural at Coit Tower, and later in 1934, he painted the two murals at the Alemany Health Center building: Community Spirit and Growth. These murals were funded by PWAP, under the sponsorship of the State Emergency Relief Administration (SERA). See more about this in the Zakheim section below.

HISTORY: The Reputation and Demand For Services: 1935 - 1954

In 1935, a Saturday Evening Post article complains about New Deal experiments like the “voluntary hospitals”...which...”have been operating in the red for years” pointing to ongoing criticism of publicly funded health care.
By 1937, the emergency hospital system had its busiest year ever with 70,000 admissions. It is not surprising that another major hospital bond was passed that year. In addition, in 1937, the City’s Health Service System for employees was instituted.

In October 1938, the City was notified of its second PWA (federal Public Works Administration) grant for improving San Francisco Hospital, Laguna Honda Home for the Aged, and the Hassler Health Home in San Mateo County. The only previous PWA grant had been for schools which Charles H. Sawyer had been administering. Other outstanding applications for federal grants at the time included applications to improve utilities, 19th Avenue, Park Presidio Boulevard, and for street construction in general.

In 1940 there is still controversy about funding the New Deal. The State Relief Administration is critiqued in a piece titled “The Shocking Crime of Communism in State Relief.” But also in 1940, San Francisco’s emergency hospitals had treated 75,000 patients and San Francisco Hospital admissions were at a 22-year peak. In 1945, the six emergency hospitals had treated 72,758 patients. These numbers parallel the City’s increasing population.

Even as critics argued about the New Deal and federal funding for such projects, praise for San Francisco’s Emergency Hospital system continued. By 1948, after World War II, a feature article in the Chronicle entitled “Earl Blake’s Boys” reported that “San Francisco, alone among U.S. cities, has undertaken for the past 70 years the complete emergency care of its citizens.” Additionally, the Kaiser Hospital system, originally for company workers, had opened for public enrollment in 1945. Kaiser initiated its innovative Prepayment System which influenced later and broad developments in the American healthcare system.

In 1953, another Saturday Evening Post article features S.F.’s Emergency Hospitals, “often called the world’s finest...more than that, they’re free.” When asked about charging for these services, Dr. Butler, Chief Surgeon, has this to say: “talk of...charges has often come before, but usually quiets down when actual statistics are faced.”
In 1954 the American Medical Association commended the City of San Francisco at its convention for its “exemplary service” which was “provided free of charge by the citywide system.” Various magazines and newspapers published pieces in praise of the system.

That same year Edmund Butler died. Dr. Geiger is gone as well by this time -- he retired in 1952. And the Director of Public Health turned over responsibility for administering the emergency hospital system to the chief ambulance steward to save the City money.

HISTORY: Struggle to Stay Open & Changing Times: 1956 - 1978

In 1956, the emergency hospitals were threatened with closure and there was a massive campaign to keep them open. Letters and telegrams were written to Mayor George Christopher by hundreds of citizens, neighborhood improvement associations, and from the Director of Public Health himself, Dr. Ellis D. Sox. The constantly fluctuating funding situation probably had multiple reasons for existing. But the changes in administration at the Department of Public Health and the loss of Butler and Geiger’s advocacy would have been major contributing factors. In addition, San Francisco’s population peaked in 1950 and began dropping until well into the 1980s. This drop would have contributed to socio-economic changes in the City, including a change in the amount of taxes collected for the general fund. But it is easy to imagine how the demand for free emergency healthcare could never be fully met.

In 1963, the San Francisco City Employees Digest, declared that “San Francisco is unique among all the cities of the world in the type of service rendered by its Emergency Hospitals.” They are open “24 hours daily, 365 days a year, treating all who come in without regard for race, creed or financial status.” In 1964, another newspaper photo-feature “Night Emergency” shows the gritty nature of the work which is “provided by the city without charge.” An article in Time Magazine in April 1964 featured the system which was referred to as the most outstanding in the country. However, in the 1960s, there were also several newspaper articles which reported about the Alemany Emergency Hospital serving people from outside San Francisco county -- this was very controversial. Treating patients from other counties would have been an additional burden on the system.
In fact, before 1966, there were no emergency rooms in San Francisco hospitals, other than San Francisco General Hospital. Consider, also, that the 911 emergency call service was not in use in the United States until 1968. One of Geiger’s improvements to the system had been to equip the ambulances with radio-speaker systems so the drivers could both hear the calls and answer them. Previously they had to rely on the Police Call Boxes which were located around the city.

In 1969, a new Harbor Emergency Hospital was built on top of the brand-new Broadway Tunnel at Mason Street to replace the original Harbor Emergency Hospital which was being demolished as a result of the Rockefeller Embarcadero Center Project. This replacement for Harbor Emergency was open for only a few years: one must assume that sustainable funding for the operation of the facility was the issue. “City Charges for Emergency Care” is a featured newspaper article in 1969 indicating one solution to the continuing funding problems.

By 1974, “San Francisco differs from other cities...in that 50% of its emergency...care...is provided by the public sector...through the Public Health Department...which works in concert...with private ambulance companies and private hospitals.” This illustrates the expansion of emergency services at the private hospitals throughout the City. At the same time, the City’s population was continuing to drop.

HISTORY: The End of the System: 1978

1978 was a fateful and infamous year for San Francisco -- major events later that year would have overshadowed Dr. Silverman’s news. On July 14, 1978, Dr. Mervyn Silverman, the new Director of Public Health, announced the closing of the remaining Emergency Hospitals: Park, the recently rebuilt Harbor, and Alemany.

In response, Excelsior District neighbors, organized by the group COMO (Communities of the Outer Mission Organization), demonstrated against the closure of the Alemany Emergency Hospital. They occupied the buildings with “sit-ins” for over a month to protest its closure. Despite major citywide protests, by August 24, 1978, San Francisco’s Emergency Hospital System, as it was known, was abandoned.
In 1979, Roger Boas was the City’s Chief Administrative Officer. He was a “former auto dealer with no prior medical or administrative experience.” He was known as a “callous, ruthless individual who rode roughshod over all the agencies under his control” which included the Department of Public Health and the Emergency Hospital System.\(^7\)

An article titled “The Remaking of SF’s Ambulance Service” appeared in 1980 and described a more efficient system which is no longer free. It also refers to federal funds which were used for retraining staff, since “we just don’t have the money” in the Health Department’s budget.\(^8\)

The effects of Proposition 13 and the resulting forced budget cuts, in addition to the ongoing and destabilizing financial difficulties, would have been the “last straw” in the demise of San Francisco’s emergency hospital system. Additionally, increasing demands on the service, the competition from private health care institutions, and the growing number of private emergency rooms would have been contributing factors. Continued adaptations and changes in the field like the overall centralization of services, the Health Maintenance Organization Act of 1973\(^7\), and improvements in technology (like the 911 call center) would also have been factors. The continuing drop in the City’s population through 1980 certainly had an impact as this era drew to an end.

Today, affordable health care is a major economic and political issue almost everywhere. According to the Wikipedia article on General Hospital, 80% of their patient population today either receives publicly funded health insurance or is uninsured\(^8\) -- one assumes that this translates into a lot of free emergency care. The religious-based hospitals in town may also continue to underwrite a certain percentage of such services as well.

**HISTORY: The Hospitals and Major Historic Events**

There is no doubt as to the important work done at these facilities during times of emergency. The Park Emergency Hospital played a critical role during the disaster of April 18, 1906. The building was so damaged that the staff set up shop in tents and the nearby tunnel to Golden Gate Park where they attended to the injured as best they could.\(^8\) The handwritten ledgers in which the patients were logged on April 18th and the days following are a fascinating record of
the disaster.\textsuperscript{52} The Park Emergency Hospital today is a renovated and beautifully restored building and was designated San Francisco Landmark #201 in 1991.\textsuperscript{83)}

The Mission Emergency hospital played a major role during the Longshoreman’s Strike in 1934.\textsuperscript{84} Central Emergency treated a thousand patients on V-J (Victory in Japan) night, including “a score of women raped by men unnoticed in a city gone wild”\textsuperscript{85} during “a victory riot that left 11 dead, 1,000 injured and the city’s reputation besmirched.”\textsuperscript{86} The admirable work by the staff resulted in a formal commendation from Mayor Lapham on September 4, 1945, to all the personnel of the Emergency Hospital Service “for Loyalty and Devotion to Duty” and for their “great work in caring for the many victims during the V-J Day” celebration and rioting.\textsuperscript{87}
HISTORY: Sawyer & Geiger: Collaborators on the Alemany Project

Charles H. Sawyer, the City Architect who designed the Alemany Emergency Hospital and Health Center buildings and Dr. Jacob Geiger, Director of Public Health, shared a birthday which was an item of note in the San Francisco Chronicle in 1936. Another thing they shared was the Alemany Emergency Hospital and Health Center, a project on which they collaborated.

The bond which funded the Alemany project also funded the Civic Center Health Administration Building and updates at General Hospital -- Sawyer and Geiger worked with Mayor Rossi to make “best use” of those monies. Later, in 1937, Sawyer worked with Geiger on improvements at General and Laguna Honda hospitals -- projects which had received additional bond monies. Over the course of their careers they would have worked together on numerous projects.
If Sawyer was notable for his modest, hard-working ways, Geiger was the opposite. Geiger ran San Francisco’s Health Department from 1931 to 1952 and by the time he retired from the City in 1952, he was a celebrity and perhaps, one might say, the “Dr. Phil” of his day. He was a “character who was incredibly dedicated and also a thorn-in-the-side of everyone at the Board of Supervisors.” 91 He “was responsible for organizing San Francisco’s system of emergency hospitals.” 92 And his long tenure would have provided the continuity for it. He was Director of Public Health, from 1931-1952, a period of time during which the Alemany Hospital was built, and the emergency hospital system thrived.

Geiger began his public health career as the assistant director of laboratories for the State Board of Health from 1913-1916. By the end of his career, and after his second retirement (from the city of Oakland) 93 he had received 38 awards from 34 nations for his work in public health. 94 Geiger was featured in national magazines which described his heroic deeds and magnetic personality. “Mixing medicine with tricks of a side-show barker, Public Health Director Geiger keeps San Franciscans excited about staying fit. Not since the earthquake has anything so dynamic hit the “healthiest big city in the world.” He was credited with San Francisco having the lowest infant mortality rate in the United States 95 and with solving the national crises with botulism and listeria outbreaks. 96

He was known in the office for his use of green ink when signing orders or correspondence because green means go. The green memos have top priority and employees drop all other work when one of them shows up. 97 Weather permitting, he likes to spend mornings on the roof of the four-story Health Building, stripped to the waist, signing his office correspondence at a table set up especially for him. 98

HISTORY: Charles H. Sawyer, City Architect

Charles Haight Sawyer, was born in San Francisco on November 18, 1868 and died in Palo Alto on April 21, 1952. 99 He retired, as City Architect for San Francisco’s Bureau of Architecture, in 1938 after over thirty-four years of service to the City. 100 His uncle, Henry H. Haight was California’s tenth Governor and his grandfather, Fletcher M. Haight was appointed U.S. Judge for Southern California by Abraham Lincoln. 101
The 1896 City Directory lists Sawyer as a Produce Commission Merchant with an office on Front Street. One source reported that he “practiced architecture until 1895 when he entered the employ of the city.” But the disaster of 1906, which created a tremendous need for architects and builders, definitely provided the impetus for Sawyer to seek and accept a position with the City. He joined the Board of Public Works in 1907 as a draftsman and lived with his wife Georgia and daughter Carlotta at 2891 Vallejo Street. By the late 1920s he had moved to 1020 Union Street where he lived, until approximately 1940.

By 1914 his title with the City had become “Building Inspector, Bureau of Public Works” a position he held, in one form or another, through 1926. From 1927 through 1930, his title varied from “Head of Bureau of Architecture” to “Chief of the City’s Bureau of Architecture” to “Acting City Architect” to “Head of the City’s Architectural Bureau.”

In 1930, he won an increase in salary, from $500 to $600 per month, as the “acting city architect and superintendent of the bureau of architects.” This was noted in the newspapers at a time when the Great Depression was impacting the country. He had to sue the City to receive the raise and in 1931 his friends had to ask the Mayor to formally appoint him so he could take
the oath under the new City Charter. By 1931, Charles H. Sawyer was officially, technically, and finally the City Architect and Superintendent for the Bureau of Architecture for the City and County of San Francisco -- a position he held until 1938.

Between 1933-1937, in addition to planning and designing buildings, Sawyer was busy coordinating jobs with the Department of Public Works; collaborating with the Board of Education; surveying the school building projects; negotiating contract disputes and lawsuits about hiring practices and contracts; traveling to Sacramento to investigate charges related to faulty construction in the school buildings; and working with PWA (Public Works Administration) bond monies for both school and hospital buildings.

As early as 1909, and before he held the formal title, Sawyer was involved in professional architectural activities and served as Vice President of the San Francisco Architectural Club. Much later, in 1937, he attended the State Association of California Architects conference and here’s how he was described in a report of that event:

...the man who, to a more or less extent, weaves the destinies of San Francisco’s municipal architecture--particularly school buildings--Charles H. Sawyer, was just as backward about posing for this picture as he is modest and unassuming in his official duties at the City Hall. It is no easy job, the one which entitles Mr. Sawyer to the rank of City Architect, but one never hears him complain.
C.H. Sawyer survived the catastrophe of 1906 and learned his craft as a civil servant during the City’s rebuilding. Work, given the scope and amount of building completed in the city during this time, he must have taken great pride in. Please note, that he is not to be confused with Houghton Sawyer, an architect of reputation and of the same time period, who is known for his work on large, private residences, and well-appointed apartment buildings.\textsuperscript{117} C.H. Sawyer’s more mundane, but nonetheless significant work was on civic buildings intended to last and stand as testaments to the public good. His influence as City Architect extended through the Great Depression. And while San Francisco’s diverse economy may have been less impacted than other parts of the country by the Depression, these would have been difficult economic times.

In 1936, Sawyer, along with Joe Di Maggio, placed a New Year’s greeting in the newspaper: “Season’s Greetings - Charles H. Sawyer - City Architect.”\textsuperscript{118} But the following anecdote is more indicative of his character and attitude toward his work. There was a retirement party for Chief Examiner Maher and Charles H. Sawyer on November 30th, 1938 at which Mayor Rossi presided. Maher was feted by the Civil Service Commission, which presented him with a commemorative scroll and a radio for his 46 years of service. Sawyer, who had 34 years of service, “was too busy with current PWA (Public Works Administration) school and hospital building plans to do other than take congratulations...in stride. He said he would continue with his work until his successor (Dodge A. Riedy\textsuperscript{119}) becomes familiar with it.”\textsuperscript{120}

\textit{Sawyer’s School Buildings}

The San Francisco Public School’s Report of the Superintendent from 1931 describes the impressive building program: “In the past ten years the citizens of San Francisco have erected 49 new school buildings and recently the Board of Education approved plans for a fiftieth structure...the tremendous task of re-creating more than half of the physical properties of the...school system...the progress in erecting permanent, lasting educational structures has been greater than that made in any period of the previous seventy years.” 1930 had marked the 80th anniversary of the school district.\textsuperscript{121}
“Commenting on the San Francisco schools, Miss Alice Barrows of the Office of Education, Department of the Interior, said: ...the “buildings are not only well planned, they are beautiful as well. That is an innovation which I shall report to other cities that I visit...I only hope that many other cities will follow your example in bringing color into the school buildings...the housing of these schools into modern buildings within a period of twelve years is a remarkable achievement.””

San Francisco’s building program was “the envy of other cities...funds for this tremendous and unprecedented school construction program” were raised through a bond measure passed in 1924. But the building of new schools was halted in 1930. In December 1933 another bond measure was passed by popular demand to accommodate the growing population. This enabled the program to continue its removal of “wooden school buildings” and improve their earthquake resistance.
Sawyer’s Other Buildings

As City Architect, C.H. Sawyer would have overseen the school building program and been responsible for selecting the architects for these projects. He planned and designed some projects himself such as the chapel at General Hospital\(^{125}\), the fire house at 41st and Geary\(^{126}\), and the girls’ gymnasium at Polytechnic High School\(^{127}\). Presumably, he would have enjoyed these smaller-scale design projects as a break from his routine administrative duties.
HISTORY: The Alemany Buildings & Their Use Over Time

These two buildings provided emergency and first aid services beginning in 1933 and were operating, at full or limited capacity, through 1978. In 1943, during WWII, the Alemany Emergency Hospital was closed for a short period of time due to a shortage of doctors. In the mid 1950s there were pre-natal and maternity classes held at the Alemany Health Center (and several neighbors remember using them when they were young mothers.) They were threatened with closure in 1956 but appear to have continued operating until the summer of 1978.

By July 14, 1978, Alemany and the emergency system were again threatened with closure and a letter writing campaign, demonstrations, and sit-ins ensued. Neighbors, occupied the Alemany hospital for over a month and attempted to provide medical services with volunteers. They literally moved into the building and prepared meals, slept, and cleaned up after themselves. Despite their efforts, by August 24, 1978, the Emergency Hospital System was defunct.
However, the ambulance service was restored in 1978. It continued to run out of the Alemany Hospital building. Newspaper articles indicate that by May 1980, there was still an ambulance service running out of the Alemany Emergency Hospital building.

By 1982, the buildings were leased to St. Luke’s Hospital. Between 1992 - 2011 St. Mary’s Hospital ran a Senior Activities Center out of the Health Center building which several of our neighbors made use of. The Keystone Vocational Training School was also a tenant during this time. In 2011 St. Mary’s Hospital was notifying its clients that the program was closing due to lack of funding. The Alemany Emergency Hospital and Health Center buildings’ ownership was transferred in 2010 from the Department of Public Health to the City’s Real Estate Division. The buildings have been vacant since then.

In 2012 Garavaglia Architecture Inc. was hired by the Real Estate Division to do a study of the Bernard Zakheim murals inside the Health Center building. On 20 May 2015, the Historic Preservation Commission voted to add the Alemany Hospital and Health Center buildings, along with the Zakheim murals, to the Landmark Designation Work Program, and recommended further study.
HISTORY: Residents Still Remember

Many district residents, of varying ages, remember being treated at these buildings. The late Martha Chase attended senior services there for many years before she died just a few years ago. Emily Powell remembers, in 1938, having stitches there after being hit by a car on Mission Street; Betty Castagnola, in her 80s, remembers getting stitches there frequently since she was a “tomboy”; Lydia Marciano, in her 80s, took advantage of the baby wellness program when she was a young mother; Denise Ruggieri, in her 60s remembers being treated there as a child many times; Rita Gelini, in her 60s, distinctly remembers going there in 1960 for her immunization shot; Nancy Pannous, in her 60s, remembers taking her mother there on Thanksgiving Day to get stitches after she cut herself slicing the turkey; Nancy also remembers going to Harbor Emergency after having her toe stepped on at a high school dance; Delia Kutches, in her 90s, worked at the Alemany as a nurse. Joe Flanders, in his 80s, drove an ambulance out of Alemany and the other emergency hospitals until they closed. Valerie Reichert, in her 60s, remembers being treated at the Park Emergency as a very young child after swallowing nail polish remover. David Hooper, in his 60s, as a scrappy Mission kid, remembers being treated at several of the Emergency Hospitals during his youth.137

These buildings represent a time when people, lived, worked, went to school, shopped, and received first aid treatment near home. This was a time when people in the Outer Mission and Excelsior Districts rarely went downtown to shop because Mission Street was a vibrant commercial strip. Downtown was for special events and required white gloves for the ladies.

The Alemany Emergency Hospital and Health Center, as part of the citywide emergency hospital system, is part of San Francisco history. But, on a local level, these buildings played an important role in the lives of our neighbors as well. These emergency hospitals were effective, neighborhood first-aid centers which served the community well before we had innovative technologies like the 911 system138 and affordable health insurance plans.
HISTORY: Bernard Zakheim, Muralist

Bernard Baruch Zakheim was born in Warsaw, Poland on April 4, 1896 (some sources report 1898) and died on Thanksgiving Day, November 28th, 1985 at the Jewish Home for the Aged, in San Francisco. He was still painting up until two weeks before his death.

He was the youngest son from a wealthy family of Hasidic Jews who had an extremely difficult time convincing his mother that he had to be an artist. The compromise led to him learning upholstery and furniture design in addition to his study of fine arts at the Warsaw Academy. During World War I, he became politically active and interested in workers’ rights, joined the Polish Army in 1918, and was later captured and held for nine months in a German prisoner of war camp. After his release, he studied art at the Danzig Polytechnicum where he met and then married Eda Spiegelman, “a young dramatist,” with whom he eventually had two
daughters. They arrived in New York City in the fall of 1920, staying briefly before they traveled to San Francisco. A job in a furniture factory took them to Los Angeles where their first daughter was born in 1921. After three years, they returned to San Francisco where Zakheim studied at the School of Fine Arts, but he became disillusioned by the instruction there which ended his formal art education. In 1925, at age twenty-seven, he opened a custom furniture business and based it on the European Guild model. His company was the first in San Francisco to offer a 44-hour work week which included paid vacation time. Additionally, he “was the moving spirit in organizing the Yiddish Folkschule at 1057 Steiner Street” ... and became a “leader in the Yiddish movement in San Francisco.”

He “rented a small studio at the California School of Fine Arts” (the San Francisco Art Institute) for a short period, while trying to find a balance between his family life, business, and artwork. He sent sketches to Diego Rivera and, after invited, traveled to Mexico to study with him. Zakheim returned to San Francisco by June of 1930 with Rivera’s encouragement to put “something of his own soil, of his own people” into his art.
In 1931, he left his wife in San Francisco to run the furniture business while he went to Europe -- first Paris, then Florence -- to study art. He visited a small Hungarian town where he met an artist named Professor Gebauer who painted frescoes. While there and with Gebauer’s encouragement, Zakheim painted his first fresco titled *Jews in Poland*. Then early in 1932, while in Paris, he heard from home that his wife had lost the business due to the economic impact of the Great Depression. By this time a second daughter had been born. By October 1932 he had returned to San Francisco, but not before begging his European family to leave Poland. Zakheim lost 300 relatives in the Holocaust (which he paid tribute to in a later work, a sculpture titled *Monument to the Warsaw Ghetto Uprising*).

In 1933, three years after his meeting with Rivera, Zakheim won a commission to paint a mural at the new San Francisco Jewish Community Center. The JCC’s leaders were interested in reaching out to “a broader segment of society” with their programming and Zakheim had previously convinced the Board of the JCC to change its selection method from direct commission to open competition. Newspapers reported that Zakheim’s “vivid colored...
fresco...attracted much attention from the thousands of visitors who flocked through the building during the dedication week program.”\textsuperscript{156} It depicted a traditional Jewish wedding, and as Rivera had encouraged, featured “folkloric aspects of Jewish culture.”\textsuperscript{157} Zakheim “says this is the first\textsuperscript{158} [mural] in San Francisco to be exposed to the fog and rain.” It was reported that he painted in “the primitive...two dimensional style of the modern Mexican school,”\textsuperscript{159} a direct reference to Rivera’s influence. This fresco was moved to the third floor stairwell when the Jewish Community Center was rebuilt: it was reinstalled and rededicated in 2004 where it is currently open to the public. Zakheim also designed the mosaic fountain in the patio area which we believe was destroyed during the JCC’s reconstruction.\textsuperscript{160}
“The hand of the Mexican master (Diego Rivera) is especially evident in the extraordinary Coit Tower murals (of 1934). The tower had just been opened to the public when San Francisco artists led by Bernard Zakheim demanded that they be put to work in the newly created PWAP.”

The Public Works of Art Project, or PWAP, was the first of such programs and a predecessor to the WPA. It had a “very successful six-month life”...paying 4,000 artists to produce almost 15,000 works of art” and led to the other “alphabet soup” of artists programs commonly known as WPA. The grants were intended to be based on merit, not on poverty. And Harry Hopkins’s (FDR’s emergency relief administrator) declaration that artists had “to eat just like other people” certainly influenced the decision to create such programs.

“Twenty-five artists, and nineteen assistants covered 3691 square feet of wall space...downstairs...two sides of the staircase, the second floor walls, and a small room upstairs...in all there are 31 frescoes and six oil lunettes in the tower.”
Rivera’s influence on the Coit Tower artists was “overwhelming” with a “decorative and optimistic” style that most Americans accepted, while ignoring his Marxist politics. Much has been written about the controversy of the four Coit Tower murals which prevented the Tower from opening to the public in April 1934. Zakheim, Victor Arnautoff, Clifford Wight (all of whom had worked with Rivera) and John Langley Howard “scandalized the City by including left-wing political commentary” in their murals. This was happening, of course, at a time of great economic hardship during the Great Depression and just before the violence and upheaval of the Longshoremen’s strike, protest, and riots which were to come later that summer. The building and murals were finally opened to the public in October 1934. (And today, these murals have been beautifully restored and are open to the public.)

No doubt that Zakheim’s previous experience working with frescoes helped him win the Coit Tower job. In fact, he was one of the few artists who had experience painting frescoes. Zakheim’s mural, painted in 1934, is titled Library. It featured a portrait of artist John Langley Howard reaching for a book by Karl Marx titled Das Kapital. Heart’s Examiner featured a newspaper article with a “doctored” photo of Zakheim’s mural, adding a hammer and sickle encircled by the slogan “Workers of the World Unite” over which a caption read “Here is the painting in the Coit Memorial Tower that has caused a bitter dispute.” Zakheim’s response was “I have painted no hammer and sickle over my fresco or anywhere else...and the directors of the Public Works of Art Project have never asked me to change any part of my mural.” This was true. However, during the Coit Tower controversy, Fleishhacker had, indeed, asked him to edit his mural. And Zakheim’s angry refusal, according to an interview with Lewis Ferbache in 1964, was “I am a hammer and sickle painter.”

Zakheim’s interest in Communism can be found in his early years in Los Angeles. In the late 1920s he was deeply influenced by his friendship with Kenneth Rexroth who was engaging in Communist debates and organizing the Montgomery Block artists and writers. Together Zakheim and Rexroth assembled “the most coherent leftist group of artists and writers the city had ever seen.” Zakheim’s admiration of the Soviet Union can be traced into the 1950s.
Zakheim’s Alemany Health Center Murals

During the period following the completion of the Public Works of Art Program (PWAP), Zakheim was commissioned, in 1934, under the sponsorship of the SERA (State Emergency Relief Administration) to execute two frescoes in the Alemany Health Center, for the San Francisco Department of Public Health. Called Community Spirit and Growth, the “excellence of these murals was instrumental in an award to him of subsequent decorations in the University of California Hospital.” Since the official opening of the Alemany Hospital and Health Center was in August 1933, the murals must have been completed while the center was in operation.

Here is a description of those murals, “which have been called a very beautiful piece of work” by Phyllis Wrightson (Zakheim’s assistant, who later became his second wife):

These frescoes were painted as decorations in the waiting room of San Francisco’s Health Center. It is a small building in Mission style, of a homelike, rather cozy character, informally furnished and cheered with a large fireplace whose wide chimney extends in sloping lines up to the high ceiling. This chimney area is broken by the mezzanine balcony that crosses one side of the room, dividing this large chimney shape horizontally. In this space the frescoes have been painted.

The portion below the balcony is adapted in color and literary content to the room and its uses. It is entitled “Birth” (sic “Growth”) and is an arrangement of symbolic figures in an elliptical pattern against a background of the slender silvery trunks of young fig trees, an ancient symbol of fertility.

At the right two lovers kneel side by side, a golden skinned young man and a girl draped in blue. The central figure is that of a woman with uplifted arms symbolizing the agony of birth. Before her a figure in white representing the functions of the nurse helps a young plant part its way out of the womb of the earth. Another couple at the left represent parenthood. The woman holds a little blossoming plant at which both look with concern and pride.

The golden color of some of the flesh, the red of the earth and the green of the foliage all repeat the coloring of the tile, the wicker furniture and the green metal railings of the room. The upper section of the fresco continues the trees seen below, their crown of leaves showing between bars of the balcony rail. Above the trees is a composite scene of the neighborhood, zigzagging up to Mount Davidson and its cross against the sky. Below is a group of houses so characteristic of San Francisco. Next to them is a row of the newer ‘pastry like’ contractor’s bungalows.
From the bottom of the scene Alemany Boulevard sweeps up past the little Health Center and its adjoining houses, and the massive Balboa High School.

At the lower right is a series of backyards animated with lines of washing and a vacant lot used by schoolboys as a baseball field. The latter was introduced by the artist to point out the dire need for a children’s playground in this district.\textsuperscript{177}
The mural on the upper floor is titled *Community Spirit*. This mural is damaged but in relatively good condition. The mural on the first floor, *Growth*, as described by Wrightson, symbolically depicts birth, growth, and parenthood: we have not found any photographs or drawings depicting the entire mural. It was painted over in the mid 1970s -- perhaps because either the theme or the imagery was considered offensive.

We do know that, in a letter dated 17 February 1976, Zakheim wrote to Herb Caen about the Alemany mural: “Again they amputeded [sic] a part of my soul. This time at the Alemany Baby Health Center...they painted over a half of my frescoe [sic], and this is the third time in a row.” On 29 March 1976, Caen mentions Zakheim “frothing with anger” over the Alemany mural. He quotes Zakheim: “An insult! ... Besides, they’ve covered over the most important part of all -- the fertility rites!”

In 2010, Zakheim’s son, Nathan, inspected the “Community Spirit” mural and discovered and uncovered the small portion of the “Growth” mural that is visible today. No work has been done on either mural since then. The buildings and murals have not been open to the public since 2011.

**Zakheim’s UCSF Murals**

In 1935-36 Zakheim, again with SERA funding, began two murals in UCSF’s Cole Hall (the University of California, Medical School.) It has been suggested that his work at the Alemany Health Center helped him win this job at UCSF. Titled *Superstitious Medicine* and *Rational Medicine*, they were moved, in 1966, to their present location in the Health Sciences Building West at UCSF.
The Toland Hall amphitheater murals, completed in 1938, became a four year, ten panel project commissioned by Dr. Isabella Perry, after seeing the Alemany murals, and then spearheaded by Dr. Chauncey Leake. They were partially funded by the WPA. This series of murals is titled the *History of Medicine in California* and they fill the walls of the lecture hall. These murals were also objected to and censored: in 1948 they were covered by wallpaper because of faculty complaints that they were distracting to students. The fact that the murals had attracted thousands of visitors to the school may have been a contributing factor in the decision to cover them. But a change in administration was probably the decisive factor. Despite Zakheim’s protests they were covered over. The wallpaper was finally removed during a general renovation in 1961. Currently, they are open to the public for special events.
Zakheim's Later Murals

Zakheim planned to do a four panel mural, in 1937, at the Union Recreation Center¹⁸³ at 32 Clay Street, titled History of the San Francisco Waterfront. The building is now gone and there is good evidence the murals were never completed.¹⁸⁴

His last mural projects were in two post offices in Texas. The first was called, New and Old Methods of Transportation, 1938, in Mineola, Texas. The second, in Rusk, Texas, was titled Agriculture and Industry, 1939.

¹⁸³ Great Depression FWP Documentation.

New and Old Methods of Transportation, 1938, Mineola (Texas) Post Office, [http://www.texasescapes.com/TexasArt/Mineola-Texas-Post-Office-Mural.htm] Photo courtesy Mineola Economic Development

Agriculture and Industry, 1939, Rusk (Texas) Post Office
Zakheim’s Later Years

In the 1940’s Zakheim moved to an apple farm in Sebastopol, California which he called Farm Arts where he lived for over 40 years. He continued painting there and began sculpting in wood and granite. (One of his wooden sculptures, part of a recent bequest, is at UCSF.) He visited Poland again in 1961 where he was invited by the Jewish Social and Cultural Society to paint a mural which would be his last. He titled it Songs of the Polish Jews. At that time he said: “Fresco is my main interest...wall painting in the fresh wet cement is really the idiom of drama. For the artist to have a wall to paint fresco is a rare thing.”

Zakheim was awarded a Certificate of Honor “in appreciative public recognition of distinction and merit” by the San Francisco Board of Supervisors in July 1972. He had a retrospective exhibition of his paintings at the Judah L. Magnes Memorial Museum in Berkeley in 1973 to celebrate his 75th [sic] birthday and continued to make art until the end of his life. He died at the Jewish Home for the Aged in San Francisco, in 1985, where he had moved, and which is just a few blocks from the Alemany Health Center and the murals he painted there.

The Sonoma County Museum had a memorial exhibition of his work in 1986. His work is in the collections of the San Francisco Museum of Modern Art, Brandeis University, and the Jewish Historical Institute in Warsaw, Poland. In 2001, during the conservation and move of Zakheim’s mural at the Jewish Community Center, San Francisco Chronicle’s art critic Allan Temko said of him: “he wasn’t a Michelangelo...but his work is good, for what it is, and worth saving.”

Zakheim’s murals at the Alemany Health Center, celebrate community and depict the neighborhood, in a building which, at one time, offered free health service to people twenty-four hours a day, every day. These are values which perfectly align with Zakheim’s political views. As such, the Alemany Hospital building is a fine setting for Zakheim’s allegorical imagery. We believe that the building and the murals should be saved and restored. Bernard Zakheim was an important artist who worked during a significant time in San Francisco’s history. His legacy should be preserved, not just for the sake of the Excelsior District, but for the benefit of the City at large.
The Neighborhood Description

The Excelsior District and Outer Mission in general do not have many architecturally significant buildings. The Balboa High School, the San Miguel School, the Geneva Office Building, and the telephone building are the most notable buildings in the district and are all nearby. But the bulk of the district is made up of modest, single-family, working class homes. The shopping area, one block away on Mission Street, is made up of many single and two story buildings. The older, more substantial markets, banks, and theaters generally have been converted to other uses.
The Alemany Emergency Hospital and Health Center buildings sit directly across the street from one of the distinctive Art Deco-style telephone buildings -- together they anchor the intersection of Alemany Boulevard and Onondaga Avenue. The telephone building is a three story, brick and stone, commercial building and houses communications equipment for AT&T. It is the largest, significant building in the immediate neighborhood.
Immediately next door at 25 Onondaga is a one-story, stucco building which has been undergoing renovations for the past five years. [top] There is a one story U.S. Post Office building with a stucco exterior, at 15 Onondaga, built in the 1950s. [middle] The one-story Croatian American Cultural Center is kitty-corner from the hospital. [bottom] Photos courtesy Google Street View, 2015.
Further down the block, one can see in the distance, the Balboa High School.

View from the Health Center looking northwest toward the Croatian American building.
Acknowledgements
Stephanie Cajina, Executive Director of the Excelsior Action Group (EAG); Linda Litehiser, founder of Friends & Advocates of Crocker-Amazon & The Excelsior (FACE); and Jorge Palafox, President of the Cayuga Improvement Association (CIA); are in favor of this landmarking effort.

District 11 Supervisor John Avalos supports the effort to landmark the Zakheim murals and is interested in discussing the inclusion of the buildings in this application. We continue to solicit support from other neighborhood and district organizations and expect this list of advocates to grow.

Many thanks to William Kostura, Gary A. Goss, Richard Rothman, Joe Flanders, Jonathan Lammers, Rich Ayres, Catherine Powell, and Kathy Borgogno for their help with this project.

Lisa Dunseth, 6 November 2015
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2 “Emergency Hospital Service,” San Francisco City Employees Digest, September 1963, p.6. VF-Health Department-Paramedic Division; San Francisco History Center, San Francisco Public Library

3 Vertical File-Emergency Hospitals- “Compiled for the 1954 Convention of the American Medical Association”, San Francisco History Center, San Francisco Public Library

4 “S.F. Emergency Hospital” by George Dusheck, San Francisco Chronicle, 17 December 1946


11 San Francisco Department of Public Health Records Finding Aid, SFH 63, San Francisco History Center, San Francisco Public Library.

12 The Establishment of San Francisco’s Municipal Ambulance Service by James Green, 1990, p.4 [VF-Health Dept.-Paramedic Division-San Francisco History Center, San Francisco Public Library]


15 City Charges for Emergency Care,” San Francisco Chronicle, 29 September 1969

16 “The Remaking of SF’s Ambulance Service,” San Francisco Today, 3 September 1980 [VF-SF Heath Dept.-Paramedics Division, San Francisco History Center, San Francisco Public Library]

17 “The Remaking of SF’s Ambulance Service,” San Francisco Today, 3 September 1980 [VF-SF Heath Dept.-Paramedics Division, San Francisco History Center, San Francisco Public Library]

18 The History of The Surgical Service at San Francisco General Hospital by William Schecter, Robert Lim, George Sheldon, Norman Christensen, William Blaisdell, 2007, p.18-19

19 San Francisco City Directories, 1933-40, San Francisco Public Library

20 San Francisco Chronicle, 20 February 1916

21 The History of The Surgical Service at San Francisco General Hospital by William Schecter, Robert Lim, George Sheldon, Norman Christensen, William Blaisdell, 2007, p.19

22 San Francisco Chronicle, 1 March 1920
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34 Architect & Engineer, January 1930, p. 111

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51 San Francisco Ballot Propositions Database, 1937. Government Information Center, San Francisco Public Library.


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62 Vertical File-Emergency Hospitals, San Francisco History Center, San Francisco Public Library

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83 The Landmarks: The Very Old Hospital In Golden Gate Park by Alex Bevk, 6January2014 http://sf.curbed.com/archives/2014/01/06/the_landmarks_the_very_old_hospital_in_golden_gate_park.php

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103 San Francisco City Directory, 1907, AncestryLibrary.com; 1910 United States Federal Census, AncestryLibrary.com

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110 “Architect Sawyer Lays Lash on Education Board,” San Francisco Chronicle, 22 August 1934, p. 3

111 “Speed urged In Survey of City’s Schools,” San Francisco Chronicle, 25 August 1933, p. 1

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119 “Temporary City Architect Appointed,” San Francisco Chronicle, 2 December 1938, p. 7

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125 William Kostura, Architectural Historian, personal research

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127 Pacific Constructor, 17 August 1935, p. 17; Sanborn Fire Insurance Map, mid-1990s, San Francisco Property Information Map

128 Examiner News Clippings, San Francisco-Health Centers-Alemany Health Center, “City Hospitals Face Closing” 13 July 1943, San Francisco History Center, San Francisco Public Library

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131 “A Century of Caring,” from Emergency Medicine: The Next Hundred Years, VH-SF-Health Dept.-Paramedic Division, San Francisco History Center, San Francisco Public Library


133 “Seven Booked In Beatings of Two Paramedics In SF”, Santa Ana Grange County Evening Register, 3May1980, NewspaperARCHIVER Library Edition

134 Final Report, Survey For Asbestos-Containing Materials, Saint Mary's Hospital (Senior Activity Center) (CAM NO. 890) February 1996, CCSF, Dept. of Public Health, p. 1 (1.1) ; Art and Architecture-San Francisco [website] by Cindy Casey, Letter from St. Mary's Medical Center/Adult Day Health Care to clients, 22August2011

135 San Francisco Property Information Map, San Francisco Planning Department, CCSF


137 Anecdotes from conversations between the author and various neighbors, spring and summer of 2015.


139 Note regarding erroneous birthdate, see Painting on the Left by Anthony W. Lee, U. of California Press, 1999, p. 239

140 Obituary, San Francisco Chronicle, 30November1985, p. 15 and Finding Aid to Bernard Zakheim Papers, Archives of American Art

141 “Zakheim Exhibit to Open at Sonoma County Museum,” California Historical Courier, Feb/March 1986, VF-Artist's File, Art, Music, & Recreation Dept. San Francisco Public Library

142 “Something of His Own Soil,” by M. Elizabeth Boone, American Jewish History; June 2002, p. 123


144 California Art Research, First Series, Volume 20, Part 2, Abstract from WPA Project 2874, O.P. 65-3-3632, 1937, p.49

145 California Art Research, First Series, Volume 20, Part 2, Abstract from WPA Project 2874, O.P. 65-3-3632, 1937, p.53

146 California Art Research, First Series, Volume 20, Part 2, Abstract from WPA Project 2874, O.P. 65-3-3632, 1937, p.54

147 California Art Research, First Series, Volume 20, Part 2, Abstract from WPA Project 2874, O.P. 65-3-3632, 1937, p.50


149 We do not have specific dates for Zakheim’s visit to Mexico, only that he returned to San Francisco by June 1931. There is no evidence that Zakheim learned the art of fresco from Rivera only that he “studied” with him. In 1926, “students and teachers were flocking to the shrine of Diego Rivera” in Mexico (“Artists Carve Own Frames,” San Francisco Chronicle, November 28, 1926, p. 34.) It is unlikely, since he was no longer affiliated with the California School of Fine Arts (San Francisco Art Institute) that he would have been part of the contingent which visited the famous Rivera in Mexico in the late 1920s. Possibly their visit inspired Zakheim's trip to Mexico. Timothy Pflueger brought Rivera to San Francisco to paint a mural at The City Club in 1931. It is unlikely that Zakheim would have been included in this project, either socially or officially. It is possible that Zakheim would have spent time with Rivera while he was in San Francisco but this has not been documented.

150 California Art Research, First Series, Volume 20, Part 2, Abstract from WPA Project 2874, O.P. 65-3-3632, 1937, p.56. This source suggests that Zakheim learned how to create frescoes and created his first fresco under the guidance of Gebauer.

151 California Art Research, First Series, Volume 20, Part 2, Abstract from WPA Project 2874, O.P. 65-3-3632, 1937, p.57

152 “Remind the World” by Walter Blum, San Francisco Chronicle, 8December1968
153 “Memorial to the Six Million-Zakheim Warsaw Ghetto Memorial Monument,” Mount Sinai Memorial Park pamphlet, VF-Biography, San Francisco History Center, San Francisco Public Library.


158 The first frescoes to be painted in San Francisco were probably done by Domenico Tojetti in the 1880s, Painting on the Left by Anthony W. Lee, U. of California Press, 1999, p. 246.


161 New Deal Art, California, De Saisset Art Gallery and Museum, University of Santa Clara, c1976, p. 72.

162 New Deal Art, California, De Saisset Art Gallery and Museum, University of Santa Clara, c1976, p. 69.


165 New Deal Art, California, De Saisset Art Gallery and Museum, University of Santa Clara, c1976, p. 72.

166 New Deal Art, California, De Saisset Art Gallery and Museum, University of Santa Clara, c1976, p. 75.


174 History of Medicine in California Articulated in Frescoes by Robert S. Sherins, in celebration of the UCSF, School of Medicine Sesquicentennial, [2014].


176 We believe that Wrightson misspeaks here by referring to the “Growth” mural as “Birth.” “Growth” is described and referred to in California Art Research, First Series, Volume 20, Part 2,1937, p.81, just one paragraph above Wrightson’s quote. It is also referred to a “Growth” in the later document, A Survey of Art Work by Martin Snipper, Art Commission, CCSF, 1953, #325. Perhaps Zakheim and Wrightson disagreed on the title? That remains a mystery. Just as the mural itself is a mystery since it remains covered and we have yet to locate photographs of it.


179 This Week: Zakheim: The Art of Prophetic Justice, KQED video, 2010, [https://www.youtube.com/watch?v=vmMqg5w5-fo]

180 Brought To Light, Recent Acquisition: Bernard Zakheim Collection, UCSF blog, 24February2015

181 Examiner Newspaper Clippings, Zakheim, Bernard Baruch. Artist. “U.C. Medical School Mural is Covered,” San Francisco Chronicle, 5January1948, San Francisco History Center, San Francisco Public Library

182 Examiner Newspaper Clippings, Zakheim, Bernard Baruch. Artist. “Art From Under the Wallpaper” 20November1962, San Francisco History Center, San Francisco Public Library

183 Voice of Federation, 10September1936 and 19November1936, Labor Archives and Research Center, San Francisco State University


185 Mount Sinai Memorial Park, pamphlet, VF-Biography, San Francisco History Center, San Francisco Public Library

186 Examiner Newspaper Clippings, Zakheim, Bernard Baruch. Artist. “Artist Finds Room for a Fresco on an Empty Wall in Poland, 5August1962, San Francisco History Center, San Francisco Public Library


188 Obituary, San Francisco Chronicle, 30November1985, p.15

189 “Zakheim Exhibit to Open at Sonoma County Museum,” California Historical Courier, Feb/March 1986, VF-Artist’s File, Art, Music, & Recreation Dept. San Francisco Public Library

190 “Zakheim Exhibit to Open at Sonoma County Museum,” California Historical Courier, Feb/March 1986, VF-Artist’s File, Art, Music, & Recreation Dept. San Francisco Public Library