



Beyond a Front Desk

The Residential Hotel as Home



2005

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I ntroduction

In late 1951, Vito Distasio arrived in Winnipeg like so many other immigrants before him, at the passenger train station on Higgins Avenue. In the mid-afternoon, on a cool fall day, he disembarked from the train and walked to the rotunda to collect the few possessions he had brought with him on his long journey from the now famous Pier 21 in Halifax. Walking out the front doors, and into a remarkably blue prairie sky, he turned 360 degrees to admire his new found home. Seeing Winnipeg for the first time he was immediately drawn to the east where the majestic Royal Alexander Hotel stood with its opulent and ornate exterior commanding a long gaze of wonderment and appreciation. Deciding to gather up his baggage

and find accommodation, he walked a short distance to Main Street, a large and bustling six-lane thoroughfare that contained the heart of the city's commercial and financial operations. At the corner of Higgins and Main, signs adorned many buildings offering help to immigrants and the promise of jobs and cheap accommodation. Unable to read English, he simply walked across the street and into the lobby of the Savoy Hotel. The Savoy was a small hotel offering rooms at \$5.00 per month.

Vito would stay at that hotel for nearly five years as he found employment and raised money to buy a house and bring his wife from Italy. The story of Vito is not unlike that of many other immigrants,

who for the last one hundred plus years, arrived at similar train stations, in countless cities, looking for two critical things, an affordable place to stay and work. Since 1951 the quality and reputation of these types of hotels has changed. Today, immigrants seldom arrive into new cities on trains and they seldom stay in hotels. But more important, the hotels themselves have changed dramatically. Most have become "the address of last hope" for many persons unable to find anywhere to live that is

affordable. In city after city, the stock of old central hotels has not only continued on a downward spiral, but their placement on the rung of housing options remains precariously close to the bottom and is often spoken in the same breath as homelessness. In a small way, this report traces the SRO hotels, from places of hope to that of seeing the doors locked on one hotel that has fallen on hard times, and the importance of helping people by providing a warm, safe place to live.



1951 Portage Avenue & Main Street
Tribune Archives, University of Manitoba



Overview of the Single Room Occupancy Hotel

In a room typically measuring 10 feet by 10 feet, upwards of 1000 persons live in what are known as single room occupancy hotels (SROs). An SRO is simply a traditional hotel that has, over the last century, become a form of affordable rental housing, while also retaining base level hotel services. In Winnipeg, the majority of SROs are located in the downtown, and in particular, are clustered along Main Street. Most persons living in these hotels do so on a month-to-month basis, and pay an average of \$250 for a sparsely furnished room that may contain a bureau, bed, a few chairs and not much else. In most cases, bathroom facilities are located down the hall. Kitchen facilities are limited to a hot plate or a small bar fridge in the room. The bulk of hotels along Main Street were built in the early 1900s and thus their size and condition reflects a colorful history that mirrors the changes to the rest of the area.

Regardless of the ill perceptions or short comings of SROs, they serve as a vital rung in the available housing stock, and without anything to replace them, many people would fall into crisis were the hotels to disappear. This research is mindful that these are places people call home. They have an embedded sense of community, and many who live in them, are bound to them beyond reasons this report will sufficiently recognize.

As will be outlined, this research is about trying to understand the dynamics of hotel life. It is about listening to the thoughts and feelings of those living in the various rooms that stretch throughout a historic area.

By no means does this report intend to classify these places nor rate their quality. More so, the intention is to chronicle the rise of this form of shelter and perhaps make some modest suggestions and comments on how best to manage what still exists in a practical and dignified manner so as to ensure those 1000 persons have access to the best possible housing at an affordable level.

We do so within the context that, during the year writing this report, one hotel was closed, then reopened and eventually was shut down again. The closure of this one place is a poignant reminder that not all hotels, nor their management, hold the interest of residents near. More so, this closure signifies a divide that exists within the SRO environment and that good places are operated well by those that care, while the poorly operated are those places that feed off misery and exploit too many who are simply unaware that better places exists.



Research Strategy

This report is based on a comprehensive analysis of Winnipeg's single room occupancy hotels. In developing and writing the report, an emphasis was placed on ensuring that the voices of SRO residents were heard and that they would identify and characterize their own realities. This was accomplished in a number of ways. First, a case study of Winnipeg hotels was undertaken, with field research including not only surveys, but also building trust among local residents. During the course of this fieldwork, researchers were able to become comfortable with the area and its people, while also developing a sense of the issues affecting hotel residents, owners and the surrounding community. Observations were drawn from a diverse set of downtown hotels that encompassed a region stretching from Broadway Boulevard on the south to Selkirk Avenue on the north. In total, eighty-one surveys were completed in nearly fifteen hotels, offering broad and contrasting perspectives on life in an SRO.

The research was approached from three perspectives - the people who live in their rooms, the physical characteristics of the hotels (the bars, restaurants and common spaces), and the surrounding community. The goal was to determine whether SROs are an important form of affordable shelter. It was also our intent to determine whether practical solutions exist that could contribute to creating the best possible accommodation in an affordable and healthful manner.



The people who shared their thoughts and emotions own this work. In their words, which are sometime fragile, we tried in earnest to ensure that a dignified and respectful portrait emerged. Yet, in some instances, there is a much more darker side to life in the hotel, one in which many live in fear, loneliness or desperation. Along the way, and in our many discussions, a few persons passed away. It is in their memory that this report is framed. Although many live their lives in hotels in anonymity, we hope our words will merge to become a symbol of the potentialities of place and the ability of those in power to creatively rethink ways to house those persons most in need. At the conclusion of the report, we offer thought on what might work to create an environment that reflects the will and ideals of those persons presently residing in 10' by 10' rooms.



Typical SRO Room



Governance Structure of the Research

This research was guided by the support of community organizations, businesses, individuals and local government departments. Two important committees were formed to ensure that the study was representative of the views of a diverse range of persons. First, an advisory group was assembled to develop the framework for the study and to explore thoughts and perspectives on the current SRO environment. The group met on several occasions to develop the research questions and structure of the report. Subsequent to these meetings, the following questions were advanced to direct the study:

- What are the general characteristics of SRO tenants?
- What are the characteristics of the hotels and surrounding community?
- Why do persons select this form of housing over others?
- Does a sense of community exist within the SRO environment?
- What effects do SROs have on the surrounding community?
- What is the regulatory environment that governs the operation of SROs and are there viable options for improving this form of shelter?
- What would be the outcome of closing SROs or what options and alternative exist elsewhere?



Following the initial application for funding and the beginning of the research, a second and more focused steering committee was assembled. The steering committee consisted of community organizations, business groups, and SRO residents. The committee met on five occasions to not only guide the research process but ensure that the interests of all concerned were addressed.

Members of the Advisory Group represented the following:

- City of Winnipeg
- The Salvation Army
- Winnipeg Regional Health Authority
- Winnipeg Police Department
- Exchange District Biz
- Siloam Mission
- Manitoba Hotel Association
- Manitoba Liquor Control Commission
- The Downtown Biz
- The Institute of Urban Studies

Members of the Steering Committee represented the following:

- The Bell Hotel
- The Main Street Project
- The Salvation Army
- Siloam Mission
- The Winnipeg Police Department
- Community Researchers
- The Institute of Urban Studies
- The Manitoba Métis Federation



The Research Design

This project is a community-based research effort, with direction originating from both the advisory and steering committees. The result was a community driven initiative that was able to examine the research problem from a number of perspectives that included a literature review, case studies, a site visit to Los Angeles and the conducting of personal interviews with Winnipeg SRO residents. Part of the foundation for this study was based on the fieldwork of a local police officer that initiated the discussion with stakeholders. See page 39 for his thoughts.

To provide a context for the research, a study of the historical development of the North American SRO was undertaken. This included a focus on Los Angeles and Vancouver. Both cities provided excellent examples of current practices that benefit residents. In particular, Los Angeles is notable for their establishment and management of non-profit SROs, while Vancouver is recognized for their newly instituted by-laws and tenancy rights that serve to protect the residents of SROs. The benefit of Vancouver's regulatory environment was examined through personal correspondence, a review of the literature, and research on the Internet. A research trip to Los Angeles was carried out to further examine the benefits of non-profit SROs and the collaborative work by the local social service agencies.

In total, eighty-one surveys were carried out, with slightly over half completed in the accommodations of the residents. The remainder were conducted through meetings at the Siloam Mission. Two SRO residents assisted in the preparation of the surveys and also helped guide the interview processes.

The survey of residents contained seventeen open-ended questions that allowed residents to discuss whatever was important to them. In the thirty multiple-choice questions, there was extra space to jot down comments that residents were making. Some responses were brief, with only two or three comments, but there were others whose comments stretched on for several pages, providing great wisdom and practical ideas. We have tried to keep intact as much as possible of that wisdom in the sections that follow.

The balance of the surveys was conducted at various times of the week in an attempt to capture a range of atmospheres. One researcher accompanied a member of the Winnipeg Police and sought permission to carry out the interviews from hotel owners/managers on duty at the time of the site visit. Once past the security doors (only found in a portion of the SROs) the two were able to walk freely, and randomly approached SRO residents to undertake the interviews. Once they explained their intentions and permission to survey was granted, they were eagerly invited into the rooms and residents offered a display of great hospitality. An average of five hours was spent at each of eight downtown hotels where forty surveys were completed.



The outcome of the surveys was a portrait of life in a hotel, that is simply too complex and varied to be accurately characterized in the pages this report. It is the feelings of the researchers that this report merely portrays one perspective drawn during a brief foray into a segment of the housing market that receives little attention.

Therefore, the surveys, comments and thoughts represent those eighty-one persons who took time to talk about a life often misread by most and rarely understood beyond the “skid row” stereotype.

Our strategy, although intended to capture an accurate vision of the SRO, was successful in the sense that we were able to garner some insight and hopefully make meaningful recommendations that represent those voices both heard in this report and those who were unable to speak to us in words but whose actions are not forgotten in the countless hours spent as visitors in both Winnipeg and Los Angeles.

This report belongs to them.





The Historical Development of the North American SRO Hotel

The majority of North American SROs were built in the late 1800s and early 1900s and tended to be clustered around a city's central train station. The relationship between the location of these hotels and the train station is important given that train travel was the most dominant mode of transportation at the time. The result was that new arrivals into a given city would disembark from a station and seek nearby and affordable accommodation. Tracing the history of SROs is complex but what is clear is that they reached their peak during this era and have steadily declined in quality and stature throughout the last century.

The period of decline for SROs coincided with three prominent factors: the sustained decentralization of the North American City; the Depression (1929); and World War II. The first signs of decentralization were observed around 1924 when people, commerce and industry fled central locations for outlying districts. Problems linked with this era included the decline of downtown retail sales and property values, bankruptcies, and foreclosures. During the height of the Depression, construction came to a standstill, and rents fell by as much as 30 percent in some cities. It was these events that contributed to significant urban blight in areas once regarded as flourishing. This era also devastated hotel businesses, as they were labour intensive and required high occupancy rates to break even during the best of times. ¹

After WWII, a generation of hotel owners had literally died out while others sold their hotels to invest in the burgeoning suburban real estate market. The rapid growth of the suburbs overshadowed the investment into downtown.

This movement of people towards the suburbs involved the middle and upper classes leaving behind the lower class, often ethnic and racial minorities. ²

As suburban living grew in popularity so too did the reliance on the automobile. With new highways not converging in the central business districts to the same extent as the railways had, the downtown's role as a primary node or transportation hub diminished. Subsequently, freeway construction which linked the suburbs to the inner city cut a swath through neighbourhoods that stood in the way, while also leveling lower-cost hotels. Originally designed to revive downtown, freeway construction further accelerated the decentralization process and gave suburban residents easy access in, but also quick access out at the end of the workday. Again, more and more space was devoted to the needs of traffic and parking than to trade. ³

From 1945 to 1970, downtown lost much of its competitive edge and it was, increasingly, not the place where those with money came to shop or live. As a result, slums and blighted areas, many of which were adjacent to the central business district, fell victim to the redevelopment schemes delivered under the guise of the 1960s "urban renewal" movement. Downtown business interests were the principal force behind urban redevelopment (later urban renewal) and their goals were to entice those with purchasing power back into the central business district.



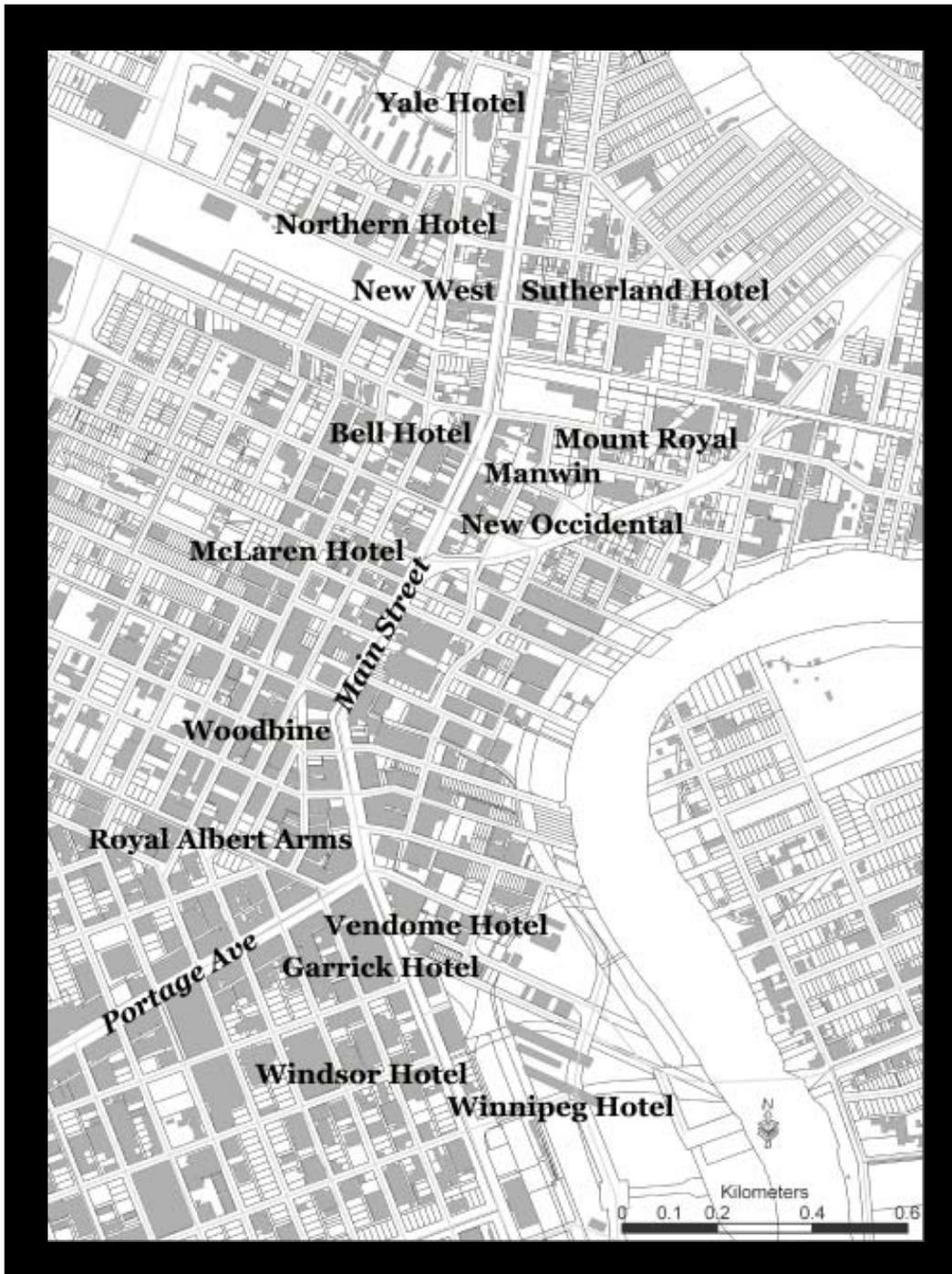
An attempt to clear these once fashionable inner city neighbourhoods with improved affordable housing was viewed as a way to attract the upper classes back into the downtown areas. In the process many hotels were also demolished. ⁴

Changes in the delivery of social services at this time also affected SROs. North American welfare departments were routinely referring more unemployed downtown people to hotels for temporary housing, which more often than not, tended to become permanent. This was the beginning of an unplanned interdependence between social services and hotel owners. ⁵ Many, however, failed to be integrated into the community, while others found homes in low income housing, such as rooming houses and residential hotels, but continued to lack access to needed services. ⁶

Beginning in 1960, institutions that cared for persons with mental illnesses began to release of many patients into the care of the community. The underlying premise was that patients would benefit from a “normal” social environment, provided they received the ongoing support from social service agencies.

By the mid to late 1970s, research indicated that urban renewal projects created an “SRO crisis.” Officials moved from making anti-hotel policy to attempting to eliminate hotels: this prohibition was part of a scheme to end all urban blight and poor housing. ⁷

Meanwhile, downtown hotel owners, who chose to improve incomes and eliminate management problems continued to convert, demolish or simply close their buildings. The Federal Omnibus Reconciliation Act of 1981, and the Stewart B. McKinney Bill in 1987 attempted to improve the status of hotels by offering subsidies. However, in the years that followed, the Reagan and Bush administrations decreased public housing funds by eighty percent. ⁸



Winnipeg SRO Hotels – Study Area



Winnipeg



The First Hotel In Winnipeg
Tribune Archives University of Manitoba



The Historical Development of the Winnipeg SRO Hotel

There has always been an abundance of hotels in Winnipeg. Although the city was not incorporated until 1873, there were over thirty-two hotels at a time when the area's population was 8,000.⁹ Development soared in 1904 when confirmation came that the Canadian Pacific Railway would pass through the city. The swell in population was attributed mostly to young single males who came alone to establish themselves in the new country.¹⁰ Winnipeg's early development and high number of hotels is certainly evidence of the transitory nature of this early and hectic period of growth.

Six years after the CPR passenger terminal was completed, Woodsworth noted that there were sixty hotels within the Main Street area alone, many of which were dispersed around the CPR station on Higgins Avenue. By 1914, there were ninety-six hotels in Winnipeg representing all grades and sizes.¹¹ Ground floors of these hotels typically housed barbershops, cigar stands, restaurants, and pubs.

Winnipeg's Main Street became an area dominated by hotels, saloons, stores and other commercial uses which thrived until 1914.¹² The decline of SROs began to accelerate after the start of World War I, especially in relation to the functioning of the central business district, which suffered an economic downturn.

At the same time, the number of young single males frequenting the Main Street saloons gradually reduced. On a larger scale, immigration, travel, and business activity decreased dramatically as unemployment levels rose during this period.

Adding to the pressures felt by hotel owners, Prohibition was passed in 1916. As a result, many of the smaller hotels were forced to transform their operations. This included some hotel owners who reorganized their buildings into warehouse space, while others, such as The Woodbine, became a billiard parlour until Prohibition ended in 1920.¹³

Soon after Prohibition ended, decentralization diminished the importance of warehousing and shipping operations as industrial expansion was pushed outside of the city limits.¹⁴

After WWII, Winnipeg followed a typical pattern of growth, characterized by the construction of suburbs and highways and continued divestment from the CBD.

In 1961, the opening of the centrally located Disraeli Freeway had a negative affect on the Main Street area.¹⁵ This was evident in the nearby housing and businesses that were expropriated for the construction of the Freeway. The increased flow of traffic reduced Main Street to a thoroughfare rather than a pedestrian place for shopping. Retail outlets, which had already begun their movement towards Portage Avenue, continued to re-locate towards the same direction.¹⁶ The introduction of the freeway also effectively isolated the nearby neighbourhood of Elmwood, thereby further reducing the demand for services on Main Street.

The aerial photos, on the next page, highlight the swath that cut through the neighbourhood resulting from the construction of the Disraeli Freeway.



1956



2002

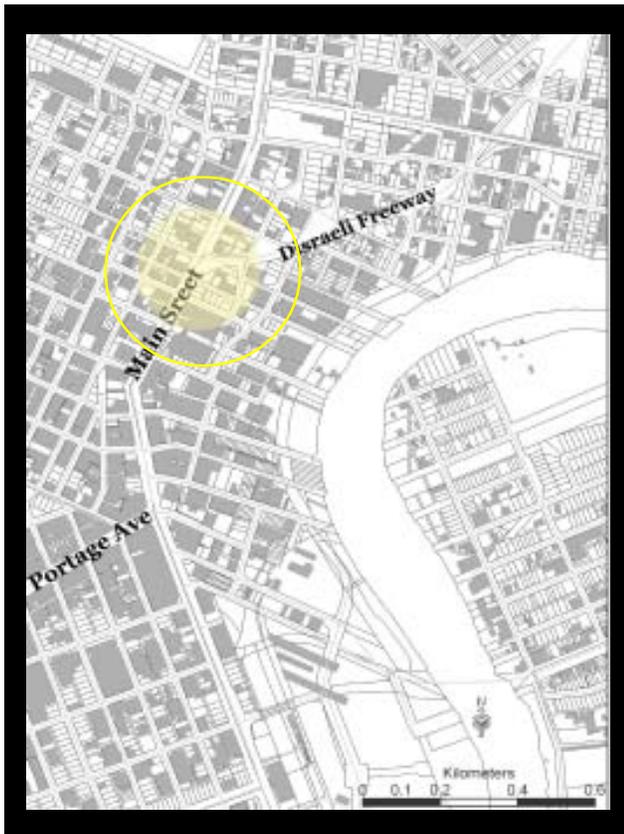


In the map below, the area highlighted in yellow indicates where the following types of businesses were in operation in 1965:

- | | |
|-----------------|--------------------|
| Restaurant | Billiards |
| Jewellers | Apartment Building |
| Gift Shop | Sportswear Store |
| Beauty Salon | Bowling Alley |
| Cigar Store | Grocery Store |
| CIBC Bank | Royal Bank |
| Barber School | Woolworth's |
| Jewelry Store | Starland Theatre |
| Furniture Store | |

While this list is not an exhaustive description of the business activity within this area, it is important to note that by 1975, seven of these enterprises became vacant and by 1985 they had all become vacant, with the exception of a sporting goods store.¹⁷

By the early 1970s, the decline of the Main Street area became increasingly evident, and caught the attention of local media and social groups. Main Street hotel owners began to complain of unfair treatment, as their hotels were perceived as being inspected at a higher rate than hotels outside the area. During this time, the MLCC imposed an increasing number of violations upon hotel management.¹⁸



Because the standard SRO rooms are small in size and few hotels offer common space, many view the street as their living room. Today, one will find a small cluster of social service agencies nearby, such as Sage House, Siloam Mission and the Union Gospel Mission which provide meals and a space for social interaction. Although the hours vary, and rules and restrictions apply, these agencies fill a void that the hotels and surrounding community simply cannot: a welcoming place with food and fellowship.



The Regulatory Environment

“Conditions in Main Street hotels are improving, thanks to frequent surprise visits by city health department inspectors, councils environment committee was told Monday. The committee recommended that the random inspections continue - inspections that a health department report, released at the meeting, credited with prompting speedier repairs and more frequent cleanings.”

**1976
Winnipeg Free Press**



Historical Review

The most significant piece of legislation within the MLCC Act is the section relating to obtaining a beverage room and/or vendor licence. To be granted a licence for the sale of alcohol in Winnipeg, Section 24.1(1) requires a hotel have a minimum of 40 guest rooms, which are to be made available to the public.* This law has been in effect since the new Liquor Control Act came into effect in 1956.

Before the MLCC Liquor Act (1956) came into effect, a hotel owner obtained a Hotel Licence to operate a tourist accommodation under Hotel By-law No. 16286, passed in February 1948. Moreover, the owner had to receive certificates from Health Officer of the City, the Commissioner of Buildings, the Fire Department and the Chief of Police. The role of these departments can generally be described as:

The Health Officer of the City: To ensure that the premises are in a fit condition and suitable for the purposes of a hotel.

The Commissioner of Buildings: To ensure that the building complied with structural and electrical requirements.

The Fire Department: To ensure that the building complied with fire prevention regulations.

The Chief of Police: To ensure that the applicant was of good character.

***liquor vendor** is defined in Section 17 of the Act as “a person authorized to act as a liquor vendor.” In the case of a hotel, a vendor is a standalone component of the hotel that sells beer products to be consumed outside of the lounge or bar.

The City of Winnipeg employed a Hotel Inspector, who was required to visit the hotels on a monthly basis to ensure that the furniture, bedding, towels, bed linen and other requisites were considered adequate. The inspector also reviewed the mandatory hotel registry, which recorded names of management and employees and the positions they occupied. In the event of any personnel changes the Hotel Inspector was to be informed immediately. In addition, it was illegal for the hotel guests to register under a wrong or factious name or address for the purpose of occupying a room in a hotel.

Archival research into the Winnipeg Tribune revealed that the Winnipeg Police Morality Squad enforced city By-law, Section 27 (1) where it states:

“No licensee shall permit drunkenness or any quarrelsome or disorderly conduct or permit persons of bad characters to assemble or meet on his premises or permit on his premises any infractions of this By-law.” ¹⁹

Local newspapers reported how much weight this by-law carried by highlighting a case where the Chief of Police, because of the excessive parties within the guest rooms, denied a request for a Hotel Certificate. ²⁰

The shift in regulations started to occur in 1965, when a new City of Winnipeg By-law came into effect that provided an appeal process for those denied a certificate for a hotel licence. The first appeal attempt was successful when a hotel owner had his “good name cleared” because the city could not find evidence that he was “not of good character.” ²¹



The last evidence of the Morality Police Squad working under this by-law was found in 1971 when the squad escorted a Tribune newspaper reporter through the Main Street Area.

“I’d met Irv for the first time the night before, when the morality squad detectives were taking us through the beverage rooms on The Drag.” ²²

It is not apparent as to when changes were made to the Hotel By-law. In discussions with the previous Planning Commissioner for the City of Winnipeg, it was made clear that there has been an absence of Hotel Certificates (issued by the municipal government) for the past forty years or so. ²³

Research indicates that political pressure, applied on the health department, coincided with the local media attention highlighting the decline of the Main Street area in the early 1970s.

The MLCC reported that during the months of April to August 1974 the commission had forty-three adverse reports, issued twenty-four warnings and held seventeen hearings related to sixteen hotels and one club in the Main Street area. At the same time, the Winnipeg Police Commission requested that the city’s Medical Director file a report on the health conditions in Main Street area hotels. ²⁴

One city councillor told reporters:

“I am absolutely appalled at the degree of health infractions. Where are the city health inspectors?” ²⁵

By 1976, Main Street hotels continued to be under close scrutiny by the city health department.



**Winnipeg Tribune
1971**



C Current Regulatory Environment

The current provincial legislation and municipal by-laws governing Winnipeg SROs can be described as ambiguous at best. Of the legislation and by-laws, much remains open to interpretation and as a result, there is flexibility in applying laws. This results in difficulties assessing the roles and responsibilities of various agencies, with the outcome being insufficient guidance in enforcing measures to create a healthful and safe environment. Ultimately, residents find themselves within a legislative environment that does little to protect their right of tenure.

Today, the MLCC has the authority and obligation to issue a Hotel Certificate. However, this only applies if a Beverage Room or Vendor licence is sought. This means that a person may open a hotel without the documentation, provided that the building meets city by-law codes similar to any other business, which is open to the public without a beverage/vendor licence. As previously stated, this ruling came into effect in 1956 with the establishment of the new MLCC Liquor Act.

There are no city hotel inspectors. Instead, hotels are subject to inspection by an array of authorities: Fire Paramedic Services, Police Department, Building Inspectors, Environmental Health Services and the MLCC. Routine inspections are not legislated; agencies inform appropriate departments when a violation is evident (e.g., should the Fire Paramedic Services observe a health infraction such as a pest infestation, they will forward information to the Environmental Health Services).

Within the Public Health Act, a medical officer of health may order an insanitary condition on any structure or building and has the power to vacate the premises. Orders may involve the demolition, renovation and/or complete or partial closure of residential units in an SRO.

With respect to the operation of SRO hotels in Winnipeg, the agency having the most significant jurisdiction is that of the provincially mandated MLCC. The MLCC is a Crown corporation whose mandate states:

“The mission of the MLCC is to promote the safe, healthy and responsible use of beverage alcohol products, thereby generating revenues for the Province.”²⁶

The MLCC has legislated control over 1,644 licenced premises in Winnipeg and has sixteen inspectors who are mandated to enforce the regulations. Out of these licences, seventy-five are issued for beverage rooms and 298 are solely for vendors that sell off-sale spirits.²⁷

It should be noted that it is not the intent of this section of the report to criticize the operations of the MLCC. More so, the objective is to simply highlight the fact that this agency’s primary task is to monitor the sale and consumption of alcohol, and that in its present capacity, it is ill-equipped to monitor the estimated 1000 persons currently living in hotels. It is these persons who presently are without support from any agency and lack avenues to resolve disputes or be protected in a manner consistent with the Province’s Residential Tenancies Branch Act (also discussed in this section).



Governed under provincial legislation, the MLCC is responsible for ensuring that SRO units meet occupancy standards, and it also has jurisdiction over matters relating to building and fire codes, health regulations, architectural layout and interior design. As previously stated, the MLCC does issue a “certificate of a registered hotel” to hoteliers under Section 169 (1), making hotels open to inspection at any time by an MLCC commissioner under Section 138(1).²⁸

There are no direct references to the terms “single room occupancy” or “residential hotel” within the Manitoba Liquor Control Act. In fact, there is no provision within the act that specifically deals with rental properties nor does the Act contain any information on how to resolve a dispute between a person living in a hotel and hotel management. Additionally, a person residing in an SRO hotel is not defined as a ‘tenant’ with rights protected under the Residential Tenancies Act of Manitoba.*

A person living in a hotel has little or no recourse should a dispute arise with hotel management. While many have lived in their rooms for years they may be evicted at any time without notice or justification. They may also be subjected to rent increases at the hotel owner’s discretion. Uncertain tenancy statuses, coupled with marginal financial resources, leave the resident in a vulnerable position. In the event of an eviction, they also have little recourse, comparable to those rights afforded to renters bound to a standard lease agreement.

* Section 3(1) (a) of *The Residential Tenancies Act* specifies that the following accommodations are excluded from residential protection: “Living accommodation occupied on a transient basis provided in a hotel, motel, inn, tourist home or hostel, or other similar accommodation.”

The ramifications of having little or no legislative protection is that the tenancy rights of persons in an SRO are basically left to the discretion of the hotel owner.

A recent CMHC study on the comparison of provincial and territorial rental practices throughout Canada revealed that in most provinces, the regulatory or governing body excludes residents of hotels under their legislation.²⁹ Effectively, this ensures that the thousands of persons living in hotels have no tenancy rights or means of appealing an unwarranted action such as an eviction notice or spurious rent increase.*

Once a hotel holds a beverage room and vendor licence, the guest rooms must adhere to Section 24.1 of the MLCC Act, which clearly states:

“The licensee of a beverage room shall ensure that all guest rooms in the associated hotel are adequately furnished, equipped and maintained in order to be suitable for renting to the general public.”³⁰

Yet, it is important to emphasize that the MLCC Act does not contain a section on rental housing, other than in the context of a hotel, nor does it refer to the hotel guests within the rooms. It should be noted that a definition of what constitutes “adequate furnishings” could not be found. The MLCC Licensee Field Manual does clearly state that the guest rooms must be no less than 200 square feet of space excluding the washroom area.³¹

* The exceptions are Prince Edward Island, where there are tenancy rights when tourist accommodations are provided for more than one month, and British Columbia, where a person has tenancy rights if they are paying twenty dollars or less per day for their accommodations.



In 1981, a report* conducted by the Ministerial Advisory Committee on Liquor Control, concluded that the competition between hoteliers would ensure that standards were maintained in a condition of high quality. They argued for a decrease in a focus on the furnishing and adequacy of the rooms. The committee did not alter the requirement of having at least forty guest rooms to qualify for a beverage or vendor licence. Nor did they remove Sections 177 (a) and (b) of the MLCC Act where the owner may be fined up to \$50 for the first offence or imprisoned not exceeding thirty days for not abiding the ACT. They distinctly stated that it is in their best interest to concentrate on the sale and consumption of alcohol as opposed to offering thought or direction on the plight of residential hotel guests. A key finding was:

“At one time there was a concern unless facilities’ standards in licenced premises were imposed upon by the Commission the quality of accommodation in the province would fall. There is some historical truth to this view. However, the reality today is that the competition in the hospitality industry is very keen and this competition in the hospitality industry is the best assurance of maintaining high standards of physical accommodation. Second rate facilities will not survive for long in Manitoba.” ³²

Since 1981, the MLCC has chosen to rely on other civic entities, such as the Winnipeg Police Department and Environmental Health Services, to carry out room inspections.

“Committee recommends that the commission confines itself to matters relating to the control of the sale and consumption of beverage alcohol and make the necessary administrative arrangements to assure that other provincial and municipal agencies enforce the building codes, fire codes and health regulations. The Committee further recommends that licensees be given the latitude to design their facilities in accordance with applicable codes without requirements being imposed upon them unless such requirements are essential for the enforcement of the liquor control aspects of the Act” ³³

During the many personal interviews with these various civic agencies, it became obvious that the Winnipeg Police Department and the Fire Paramedic Services do the bulk of these inspections (if not all inspections) during and resulting from the numerous emergency calls to these hotels (See a Police Perspective on: Single Room Occupancy Establishments, page, 39).

Any hotel that has been condemned immediately lose their beverage room and vendor licences and must re-apply to the MLCC to have their license reinstated. The municipal council may also complaints against the hotel and make recommendations to the MLCC respecting the granting or renewal, as well as the suspension or cancellation of the hotel certificate. ³³

In the event of an SRO being condemned or demolished, the Vulnerable Persons Unit oversees the replacement of accommodations and deals with issues related to medical services and other immediate needs.

* Report of the Ministerial Advisory Committee on Liquor Control: Findings and Recommendations, April 1981.



The Main Street Project and the Salvation Army provide support such as moving vans and assistance in transporting residents and their belongings resulting from the evictions. Providing they have space available, they supply accommodation to those persons in need, should no suitable alternative housing may be found.

The closure of an SRO, more than often than not, has devastating effects upon those who reside in them, especially when tenure has taken place for many years. When the Aberdeen Hotel was closed (and demolished) an evicted resident of twenty years remarked:

“I kind of like my privacy, and I don’t like to disturb the family. I’ve lived in a hotel for so long I feel comfortable there.”³⁵

The bartender of the Aberdeen Hotel responded to the closure by stating:

“Its more difficult for older people to move out because they’re set in their ways.”³⁶

When the Patricia Hotel was closed in 1995, one resident shouted:

“I’m going down to city hall and shut down their building, this place is my home. I’ve got my stuff here and I can’t afford to move anywhere.”³⁷

Other hotels that have closed and/or demolished in the past twenty years* are:

The Portage Village Inn
The Brunswick Hotel
The Leland Hotel
The Savoy Hotel
The Patricia Hotel
The Oxford Hotel
The St. Charles Hotel

The Brunswick Hotel was closed in the 1995 because of failure to meet fire codes. The City’s Chief Building Inspector was quoted in the Free Press as stating:

“The hotel wasn’t targeted, all kinds of rooming houses have been boarded up over the past couple of months.”³⁸

Thirty-three residents were given eviction notices and some had remained living in the hotel up until the one p.m. deadline to vacate.

When the Patricia Hotel was also closed in 1995, a city councillor was reported in a local newspaper as stating:

“Those that don’t meet community standards, should we warn them with a financial buyout? Let your facilities run down, and then we’ll buy them? I don’t think that’s the proper message.”³⁹

* This is not a complete list of recent hotel closures



Nonetheless, the city paid \$438, 000 to acquire both the former Portage Village Inn and \$1.2 million the Leland Hotel, just to name two recent examples.

In 1995, Mayor Susan Thompson, while awaiting a report on the condition of the hotel before approaching Council for approval to purchase (with Winnipeg Development Agreement funds), stated that:

“The city would use the Patricia as a model for empowering inner-city residents to operate their own co-op housing – without beverage rooms.”⁴⁰

The idea of transforming the Patricia Hotel into a co-operative housing model is fine, however, critics may argue that removing the beverage room licence is a step too far, as the allowance of beverage room licences is a hotly contested debate regarding the Main Street area. For example, one may argue that it would be discriminatory to prohibit the availability of licenced establishments based upon a district 's average annual income levels.

“Anytime you close a building it’s the last resort. It’s taken two years to reach this point. It’s unfortunate, and you have to sympathize with the tenants, but it’s strictly a failure by the owner to comply with the by-laws.”⁴¹

**Chief Inspector of Buildings
City of Winnipeg
1995**



This review of the regulatory environment of SROs has revealed that the measures to manage the daily functions of these establishments have eroded during the past years. The MLCC, while retaining jurisdictional control over the “adequacy “ of the guest rooms, has arbitrarily removed their organization from this responsibility.

Moreover, out of the seventeen SRO hotels studied in this report, nine do not have the availability of the forty required guest rooms, yet it is observable that some hotels have vendors that are located in their establishments. Meanwhile, the City of Winnipeg has no firm legal measures in place that allow for routine inspections which contributes to a complex jurisdictional maze that fosters mis-management (some, but not all) of SROs at the expense of the residents who have no tenancy rights.

Later in this report, case studies of other jurisdictions reveal that it is possible to establish a set of laws to ensure the proper management of these SROs. Furthermore, programs can be set in place to secure the tenure of the residents, in an appropriate form of affordable housing, while protecting members of the Winnipeg Police and Fire and Paramedic Departments who constantly respond to emergency situations in, more than often, extremely volatile settings.





The Buildings





Amenities

Winnipeg’s inner city hotels house an estimated 1000 persons in 772 rooms. This includes the ten hotels on Main Street and an additional seven hotels within the immediate area. Based on fieldwork and repeated site visits, the vacancy rate is considered to be very low. The rooms vary in appearance, as do their amenities. Most hotels in the inner city were constructed in the late 1890s to early 1900s, with many becoming increasingly unviable to maintain.

In general, the residents surveyed were somewhat satisfied with the amenities offered in the hotels. In room cleaning services are on-hand approximately once per week. Many residents stated that they would like to have on-site laundry facilities for personal items. When asked what services they would like to see in close proximity to their hotels, most did not respond, but again, an interest in laundry facilities was noted as a need among residents.

Hotels	Number of Rooms
Yale	20
Northern	45
New West	32
Vendome Hotel	30
Manwin Hotel	24
Bell Hotel	50
New Occidental Hotel	51
McLaren Hotel	150
Woodbine Hotel	37
Brunswick	39
Total	478

Hotels	Number of Rooms
Winnipeg Hotel	47
Windsor Hotel	35
Garrick Hotel	45
Royal Albert Arms	54
Mount Royal Hotel	39
King Hotel	24
St. Charles	50
Total	294

Amenities	Percentages
Bathroom	42.7
Shower/Bathtub	41.5
Night Table	58.8
Dresser	82.5
Table/Desk	61.3
Chairs	65.0
Stove/Hotplate	35.0
Closet	51.3
Air Conditioning	5.0
Heating Unit	41.3
Fridge	52.5
Work Area	26.3
Ventilation	41.3
Peep Hole in Door	11.1
Door Lock	92.6
Curtains	66.7
Carpets	64.2
Telephone	25.0
Television	57.6
Cable Television	64.4
Pests (insects, mice etc...)	27.1



Furnishings

Room furnishings vary, both in quantity and quality. While it is clear that many residents add to their furniture, other rooms are bare and have only a bed and a dresser. Slightly over half of the respondents stated that they have a dresser, night table, chairs, and closet. At the lowest end of the spectrum, some rooms were observed with having only a mattress on the floor, while the better rooms had guest chairs, TVs, and other furnishings. In fact, some rooms were quite well appointed offering guests a pleasant atmosphere.





Washrooms

Just under half of the respondents surveyed had a shower or bathtub in their rooms (42%). The lack of in-suite washrooms did not appear to be an issue for most residents. The majority stated that the shared bathrooms were satisfactory. Complaints regarding shared washrooms related to cleanliness and lack of proper door locks for privacy, while others indicated problems with hot water and other issues associated to plumbing.

“The bathroom’s in good condition and they clean more than once a week.”

Female resident, 49 years of age.

“The door lock is lousy and housekeeping services are less than once a month.”

Female resident, 19 years of age.

“The maid cleans the bathroom everyday. Its excellent service, so I mop the floor to help her. It’s one of the better hotels for maid service. I like her and my room is always done.”

Male resident, 43 years of age.

“You have to use the shower by 6 or 7 am or you have cold water all day.”

Male resident, 68 years of age.





Hotel Facilities

The hotel restaurant is not a hub for interaction among residents or a central place for social gathering. Nearly two thirds of residents stated they never or rarely eat in the restaurant, while only 10% said they visited it frequently.

Table 4: Do You Frequent the Restaurant?

Opinion	Male	Female	Total % of Respondents
Very Often	6	4	12.5
Somewhat Often	9	3	15.0
Rarely	22	7	36.3
Never	18	11	36.3
Total	55	25	100

In some rooms, a fridge (52.3%), a hotplate (35.0%) and a work area to prepare food (26.3%) are available. The use of hotplates in rooms is an area of controversy related to fire hazards, electrical capacity and insurance coverage. It is clear that most residents do not cook in their rooms. From observation, a high proportion of residents use local missions for regular meals as opposed to cooking for themselves or using the restaurant.

“I go to Siloam Mission everyday, I meet my girl there.”

Male, 19 years of age.

“I don’t use them (missions) if I have money, but I will use them if I am in need. They’re for the poor, I buy coffee at the Occidental.”

Female, 22 years of age.

A second space that possibly could be the hub for resident interaction is the beverage room, however, the majority of respondents (52%) stated that they rarely or never use these facilities. The beverage room did appear to be a source of problems for residents as significant complaints stemmed from the noise.

Table 5: Do You Frequent the Beverage Room or Vendor?

Opinion	Male	Female	Total % of Respondents
Very Often	9	4	16.0
Somewhat Often	17	8	30.9
Rarely	12	7	23.5
Never	18	6	29.6
Total	56	25	100

“I drink more because there’s more people here to drink with. And I’m always broke.”

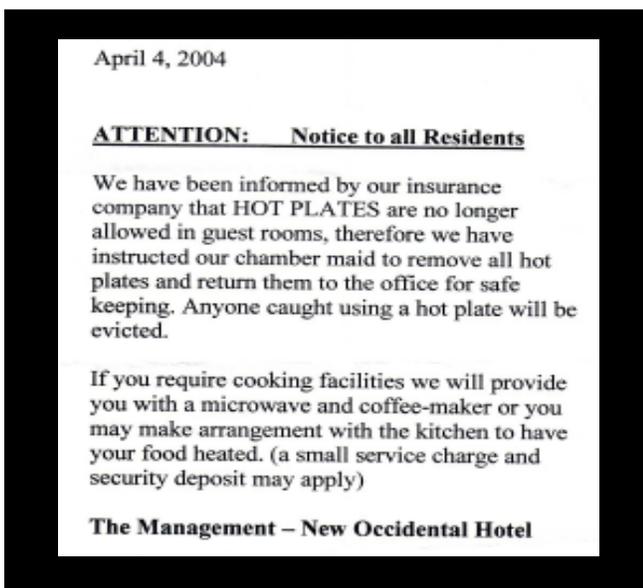
Female resident, 67 years of age.

“Depends on how things are going, I am cooped up here, I don’t get out much in the winter, I have to have a beer.”

Male resident, 39 years of age.

“The bar is too close.”

Male resident, 32 years of age.





Hotel Security

For those who feel unsafe, the majority have lived in the hotel for less than one year, and expect to remain at their current address for less than three months. Many have lived in other hotels in the inner city prior to their current address. Less than half of the twenty-one who responded (5) feel that the other residents are troublesome and eleven view others “at risk” for substance abuse. Out of eighty-one respondents, sixty stated that they feel very safe while the remaining twenty-one respondents stated that they feel unsafe.

Respondents were asked if other residents were at risk for substance abuse by living in an SRO hotel:

“Yes, the majority of people, I see lots of doors open there’s a bunch in there drinking. Last night a guy was passed out in the hallway.”

Female resident, 23 years of age.

“I don’t pay attention to them, it’s their business. I do what I do, and they do what they do.”

Male resident, 43 years of age.

“The majority of the people, that says it all.”

Male resident, 40 years of age.

Table 7: Do You Feel That the Hotel is Safe?

Opinion	Male	Female	Total % of Respondents
Very Safe	12	7	23.5
Safe	25	16	50.6
Not Safe	10	1	13.6
Very Unsafe	8	2	12.3
Total	55	26	100

“The majority of people have an alcohol addiction, living above a bar doesn’t help.”

Male resident, 32 years of age.

Not very many, I drink three times a year but when I drink I drink.”

Male resident, 50 years of age.

“Most of us don’t look at that way, we’ve all got to be somewhere.”

Male resident, 30 years of age.

“Quite a few, there’s lots of parties in rooms I don’t hang around, I get up and get out.”

Male resident, 60 years of age.

Table 6: Are Residents at Risk for Substance Abuse?

Opinion	Male	Female	Total % of Respondents
Not Very Many	7	4	13.4
Quite a Few	23	11	41.5
Majority of People	22	11	40.2
Unsure	4	0	4.9
Total	56	26	100



The Residents

“In the metropolitan hotel the guest is only a number. His mark is a key and his relation to the host is completely depersonalized. His status, in so far as he has any, is almost entirely of outward appearance and “front.” The personal hospitable relation between landlord and guest in the inns and taverns of the past has been replaced by impersonality and standardized correctness.

The modern hotel dweller is characteristically detached in his interests from the place in which he sleeps. Although physically near the other guests, he is socially distant. He meets his neighbours, perhaps, but does not know them.

One may be ill and die without producing a ripple on the surface of common life. One loses his identity as if a numbered patient in a hospital or a criminal in a prison.”

**Norman S. Hayner
1928**



Demographic Profile

The demographics of the Winnipeg sample correspond to that of most North American cities in that the majority of persons living in hotels are male (68.3%), with females representing just under a third (31.7%) of the population sampled. The age of respondents is also consistent with other jurisdictions, with just over 40% being in excess of fifty years old. In fact, relatively few persons are under the age of thirty (16%).

In terms of family structure, nine persons stated they were married or common-law with just over half of respondents (46 persons) declaring they were single. Although no residents indicated children lived in the hotel with them, just over 50% of respondents have children (with most being over the age of 18). In terms of current marital status, a third of respondents indicated they were divorced, separated, or widowed.

Table 8: Age Groups

Age Groups	Male	Female
18-25	6	6
26-30	0	1
31-40	13	2
41-50	11	9
51-60	14	4
60 plus	11	4
Total	55	26

Table 9: Marital Status

Status	Males	Females	Total % of Respondents
Single	28	18	56.8
Divorced	14	5	23.5
Married/Common-law	8	1	11.1
Separated	5	0	2.5
Widowed	0	2	5
Total	55	26	100

Income

Among the residents living in hotels, the incidence of poverty remains alarmingly high. Overall, 30% of those surveyed indicate they have some type of employment, while just 53% of respondents receive an income supplement, with an annual income of less than \$15,000. It should be noted that a number of persons work in some capacity within the hotel.

Table 10: Source of Income

Status	Male	Female	Total % of Respondents
Social Assistance	20	11	38.8
Employment Insurance	1	0	1.3
Disability Pension	12	4	20.0
Canada Pension Plan	5	3	10.0
Employment	17	7	30.0
Total	55	25	100

Table 11: Annual Income

Status	Males	Females	Total % of Respondents
Under \$10,000	31	14	58.4
\$10,001-15,000	13	6	24.7
\$15,001-20,000	5	2	9.1
\$20,001-25,000	1	1	2.6
Over \$25,001	1	3	5.2
Total	51	26	100

Table 12: Status of Employment

Status	Males	Females	Total % of Respondents
Full Time	13	5	64.3
Part Time	2	2	14.3
Casual	3	2	17.9
Self-Employed	1	1	3.6
Total	18	10	100



Tenure and Residential Mobility

The survey results suggest that a high rate of residential mobility exists among residents. Those surveyed changed addresses among hotels and other types of shelter. The majority stated they had previously lived in inner other city hotels, and that they had been in their current location for less than one year. A third of residents had lived in two or more hotels in Winnipeg. Just over 17% stated that they had lived longer than six years at their current address (these are all people in excess of fifty years of age).

The results of the survey confirm a few observations. First, residential mobility among SRO residents remains high and characterized by frequent changes of hotels; that for those planning to remain permanently, most are older; and just under half plan to move within the next three months. These findings do offer some evidence of a high turnover rate and general residential instability among this population, especially for persons under the age of fifty.

Table 13: How Many Hotels have Residents Lived in Before Current Address?

Number of Hotels	Male	Female	Total % of Respondents
1-2	17	2	41.3
2-4	12	6	39.1
5 or more	8	1	19.6
Total	37	9	100

Table 15: Expected Length of Time at Current Hotel

Time Length	Male	Female	Total % of Respondents
0-3 months	23	9	41.0
6-12 months	4	4	10.3
Permanently	9	5	17.9
Undecided	16	8	30.8
Total	52	26	100

Table 14: Length of Residing at Current Hotel

Length of Time	Male	Female	Total % of Respondents
0-3 months	15	11	32.1
4-12 months	14	5	23.5
1-5 years	16	6	27.2
6-10 years	2	2	4.9
11-15 years	2	1	3.7
16-20 years	6	1	8.6
Total	55	26	100

When asked about their expected length of stay, 41% of residents stated that they expect to move within three months, 10% expect to move with the year, and 30% were undecided. Nearly 20% of residents planned on remaining permanently.

Residents were asked why they chose an SRO over other forms of housing. More than half the respondents offered comments, and half of those stated that they simply prefer living in hotels. Some contend that rooming houses are cleaner and offer more privacy, while others who choose to live in hotels view their housing as temporary and sufficient for their current needs. Again, these results further raise the issue of a transitory population.



Sense of Community

When asked if there is a sense of community among residents, sixty-six of the eighty-one residents responded, with 30.3% stating “very much”, 44.7% stating somewhat, and 22.4% felt that there is no sense of community while (two people were undecided). The seventeen respondents those who felt no sense of community were all male.

Out of eighty-one respondents, thirty-two described the other residents as friendly. Twenty-eight said they felt other residents kept to themselves or were not overly friendly, and twenty stated they felt that the other residents were troublesome.

To assess the level of interaction that residents have with friends and family, a survey question asked whether they received visitors from both inside and outside the hotel. Out of eighty responses, more than a third indicated they received visitors once a day, and close to 24% indicated they had a visitor once a week. In contrast, slightly more than 40% receive few or no visitors. In assessing the differences by gender, males were less likely to receive few visitors, if at all. Related to the issue of visitation, nearly two thirds of the sample stated that they felt received enough privacy from the other residents (just under 10% contended they had no privacy).

Within the survey responses, a “sense of community” among residents was not overly apparent within the walls of the hotels. More so, residents seemed to be more connected to the street environment and the activities of local missions. As one researcher observed:

“The residents’ living room appears to be the streets to which they are more familiar with.”

Table 17: Is There a Sense of Community Among Residents?

Opinion	Male	Female	Total % of Respondents
Very Much	13	10	30.3
Somewhat	20	14	44.7
Not at All	17	0	22.4
Undecided	1	1	2.6
Total	41	25	100

Table 18: Describe the Other Residents

Opinion	Male	Female	Total % of Respondents
Friendly	20	12	39.0
Keep to Themselves	10	5	18.3
Not Overly Friendly	11	2	15.9
Troublesome	14	6	26.8
Total	55	25	100

Table 19: Do You Receive Enough Privacy from Other Residents?

Opinion	Male	Female	Total % of Respondents
Very Much	16	13	48.3
Somewhat	19	4	38.3
Not at All	6	2	13.3
Total	41	19	100

Table 20: How Often Do You Receive Visitors?

Opinion	Male	Female	Total % of Respondents
Once a Day	14	13	33.8
Once a Week	14	5	23.8
Not Often	13	4	21.3
Never	14	3	21.3
Total	55	25	100



Resident Likes and Dislikes

When asked what was liked and disliked most about hotel life, slightly fewer than half of those surveyed responded. The factor most favored by residents who did respond was convenience (30.3%), followed by the services that hotels offer (16.3%). Affordability ranked relatively low at just under 10%, while 20.9% feel that there is nothing to like and their accommodations are “*just shelter*.” The high noise levels (26.3%) and the other residents (23.7%) were factors least liked about hotel life.

Table 21: What is Liked the Most About Living in a Hotel?

Reasons	Male	Female	Total % of Respondents
Convenience	8	5	30.3
Affordability	3	1	9.3
Services	5	2	16.3
Privacy	4	1	11.6
Other Residents	1	4	11.6
Nothing to like	4	0	9.3
Just shelter	4	1	11.6
Total	29	14	100

Table 22: What is Least Liked About Living in a Hotel?

Reasons	Male	Female	Total % of Respondents
Too Noisy	5	5	26.3
Pests (mice etc...)	1	1	5.3
Other Residents	7	2	23.7
Just Shelter	0	3	7.9
Substance Abuse	4	0	10.5
Room Fixtures	1	1	5.3
Too Dangerous	2	0	5.3
Lots I Dislike	3	0	7.9
Nothing I Dislike	1	2	7.9
Total	24	14	100

“Privacy, I’d like to leave my door open, but I need my privacy. I also detest the brick view out my window, I used to be able to watch the cows in July and August as a kid, and the blue sky.”

Female resident, 59 years of age.

“Infested with mice, at night I can hear them scurrying, often rooms have roaches.”

Female resident, 22 years of age.

“Worst is some of the people, they get a whole pile of drunks and the band is so loud you don’t sleep.”

Male resident, 56 years of age.

“What would you want? I like it here.”

Male resident, 69 years of age.

“Nobody bothers me.”

Female resident, 36 years of age.

“I don’t like anything. I was forced into it, welfare gave me 24 hours to find a place, an ultimatum.”

Male resident, 31 years of age.

“Better than a shitty line up, you have to get up at 6:30 am and sometimes you get rejected.”

Female resident, 19 years of age.

“No parents.”

Female resident, 18 years of age.

“One of my best buddies talked me into it. One of the owners became very important to me because I can talk to him.”

Male resident, 54 years of age.



Resident Voices

Residents were asked if they had any advice for someone who is thinking about moving into a hotel or whether they had anything else that they would like to share:

“Keep your eyes open all the time, don’t be afraid to carry a weapon.”

Male resident, 37 years of age.

“Keep to yourself and don’t disturb other residents.”

Female resident, 24 years of age.

“Don’t do it unless you’re a street person, your walking into a trap if your not a street person, because it’s a hostile environment.”

Male resident, 33 years of age.

Don’t, take a rooming house until you can find somewhere decent, but you can’t because they are all in this shitty area.”

Female resident, 56 years of age.

“I’d like to see it demolished and rebuilt.”

Male resident, 34 years of age.

“She’s renting a room she’s never seen, two welfare cheques.”

Male resident, 52 years of age.

“Clean it up, it’s a nice old building.”

Male resident, 49 years of age.

“Health Department should check more often, and the fire escape is open all the time.”

Female resident, 40 years of age.

“Open up dry houses, get some decent staff, get people out of this area. Make some low-income housing in a different area. You’re on welfare trying to get off drugs but all they give you is \$250 which forces you in to a shitty hotel where all the drugs are.”

Male resident, 19 years of age.



Viewpoints From Community Researcher and Resident

“I haven’t slept on the street or picked food out of garbage bins, but I know what people are going through. They sit down and talk to me and I listen. So many people I have known on the Strip have no hope. Some of them are on the street; some are in the hotels. There are so many hopeless people in Winnipeg, and they are not all native.

I think there’s only one way that people can get hope. Its in programs that help them open up and get rid of all that hurt we’ve gone though- the abuse, the alcohol. I went through a program like that where we sat in a circle and talked. Nobody knew me at that place and it helped.

We need a place that’s away from here, away from the Strip where everybody knows everybody else. It should be a place close to Mother Earth where people can sit in a circle and we’ll listen to them. Even if they don’t speak right away, but have time to think in their rooms, and then speak the second or third time.

It’s only a little bit at a time that I could look at all the hurt in my life. You can’t push anyone. They have to be ready to do it themselves. It’s hard, because all the feelings come out. You have to have a rest, not to push all that hurt out at once. They need a place that’s away from the Strip so they can start.”



Lorraine
Community Researcher and Resident



Viewpoints From The Winnipeg Police Services

Problems with SROs

“To fully understand my point of view I feel it is important to firstly outline my experiences as a police officer that formed the basis of my observations for this report.

I began my career with the Winnipeg Police Service in the mid 1980s. My first official position was as a foot patrol officer walking the beat on the Main Street Strip. At that time this area was a hot bed of activity with thirteen single room occupancy (SRO) hotels on or the near the Main Street Strip.

The beverage rooms of these establishments and the surrounding streets were full to capacity with intoxicated persons. Street level crime, prostitution, illicit drug trafficking and drug use were rampant on the streets and in the rooms of the SROs. My outlook and views on SROs in those early years was shaped by these activities. Working in the core area was an excellent training ground for a new police officer that walked the beat.

Community Policing

In the spring of 1995, I accepted a position as a foot patrol officer at the Portage Avenue Community Support Unit, which was located downtown at Portage Avenue and Edmonton Street. There I began to walk the beat in the downtown area, which included the Main Street strip. This area now had a different feel to it, which was largely due to the fact that six of the thirteen Hotels had closed their doors.

Street level prostitution had been driven away, to a great extent, from the area and the drug of choice for the new millennium, cocaine, (as opposed to talwin and ritalin of the 1980s) with its street value, had virtually priced itself out of the Main Street market.

Due to the changes in these variables, the beverage rooms had a quieter appearance. There was a noticeable reduction in the criminal element and what remained was an army of lost souls, which I would describe as persons at the bottom of the socio-economic ladder who appeared to be stricken with alcohol, solvent, and other non potable addictions and or mental health issues.

The Winnipeg Police Service had adopted a community-policing model from the city of Edmonton in the early 1990s and from the onset we struggled to develop and maintain a functional role in our city. Our community-policing model was to throw manpower at areas that had problems. At this point in time I would say that we faltered by not triaging our community or matching our own resources to the problems.

Ownership/Community Policing

In 1999, the Portage Avenue Community Support Unit took a new direction in Community Policing by developing an Ownership Program. It was at this time that I started to develop a philosophy and my version of community policing. Ownership of the area now pointed to the individual officer as having ownership of both the problems as well as the solutions.



It was at this time I took a course through the training division, Criminal Prevention Through Environmental Design (CPTED). This course opened my eyes to problem solving at a community level. The basis of CPTED can be looked at in two perspectives:

1. First Generation CPTED looks at physical changes to the environment that will prevent crime and/or reduce the fear of crime.
2. Second Generation CPTED looks at changes to non-physical entities that will prevent crime and reduce the fear of crime.

In the next few years I applied First and Second Generation CPTED to my area and was rewarded with a sizeable drop in calls.

In the fall of 2002, I was appointed to a new position as the troubleshooter for the downtown, which was still within the office of the Community Support Unit. My responsibilities were to tackle problems that overlapped my colleague's boundaries and apply CPTED base responses. The two main issues that I took on were street persons and inner city SROs.

Both of these problems appeared to be separate issues, however, it was and still is my opinion that these problems are connected as their negative effects to their community are similar. If this hypothesis were correct then possibly, the solutions to minimise the effects would also be similar. I embarked on two separate paths looking for solutions keeping in mind that I would possibly end up finding solutions that had common denominators.

Searching for Solutions

In my first years as a community officer I had the collateral agencies inspect the physical requirements of the structures of these SROs. These zoning requirements were mostly in place and what changes that were required had little effect to the issues within the building or outside on the streets.

I then looked at the regulatory policies that governed SROs and found that on paper, the Manitoba Liquor Commission Corporation (MLCC) is responsible for the maintenance of licensing of the rooms. However, in conversations with a representative from the MLCC it was clear that they had made an administrative decision that the Environmental Health Department, Fire Department and the Building Inspector were to enforce the regulatory requirements from their own individual acts.

My understanding of the real problems within the rooms and the hallways of these SROs started to take shape in my mind. I realized that the answer to these problems was not by simply by implementing First Generation CPTED solutions.

Change would have to come from management and the expectation of behaviours of the management that would be expected from the regulatory agencies. The problems were starting to become clear and Second Generation CPTED base solutions was needed to address these issues.

Now my question was how could I produce or influence real change that would be effective to both the residents and the surrounding area of the SROs.



I looked to the MLCC, who I see as the main stakeholder in the regulatory responsibility, and questioned if they had any studies to back up their policies. They indicated that there were no studies in existence. It was at this point that I began to look at the University for possible existing studies of SROs in Canada.

It was determined that there were no comprehensive studies in existence, neither in our city nor across Canada. A research application was subsequently submitted to Winnipeg Research Alliance (WIRA) with myself representing the Winnipeg Police Service.

In the fall of 2003 I met with two researchers from the IUS. It was at this time the study began to take shape. On several occasions the three of us met and discuss our goals and objectives.

It was determined that my part in this study would be to assist in the creation of a residence, business and owner surveys. The process in creating this particular survey proved to be a challenge and after it was completed the final questions that were chosen lowered my expectations of the overall success of this study. I felt that “tougher” questions could have been asked.

Myself, and a researcher from IUS, visited approximately eight SROs and completed forty surveys. It was an educational experience as I was able to question these persons, which in the past, I would only have spoken to in a friendly social manner or in conjunction to a particular call that had brought me to that location.

Opinions Formed Via Personal Experiences

My opinions from my work related experiences were a large factor in my decision to look at the SROs and its problems. I had followed the CPTED rules by taking the time to collect and analyze the data. This study was hopefully going to follow that scientific process and paint a proper picture of the problems and the solutions. I had originally relied on my experiences to form my opinions. The following are a quick snap shot of a few experiences that I have had over the years.

My first experience that I recall was a call in the second month after graduating from the academy. I had been assigned to preserve a crime scene at one of our inner city hotels. A male had been attacked and slashed and stabbed about his face and body extensively with a knife while in an alcohol induced comatose state.

I had stood in this 10' x 10' room for three hours guarding a sea of blood with an army of bugs who had been marching through the blood. It was my first insight into the harsh reality to what some people call home.

Another experience occurred while walking the beat during my first summer as a Police Officer. I was in the hallway of a hotel when a male who was intoxicated and suffering from some sort of mental illness tackled me to the floor. As my partner and I took control of this person, I looked up and observed persons going about their business like nothing had occurred. Violence in these hotels was a common sight.



When walking the beat I responded to one of the SROs with Ambulance Services who had been called to help a male who had fallen in the hallway. While the ambulance was triaging him I attended to his room to look for medication.

I entered his room and found that he had extensively soiled his bed and his white pillow was black in colour from never being washed. His floor was covered with soiled tissues and half eaten portions of food. I returned to the front desk and advised management of the condition of the room.

Two weeks later I had received a call from the hospital as this male had died. I was asked to look for any evidence that would point to a next of kin. I re-attended to the room and found that the room had not been cleaned in any way.

During another time, while conducting an inspection with the Environmental Health Department, we found a male who had died within his room from natural causes. The medical investigator had identified his time of death to three to five days prior to our discovery. Rooms are not inspected or cleaned on a daily basis. Most deaths that occur in these SROs are discovered from the odor that the cadaver will release.

During this same inspection we found a male living in his 10' x 10' room. He had piled clothing and garbage to the full square footage of the room and vertically to approximately six feet. He had a 6' by 3' living space in the middle of this mass and this where he called home.

It was determined that it took him approximately one year to build his nest and this was completed without any objection or action from management. After meeting this gentleman it was determined that he had no addictions though suffered from a mental illness. He was subsequently evicted from his room for bringing unwanted attention and criticism to that particular SRO.

On our first survey, a Research Associate from IUS and I met a male who was alone in a SRO room. He could not talk as he had a surgical hole in his throat. The room had no radio or television and there was blood and saliva stains on the walls. This male also appeared to be intoxicated. This male died alone in his room kneeling at his bed approximately one month later.

While completing this survey, we interviewed another male who believed that he was a Police Officer from Toronto, Surgeon General of Manitoba, the owner of Radio Shack and his brain was part of a radio. It also appeared that he had not washed in a long time. I subsequently took social workers to visit him, from two separate agencies.

Both agencies concluded that he was delusional but not a threat to himself or others. This gentleman remains a guest at this hotel and a prisoner in his own world.



Physical Safety of the Residents

During the years, I have attended to several murders, numerous serious assaults, rapes and countless general disorder calls for service at these SROs. The most remarkable insight to these events is the *liaise faire*, matter of fact attitude displayed by the residents in regards to the high degree of violence that occurs at these locations.

If a police cruiser or an ambulance arrives on a city street most residents will run to their window or to the sidewalk to take in the action and look for information. The neighbours will chat about the severity of the crime and or their new perceived threat to their own personal safety.

In a SRO setting, the majority of residents will not bat an eye at the activity. I had attended to a murder scene recently and had a chance to speak to some of the residents who showed no concerns regarding the severity of the crime or the possibility that their own personal safety had been placed in jeopardy.

During my years of waking the beat, I looked at the natural death rate in SROs and found them to be excessively high. The statistics for the numbers of natural deaths will not be matched unless you are looking at either a hospital or senior care home. I fully realise that these rates are largely attributed to the individual's lifestyle, however, the effects of this type of housing needed to be studied.

My colleagues on this report indicated that they felt that the residents have a strong sense of community. I do not dispute this theory. However, I feel that their sense of community is not in the traditional definition, that most persons would have who live in a regular community setting.

The majority of the hotel residents enjoy the freedom of living in a sector of society that does not place the traditional social demands on their behaviour. This freedom has come at a cost and that cost is their own personal safety, risks to their health and the health of the community. Violence in their rooms and in the hallways is a normal way of life for the residents and they exhibit this reality by shutting down all expectations of personal safety. I look at this sense of community as a linkage to the Stockholm Syndrome as the residents have stopped looking for any type of improvement (freedom) and now have settled with this type of lifestyle (taken on the cause of their captors).

Los Angeles and Non-profit SROs

During the research process, it was discovered that Los Angeles (LA) had in place a system of non-profit SROs. It was decided that researcher from IUS and I would travel to LA to explore this model.

The day after we arrived, we met with Sergeant Dave Demarco of the Los Angeles Police Department, South Central Division. He gave us a guided tours, in an unmarked police car, of the South Central portion of LA that is commonly known as Skid Row.



In this area, there are thousands of persons literally living on the sidewalks, many of whom we observed on the tour. A parallel definition of crime and social problems could not be made when comparing Los Angeles to Winnipeg. The numbers were staggering.

I had first come to Los Angeles in hopes that I would find answers for the problems in Winnipeg. However, I returned committed to the study and the hope that we can one day minimise our problems. It was my opinion that our problems are small and workable in comparison to LA's problems. LA did not offer any solutions to our problems except for their type of non-profits SROs.

My initial hopes were that the LAPD and the collateral agencies had developed a working relationship with each other resulting in an affective attack on social problems. I found instead that there was minimal, if any cooperation, between the police and the various social agencies.

The LAPD appeared to be overwhelmed and in a state of lock down. The social agencies (religious and non-religious groups) were fighting for the funds to keep their programs alive and functioning.

The municipal government appeared to be exercising their control by containment through placing all social services within this one area. There were no visible walls, however, with this distribution/centralisation of social services (and subsidized housing) it was quite clear that the government wanted the problems to stay in the South Central District.

The businesses, who were obviously in conflict with the government's overall plan, were attempting to exploit the situation by displacing members of this society by slowly chipping away at the housing and the vacant areas that accepted the homeless.

Both the profit and the non-profit SROs that we visited were vastly different. The non-profit hotels were clean and full of common sense resources that provided quality of life to the residents.

The most noticeable aspects of these hotels are listed in order of importance that this writer has given to each.

1. Monies earned are reinvested in their infrastructure
2. Management has an overall social goal
3. The retail liquor component is gone
4. The retail food component is gone
5. The area vacated by these retail outlets have been taken over by social agencies who have decentralised their services to the community
6. A quality common kitchen with storage lockers for each resident is provided
7. A common entertainment area is provided

A sad observation was that LA's for-profit SROs offered better services to their clients than Winnipeg's SROs. The municipality of LA, in their wisdom, had not allowed liquor licenses inside the SROs. They had purchased the rights to active liquor licenses and keep them dormant. The non-profit SROs serve as a positive competition that forces the for-profits to keep in step, such as providing a common entertainment room.



The Closure of Hotel X

In the fall of 2002, I had been approached by an officer in our unit who indicated that he was having trouble with a large SRO that was located in his beat. I looked at the issues and developed a plan of attack.

I contacted all of the collateral agencies and then descended upon this property to evaluate the SROs quality of operation. These agencies also attended and made their evaluations. It should be kept in mind that this property was the worse of the worse and posed a danger to the residents, neighbouring community and the social agencies such as the Police, Fire and Ambulance. The hallways were dark and dirty with marks of urine and human waste marking the walls and floors.

The fire protective equipment lay in the hallway in a state of disrepair. Numerous calls of violence and general property crime within the building were marking this location as an unsafe location. The beverage room and the vendor were complicating life in the community either directly or indirectly by its sale of alcohol. The exterior, which was marked with graffiti, showed signs of general disrepair.

After looking at this environment, both in and about this SRO, I had concluded that it was not the structure of the facility that was causing the problems, but the management.

The collateral agencies were able to close the rooms, which prompted the MLCC to close both the beverage room and the vendor. The Vulnerable Persons Unit from the City Of Winnipeg made sure that all persons that were displaced by this closure would find adequate housing. This community had fallen apart.

Eighteen month later, this SRO reopened with the same management, having complied with all upgrading and zoning requirements stipulated by the various City of Winnipeg collateral agencies.

Problems slowly crept back, despite the fact that the beverage room and the vendor remained closed. It was hoped that the issues would be minimal compared to days prior to the closure.

These events prove that it is possible to close a SRO. It is the first time in Winnipeg's history that a liquor license has been permanently removed from a SRO structure. As a Community Police Officer I feel that I had gained a breathing point for the community, however, the unplanned closure of this housing structure disrupted numerous lives.

My job is specific and I will use this same tactic if I feel it is warranted, however, my hopes are that through this study, we can place more emphasis on the issue of planned housing for these vulnerable persons that will naturally displace crime and social issues in our community.

Final Analysis

On page one of this report, I hypothesised that the issues with SROs and our street persons were connected. After this study, and the work that I have been doing in response to the street person problems, I have concluded that the overlapping difficulty is that society's response to these problems have not evolved to keep pace with the issues.



The Community Support Unit's response to both issues pointed to observation and documentation of the problems on the streets and keeping the appropriate agencies advised. As a Police Service we do not create new laws, though perhaps with this research document we could influence change through government action. This Second Generation CPTED tactic will hopefully reduce criminal activity.

The final analysis will only be answered after this paper has been released and the collateral agencies have changed the basic premises to this problem that is:

THAT OUR GOVERNMENT HAS RELIED ON THE RETAIL ALCOHOL INDUSTRY TO HOUSE OUR WORSE ALCOHOLICS, POOREST OF POOR CITIZENS AND INDIVIDUAL'S WHO SUFFER FROM MENTAL ILLNESS."

Constable Gerard Allard



V viewpoints From Community Researcher: Main Street Focus

“Part of understanding and respecting residents of hotels is coming to know them as individuals, their values, and the circumstances that have shaped their lives and the lifestyle decisions that have brought them to live in this setting. The case study of Winnipeg’s Main Street hotels allowed me to get to know several residents beyond what is possible through survey forms alone.

Many residents shared intimate details of their lives during detailed interviews and while simply sitting around peeling potatoes at the back of a soup kitchen. The following portrayals concentrate the information from all conversations into portraits. They are portraits of those who make their home in the hotels along the Main Street Strip. Names and specifics have been changed, but fundamentals of their lives remain unaltered. The Strip is a tight-knit community where people know one another well. To protect identities, many of these representations are composites — not one person who can be recognized by others, but a blend of two or three people sharing similar situations. None of their words have been altered.

George

George is now in his 60s and worked most of his life on major Hydro projects up north, until his legs started “giving out” on him. “*Little by little, I moved from a well-off man to a pauper.*” Several years ago he became divorced and moved to a \$250-a-month room in a Main Street hotel. He now gets by on a pension of about \$13,000 a year.

He’s had clothes and money stolen from his room and each night he barricades it with a chair on which he balances an empty bottle. “*It’s not the kind of life I’m used to. But what can you do? I’ve got two children who are doing well, but I’m sure as hell not going to burden them with me.*”

Mike

Mike is in his 40s and works full-time as a labourer with a salary of about \$25,000 a year. (Wealthy by standards of The Strip — only one person among the 41 people surveyed earned more.) Mike was relaxing in the hotel beverage room a year ago when he helped the bartender break up a fight. One thing led to another — he was looking for some place to live; the owner was looking for reliable people — and he moved in. He likes his room and likes the other people on his floor, although on weekends, the band is too loud. “*I have everything I want — TV, fridge, big bed, hot plate, microwave — and the owner is good at screening people.*”

Albert

Albert is in his 40s and one of “the lost children” (Aboriginal children who were adopted out during the nineteen-sixties and nineteen-seventies). When he was a toddler, he moved “*from an alcoholic family on the reserve to an abusive family on the farm.*” He first arrived on the Strip in the early nineteen-eighties when he was twenty and was coming to look for his birth family. He has lived here ever since, sometimes returning north to a “home” he does not really know. He feels rejected by both of his families.



Home in Winnipeg has been a succession of rooming houses, apartments, part-time jobs, and, for the last eight months, this hotel. *“When people are adopted, that’s where the alcohol comes from,”* he says, recalling years of depression and hard drinking. *“That’s why I took alcohol, to help me forget the family.”*

William

William is a professional engineer with a successful thirty-year career. He married and divorced twice. His children attended private schools and foreign universities. He chaired volunteer boards and canvassed his posh Winnipeg neighbourhood for his political party. But in the 1990s, changing government policies meant he suddenly lost much of the client base he had built up. His long-term relationship broke up at the same time. He was hitting 50, despairing at increasing debt, declining work and failed relationships. *“I had been drinking all my life and getting away with it,”* he said. *“But it affects your mind. Your mind gets all screwed up. It got too much for me. I lost my home, my family, went on assistance.”* He hopes to move out once he finds a decent job.

Harry and Anne

Harry and Anne are seniors. Harry’s eyes light up as he tells stories of his childhood and of his years spent working on the railroad. He is a pensioner now, living here for the last six months. On the day of the interview, Anne was sitting in a room a few doors down the hall when Harry invited her to join him.

They have been quietly drinking all afternoon. Before this hotel, he lived at the Sally Ann (Salvation Army Hostel). *“But I couldn’t drink over there,”* he explained. *“I respect them, but everyone likes a drink once in awhile. We don’t bother anyone, do we?”*

Larry

Larry is in his 50s and offered a unique view on one hotel, *“It was like paradise”* he said. *“I savoured every minute.”* His view was positively ecstatic because he had just spent a hard month living on Winnipeg’s streets. He turned down sleeping in a shelter because they had too many rules. He chose instead to construct his own shelter on the riverbank made from rugs and boxes. His sister, who works at a regular job and has a regular family, bought him a few nights in a hotel. The contrast was striking — warm, dry, out of the rain, television, and a soft bed. Now his caseworker has extended his stay to month-long rentals.

Frank

Frank, who lives next door to Larry, has a completely different take on the same hotel, *“It’s a filthy pig sty, no fire detectors, no housekeeping.”* Frank was pushed into the hotel by Employment Income Assistance policies. He is in his early 20s. He just got out of a three-month sobriety program and had to find a place to live in twenty-four hours or he wouldn’t qualify for assistance. He sees the hotel as filled with substance abusers. *“I’m on welfare, trying to get off drugs. All they give me is \$250 which forces me into a shitty hotel in a shitty area where drugs are.”*



Matthew

Matthew is in his 20s and seems a quiet man to talk with. He arrived at the hotel two months ago after being kicked out of a hostel on the Strip. He spends a lot of time sleeping or sitting in his room. But he's subject to extreme mood swings. A few times a month he becomes extremely aggressive. One night, he and a friend played football at two in the morning, tackling each other in the narrow hotel corridor and banging their bodies against hotel doors. The next day, Matthew was taken to the psychiatric ward for a three-week duration. He's back on his medications and looking forward to returning "home" to the hotel, one of the only places that accepts him without a lot of rules and constraints.

Linda

Linda is in her 40s. She was "raised with alcohol" on a northern reserve. "My family, they just ditched me when I was very young. A social worker came and got me." She had three children of her own by the time she was 18. In her 20s, a fight in a Winnipeg bar sent her to prison. When she got out, she had learned to be a survivor. She found a job and started raising her kids. She stopped drinking for ten years, but started again a few months ago when her father died. She lived in a Main Street hotel this past winter and is returning to her work in the country for the spring and summer. "It's hard to stop drinking in the hotel," she said. "If you say no, your friends say, who do you think you are?"

Stan

Stan has called the same hotel room "home" for fifteen years. He worked construction until last winter when he became partially disabled. He's now on Employment Insurance and awaiting a doctor's verdict about whether he will go on a disability pension. He pays \$350 for a two-room suite. The bathroom is shared in the hall. He has built most of his own cabinets and furnishings.

There are several other long-term residents on his floor and they all know each other, many leaving their doors open. When his grandchildren visit, they run from room to room. "They know everybody; everybody knows them," he says. "These rooms are our homes. You can take care of them, or you can live like a pig. It's up to you."

Data collected from the forty-one resident surveys, twenty personal interviews and weeks of observation during the Main Street case study point to the following four general characteristics of SRO residents; variety of people, indifference-independence, poverty and substance abuse issues.

Residents don't talk much about the guy next door who works all day, has dinner and a few beers and then sleeps all night; instead they focus on "the guy who lives next door and screams all night long." Probably all hotels on the Strip have a variety of all types of residents. Some hotels have rigid screening to keep out the more undesirable residents. But most hotels take in nearly everybody, at least until they become problems. Estimates of how many will become problems vary, "Ninety-nine percent of these people are nice people. One percent screw it all up."



“They don’t bother me and I don’t bother them.” Again and again, hotel residents laid this down as the fundamental code of the Strip — *“You leave me alone and I’ll leave you alone.”* This code fits well with many residents. It brings a degree of acceptance and independence, particularly for residents with mental disabilities who have had people judge and try to change their behaviour for much of their lives. Workers from several agencies who place people in hotels selected independence as what their clients liked most about hotels — the ability to live their lives without a lot of rules.

The vast majority of hotel residents are there because they cannot afford anything better. Monthly rents range from \$230 to \$350. Out of the forty-one respondents, 62 % were on EIA or disability, trying to live on incomes as low as \$5,280 a year. One described Employment Income Insurance (EIA) as, *“If you can’t work, we’ll give you just enough to let you keep crawling around.”*

Another worked out details of his budget — \$236 a month for a housing allowance, \$180 a month for all other expenses (food, toiletries, bus, entertainment, etc.) — \$6 a day, *“only enough for macaroni.”* Low EIA rates are part of a culture of poverty — hotels, soup kitchens and the necessity for residents to make an extra buck, however they can. Get two bus tickets from EIA and sell them for \$1 each at the store. (The store sells them for \$1.50.) *“You spend the day surviving,”* said one resident. *“If you make the day, you’re alright.”*

Despite the sense that hotels are hostile environments, there were many positive comments about the sense of community in hotels and on the Strip.

Several comments revealed a world in which relationships are transitory and fleeting. Even between the same people, relationships can sometimes be good, sometimes bad. *“It comes and goes, there’s such a high turnover rate.”*

One of the multiple choice questions asked in the survey was: Do you feel people get along together in the hotel sense of community?

Twenty-four residents answered this question. They responded, very much (9), somewhat (11), and not at all (4). Most significant is that five of the nine residents who answered *“Very Much”* came from the same hotel, a small hotel that screens prospective residents very carefully. Residents of this hotel showed the highest degree of community of all residents in all their open-ended responses.

“Like a family, cook a turkey dinner and take it around to the rooms at Christmas.” There remains little doubt that the Main Street area is a complex mix of people and varied environments. Some persons appear better off, making a few more dollars from which they are afforded a higher quality of life, while others struggle to find identity and a place they can call home.

Etched in the voices of residents is the impression of *“their neighbourhood.”* The soul of the area is stretched across a street that is widespread with problems but also with people and their stories that are not yet told.

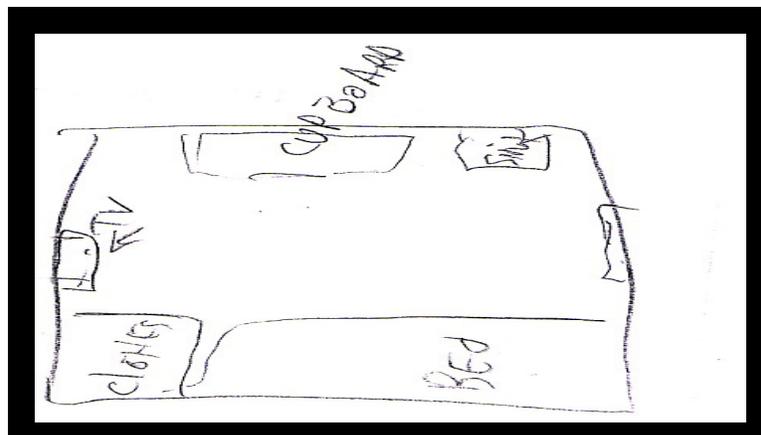
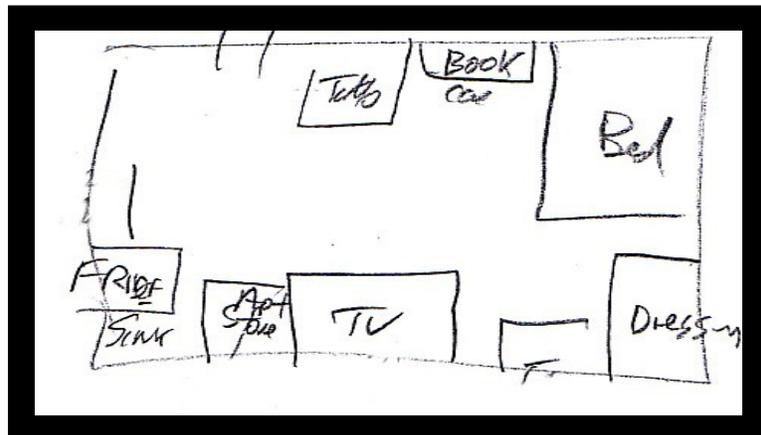
Regardless of the physical condition of the room, there are some people who take the trouble to *“make it their space.”*



There were twice as many negative comments about rooms and physical conditions as positive comments. Among the concerns was the small size of their rooms. A lower rental rate gets you a narrower room, a dresser, no amenities and a shared washroom down the hall.

“I asked where my TV was. They said someone must have stolen it.”

As the price goes up, you might get a better-quality room, a hotplate, a fridge, a TV, a phone and your own washroom. Some residents drew sketches of their room, shown below:





Frequency of housekeeping services ranged from daily cleaning of hotel rooms to twice a month or even less. Although a few rooms have their own washrooms, most hotels have only one or two shared washrooms in the hall on each floor.

“The washroom is gross. The tub is brown and the lock doesn’t work. The flush doesn’t work, have to fill it with water.”

Many residents felt that the addition of laundry services would be an asset.

“They have laundry machines but they’re out in the open. People steal your clothes.” ... “I do my wash in a bucket in my room.”

There was a fair range of positive comments about rooms and their physical conditions. Visits to rooms in several hotels along the Strip left one over-riding impression: rooms in these hotels may be shabby, but they are made more or less so by the care given to them by staff and by the people who live in them.

One resident who had been a professional involved with constructing homes and apartments had these thoughts about the hotel where he was living:

“They could convert these rooms into basically good rooms for much, much less than it would cost building new units. Not everyone needs a big apartment. Make sure the plumbing and heating work. Make sure everyone has a fridge and a hot plate.”

“Most of the rooms already have a TV and a phone. What they need most is better security. Most of the doors have been kicked in at one time or another. Fix them. And reconfigure the lobby area so that the hotel rooms are completely separated from the pub.”

Often residents will get a better quality room by working in the hotel. In many hotels, residents do almost all the work: sitting at the front desk, rolling cigarettes for sale to residents, unloading beer trucks, washing dishes in the restaurant, running the carpet-cleaning machine.

Having to live with so little money (\$180 a month for all food, clothing, recreation) makes it a constant struggle simply to survive. Many residents said they depend on missions for their basic meals. Several missions on the Strip offer meals, freeing up some of the EIA money for other needs. One resident explained:

“The restaurant takes most of the money, eat like a king for 2-3 days, and then you have to survive, use the missions.”

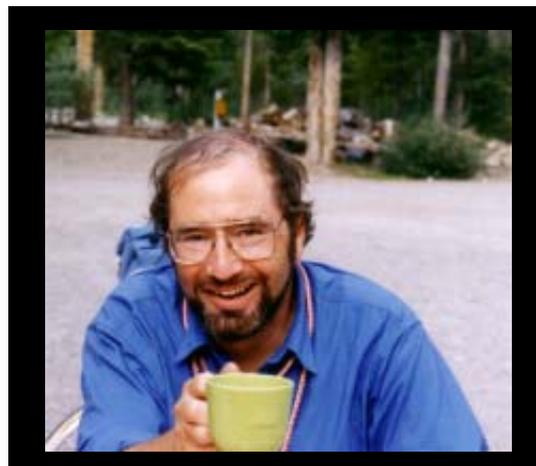
Another resident explained:

“The reason people exist here now is because you can access any service you want without having to pay bus costs: the welfare office, social services, employment agencies, the missions (which are an absolute necessity), food bank, medical services, addiction services, access to a worker to help them straighten out their lives if they’re interested.”



One resident summed up:

“There are so many people who are poverty pimps, feeding off the poor and the misery of others. ...Drug dealers ...Bars that take advantage of people, serving them beyond capacity ...Missions that make you sit through a 15 minute service for food ...And government is the worst. Social Assistance forces people into this environment. They fill rental forms out but don't check up on the environment they're forcing people into. They're supposed to try and better the people but they have no knowledge of how to do it. Everything is just band-aids. People have a big cut, but they're just giving them a little band-aid. They don't go to the major thing that is harming people: Self-Esteem. The more you've been beat up in the world, the lower your self-esteem. If no one in the system is helping people with their self-esteem, it's just repeating the cycle. It's not making people self-sufficient. It'll just go on and on.”



Mike
Community Researcher



Viewpoints From Sage House

“I have been doing hotel outreach for the past three years to most of the bars on the Main Street Strip. During hotel outreach we provide assistance to individuals requesting help. Our target group is women but also deal with men, as they are often the partners of the women we are trying to reach. When on outreach we offer to help individuals with advocacy, referrals to treatment programs inform the women of what services Sage House offers, as well as nursing services. We have also helped to locate children lost to CFS, carried out memorial services for individuals who have passed away, delivered birthday cakes and offer an ear to listen to the people. All of the bars have allowed us to provide blood pressure clinics within them and have stated that they look forward to future such clinics being offered.

This all began because one of our participants had been banned from our drop-in yet needed our services as her health was at risk. We attended to the bar where this individual lived and were able to negotiate with the bartenders to hand out medication to her. They recorded when the meds were given and took an active role in this endeavor. They would always inform us if she was compliant or difficult when taking her meds. They permitted us to be privy as to her whereabouts and seemed genuinely concerned about her well being. When she died on the street, it was the bartender who identified her and gave her some dignity in death.

This is just a small example of what we have encountered in most of the bars on the strip. Each of the bars seems to care about their patrons and one can truly feel a sense of community within each establishment.

Many times when we enter a bar a waitress will inform us of someone who needs our services. Because we are affiliated with Mount Carmel Clinic, we are often able to fast track them to a doctor. This shows that there is caring and concern for those who live within the hotel and that they are seen as important and are cared for. In one particular hotel, the owner makes it his business to care for his renters by helping them with accessing services from different agencies. This owner has been most receptive to our work being carried out in his establishment.

What I have found in these hotels is that most people feel that it is their home. They know their neighbours and tend to look out for each other. As to the client that died, often when we walked into the bar, the other patrons knew us and would tell us how she was feeling that day (if we hadn't been able to see her). They showed us that they cared about her well being. It is not too often that I hear complaints from the people, sure there have been problems but for the most part, they are content to stay where they are. Many of these individuals choose to live in a hotel because they feel safer there than on their own, they enjoy the other people and they feel that they belong and are accepted as they are.

I know many people think that only “drunks or addicts” live in these hotels but that is not true. We also have the elderly, individuals with mental health issues and the forgotten. While many people put down the hotels on Main Street as “bad” and they are often used by agencies, those that society has deemed as “deviants.” Some of these “housed deviants” have lived in hotels for years, some over 20, and have no desire to go elsewhere. The hotel is their home, their community and their family.”

Andrea Baigrie

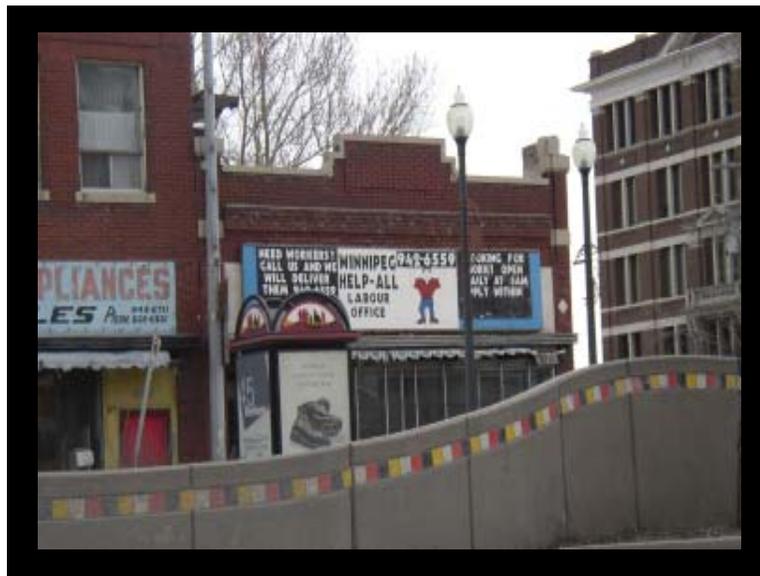


Viewpoints From Main Street Project

“A number of clients from Main Street Project depend on the hotels in the area for accommodation and other services. For some, that is the only life they know or feel comfortable with.

Whether that lifestyle is perceived as beneficial or detrimental to a person’s well being, for many the hotel is a community, the only family they may have. It may be true that the hotels take advantage of the residents; at the same time, these residents may also be seen as a responsibility, similar to that of a family.

For patrons, there is a sense of belonging and connectedness that is so often lacking otherwise. Winnipeg needs to find ways of minimizing the negative and taking forward the positive aspects of Main Street hotel life. This is preferable to doing away with these hotels.”



**Daily Labour Office
Main Street**



V viewpoints From Siloam Mission

Siloam Mission is known as a leading faith-based social agency to Winnipeg's poor and homeless, with an estimated 80% of the inner city community frequently or occasionally utilizing our services. 2003 service figures included: 70,000 Meals, 4,000 Clothing Bank Visits, 1,000 Food Hampers and 800 Practical and Spiritual Assistances (i.e. advocacies, referrals, counselling, literacy, bible studies, chiropractic treatments, resume preparations and faxing, income tax form preparations). On average 300-400 people come each day, which is a four-fold increase over the past two years.

Single Room Occupancy (SRO) tenants frequent Siloam Mission for two primary reasons:

- 1. SRO rooms typically do not have kitchen appliances; therefore tenants have no means to make nutritional meals, which Siloam Mission freely offers.**
- 2. SRO rooms are small, and their overall atmosphere is demoralizing; therefore tenants utilize our drop-in centre as an opportunity to socialize in a positive environment.**

All that to say: Siloam Mission is uniquely positioned to intimately know SROs tenants, and their stories. SRO tenants realize there are few affordable housing options for them, and they are largely grateful to have a room and a bed. However, Siloam Mission staff and volunteers hear two dominate issues of concern: security and tenant rights. Before addressing those concerns further, it is acknowledged that some SRO tenants are high-risk to cause expensive damage, and owners face exorbitant costs to maintain and repair their antiquated properties.

However, it is our opinion that hotel owners have the responsibility to offer a safe environment for the rent they charge. As well, as a society, we have the responsibility to ensure that our communities "least fortunate" are given the same protections the rest of us have. Simple put, we see the concerns of SRO tenants as basic dignity issues.

The Dignity of Security

Violence and theft are commonplace in SROs. Tenants are afraid to leave their rooms, and they are afraid to stay in them. Doors are flimsy and often broken. The halls, stairwells and washrooms are not monitored well. Better tenant screening, public area security cameras (halls and washrooms) and increased security personnel would go a long way toward making tenants feel safer.

The Dignity of Protection

It is not uncommon for our patrons to come in with all their belongings because they were evicted from their rooms with no notice. It is unclear to us why provincial social assistance money is given directly to SRO owners to house tenants, but those same tenants are not afforded any of the provincially legislated tenant rights that other renters have. While this entitlement may be in the owner's best interests, it also leaves tenants at the mercy of owners and managers, who are empowered to evict anyone, at anytime, with or without just cause.

Hotel owners/managers are also often accused of taking unfair advantage of tenants through credit accounts. It is not our place to debate whether a line of credit is a legitimate service or what a fair level of interest should be. However, lines of fairness are likely being crossed at the expense of vulnerable, desperate people."





Winnipeg Hotel Owners



1971

Picketer Winnipeg City Hall

Tribune Archives

University of Manitoba



Historical Review

In 1913 the Bronfman family purchased the Bell Hotel for just under \$200,000. At that time, the hotel was viewed as one of the finest smaller hotels in the area, and more important, it was thought to have the potential to generate substantial profits.⁴³ During the early 1900s, most of Winnipeg's downtown hotels were able to profit from the strong locational advantages they enjoyed being located in the heart of the city. Many hotels capitalized on their location relative to the two passenger trains stations that brought thousands of people into the area, including tourists, business persons and arriving immigrants. Hotels were also well situated on Winnipeg's electric streetcar lines which ensured that a steady stream of potential hotel guests and bar patrons would have easy access from all parts of the city. Gray commented that the Bell hotel "was within 200 hundred yards of the C.P.R. station and midway between transfer points of half a dozen streetcar lines."⁴⁴

Historically, owners of hotels were able to reap the profits of a bustling downtown while also quenching the thirst of many who frequented the bars and lounges. During the height of Winnipeg's growth, the image of the Main Street area remained that of a precarious balancing act between prosperity and indulgence. There is little doubt that owners thrived on the profits of liquor and food while neglecting to upkeep an aging hotel stock. Gray noted that perhaps it was around 1915 when hotel owners first began to sense pending change within the industry. With the advent of the First World War, a reduction in immigration, and a slide in property values, many hotels owners experienced a decline in both profitability and profile.

As the 1950s approached, further change was evident in the downtown. The prominence of rail traffic was beginning to wane, property values were continuing to slide, and the deterioration of the area was emerging. Hotels seemed to survive but profits appeared to be driven more by the sale of liquor as opposed to the renting of rooms. Immigrants still arrived by train and sought places to stay, but the winds of change were blowing.

Certainly by the 1970s, the Main street area had been transformed with the loss of businesses and increased vacancies. Cars pushed people outward and tourists began to find comfort in the "motor hotels" located on the outskirts of the downtown and city. One might also speculate that "air traffic" as opposed to rail began to dominate the mode of transportation, and further separated the central hotels from arriving visitors.

As the character of Main Street changed, so too did the image of the area and the clientele residing in many of the older hotels. Although the area was always known for its notorious undercurrent, the sweeping blight cemented the perception of "the Strip" as a negative atmosphere, driven by the image of drunkenness and poverty, as opposed to a perception of them having an overwhelming need for affordable shelter in a city struggling to its most needy. A former owner of one of the larger hotels on the Strip commented that his hotel managed to survive the arrival of air traffic and had a direct line at the airport, but as the 1970s progressed, a marked change began to envelope the area, and he too fell victim to the changing demand of hotel clients. He further commented that this also heralded an increasing reliance on the long-term guest, even in some of the more prosperous hotels in the area.



C urrent Affairs

Within this milieu, “the Strip” emerged as the SRO hotel zone, catering to a clientele that was increasingly transient, younger and jobless. Fewer immigrants arrived by train and stayed in hotels, while still fewer seasonal workers took up long-term residence. In discussion with numerous owners, the 1970s and onward, resulted in a continued focus on generating profits from activities unrelated to room rentals. However, owners also began to face an aging hotel stock that needed increasingly higher levels of reinvestment than previously. The once stately hotels of the early 1900s were fast becoming decrepit and obsolete. Rooms with bathrooms “down the hall” were less appealing to the tourist or guest seeking a longer term stay or a convenient and central location. The focus then shifted to an increasing societal problem: poverty.

In response, more and more, hotels began to provide inexpensive rooms to make up for the inability of the general housing market to accommodate those most in need of affordable shelter. Hotels also became a “dumping ground” for those “too hard to house” in either more mainstream accommodations or in care institutions that were turning people away.

Certainly, owners pointed to the increasing rate of de-institutionalization of persons, a process that did not offer the corresponding supports and outreach to facilitate the transition. Owners have also indicated that they are increasingly frustrated by the lack of support for residents who suffer from varying medical conditions. Owners are continually asked to house persons in need of personal care, but are offered no additional resources to provide these services.

One owner commented:

“Hotels are often the place of last resort for many persons with mental disabilities, especially those who have not been successful in other accommodations such as group homes, hostels or supportive housing.”

In fact it was contended that some health care workers are placing an increasing number of susceptible persons into SRO hotels. One owner also felt that he was being asked to provide “supportive housing” without any of the support, nor the same level of funding. It was also noted that many owners and staff provide what might be termed supportive care as they dispense medicine, take people to appointments and provide other needed assistance to an increasing number of persons incapable of helping themselves.

It is important to note that the owners consulted in this study stated that they provided reasonable accommodation to persons in need of affordable housing. To this, one owner commented that:

“I believe this is a real model, an inexpensive way to help people. I’ve visited the psyche ward. You would not want to go there. They’re drugged up, locked up, and cooped up. Here they have their freedom.”

Owners were also adamant that they:

“Respect a person’s right to choose a lifestyle with indifference independence.”

This is perhaps one of the more powerful comments offered by owners: that the choices made by a person, no matter what, are their fundamental right.



There was also consensus that there is a place for the Strip in society and that the responsibility for affordably housing persons in need has fallen onto their shoulders.

Like any business, hotels can only survive if they generate a profit. For SRO hotels, the emphasis has been on securing long-term residents, and by the sale of services to guests. In discussion with owners, there appeared to be a consensus that profit from the sale of liquor is critical to their survival but that this revenue stream has continued to drop over the years. Raising room rents is tougher as most of the rooms are in the lower range of the rental spectrum and thus this is not seen as a viable option. In a similar vein, increasing the cost of food and beverages in the hotel is also difficult as most cannot afford present levels. However, many owners suggested that finding ways to provide quality meals to residents would not only help them financially, but also ensure that the residents have access to decent meals on a daily basis. Furthermore, some owners felt that a partnership with Employment Income Assistance or other agencies could be the vehicle to provide such a needed service.

Owners also noted that the \$236 paid for shelter by Employment Income Assistance (EIA) is inadequate and has not changed in more than a decade, whereas before 1993, this rate was adjusted according to inflation rates. Without the ability to offset increasing operating costs through room rate increases, owners have been effectively squeezed by the system, and in turn, they squeeze guests for any profit they can. The result is that many residents pay rates in excess of the EIA allotments, which puts a huge strain on their limited disposable income.

In a report by Distasio et al (2002) similar findings were observed within the rooming house community in which many residents routinely pay in excess of 25% more on shelter than they are provided by EIA. This “squeeze play” puts residents under increasing financial and emotional strain.

To manage this, most become reliant on the burgeoning “industry of poverty” that has developed a strong foothold in the area. People who pay an increasing amount of their money to shelter become dependent on food banks, soup kitchens, and missions for food and support. Equally important is the fact those persons who are employed in lower paying jobs may become squeezed, as they too would be ill-equipped to absorb substantive increases in rent if the owner were to frequently raise rental costs.

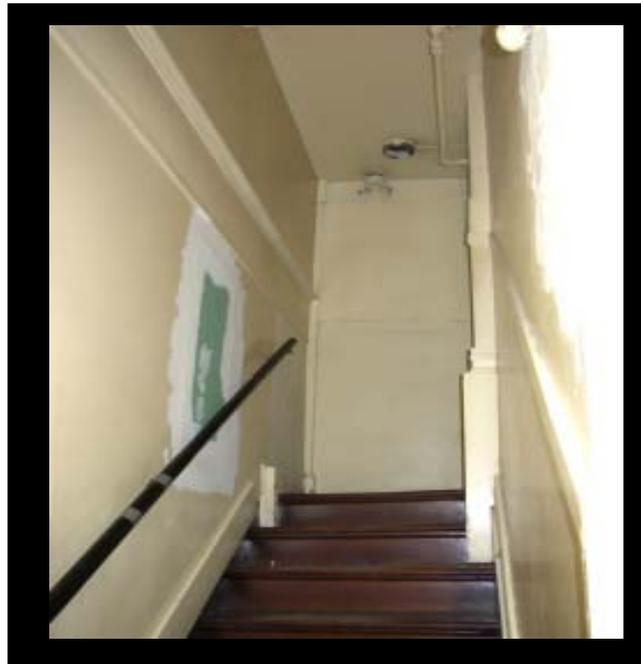
Discussions with key informants revealed that many hotels also derive profits from an informal economy based on inflated prices for items and services bought on “hotel credit” and paid for monthly through reimbursement from Social Assistance cheques. Owners and other key informants contended that some hotels operated in an unscrupulous manner, in this aspect, taking advantage of persons through a variety of illegal operations. However, it is important to note that there remain an equal number of owners who genuinely care about the welfare of their guests and run a “clean operation.” In many ways, the ability to house persons at an artificially low level has created a desperate situation for both SRO hotel businesses and residents, who both must somehow try to survive.



Another concern with the operation of an SRO is the ongoing cost of maintaining buildings that are, in some cases, in excess of 100 years. Utility costs, maintenance costs and upgrading are only possible if the hotel is profitable or an owner has pockets deep enough to incur short-term losses.

Hotel owners stated that they are, in some instances, forced to downgrade room amenities (rather than upgrade) to mitigate losses occurred by damages through whatever means. Many felt that no mechanisms exist to compensate them for room damages simply because residents have no ability to pay. However, many did state that they provide better rooms to those who care for the property.

Furthermore, owners said that housing persons with a range of abilities is difficult, as some persons simply cannot adjust to mainstream living, especially those who have been released into their care.



Repairs Being Made to a SRO Hotel Hallway



C concerns of Hotel Owners

1. Evicted tenants shift around to other hotels that are willing to take them.
2. Social Service rental forms have no required information other than the resident's name.
3. Financial losses to owners are contributed by the lack of notification by EIA that a tenant has had the shelter allowance discontinued. Hotel owners often do not learn the resident was expected to move at the end of the month until a week into the next month. This leaves the hotel owner with an empty room for the entire month coupled with the lost opportunity of a monthly rental from another tenant.
4. Hoteliers feel that there is little respect for their businesses or the safety of themselves, their staff and their residents.
5. A significant percentage of the residents have proven to be violent, and present a real danger to other more vulnerable residents.
6. Hotel managers and staff often find themselves in the role of caregivers. In many cases, they must shuttle tenants to their doctor's appointments and ensure that their medications are taken.
7. Recently, they have noticed the extra preparation that medical professionals are taking when dealing with residents raising fears that HIV-positive residents are on the increase. Concerns as to whether residents are receiving sufficient health care are increasing.



Recommendations by Hotel Owners

1. Social Assistance should develop a new definition for those residents who require a greater range of services, such as medical needs. Because hoteliers are often in the role of caregiver, they feel that they need more information regarding residents at risk.
2. It would be more efficient for social workers and health professionals to attend to their clients at the hotel.
3. Hotels should be able to bill for a daily rate in cases where they were not notified that a tenant's shelter allowance has been terminated.

There is little doubt that the operation of an SRO is complicated and often fraught with challenges and misconceptions by the general public. Owners assert that they play a significant role in providing affordable housing to the nearly 1000 persons living in downtown hotels.

One owner feels that he tries the best he can by driving persons to doctor appointments, dispersing prescription medicines, managing finances and generally taking an interest in the lives of those persons living in his hotel. Another owner routinely gives residents money for cigarettes, while also being the in-house barber. On the other end of the spectrum, some charge residents many times the going rate for items bought on credit, but again, this may be taken in the context that operating an SRO hotel has darker side.

The bottom line for owners is that they must be able to make a profit to ensure that they are not only operating a viable business, but that they are able to provide decent shelter at a reasonable rate, while also being able to maintain their buildings.



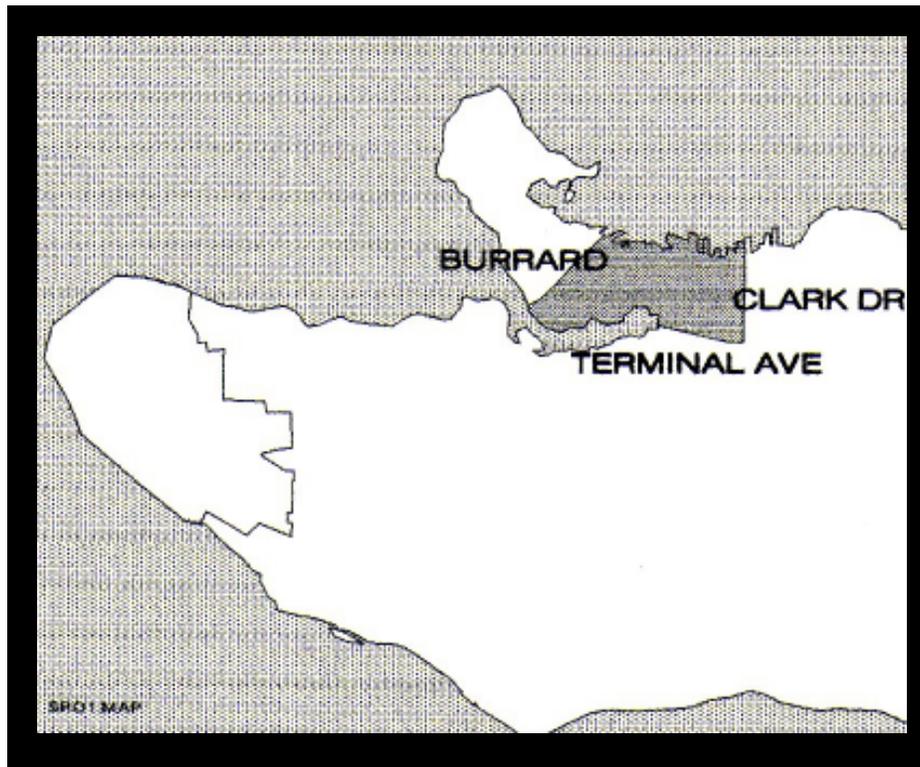
Many owners see themselves as providing the last address before the street to those persons “hard to house” who have no other place to go as they have worked their way through the system. So owners take in some of the hardest to house in conditions that range from acceptable to degrading, but they do so under their own will to carve a business into a landscape that has changed dramatically since the early 1990s when streetcars and passenger trains brought well-minded persons to their front desks lobbies.

It is suffice to say that those times are gone and have been replaced by a harsher climate of increased desperation. Within this storm of change, people survive and live their lives along a street that holds few rules and accepts all.

Owners play a vital role in offering something that mainstream society has not: a place to stay. There are better places, but for some the SRO is *their* place.



Vancouver: Case Study One



**Downtown Core
City Of Vancouver**



Vancouver: Historical Review

Vancouver's downtown core (also known as the Downtown Eastside) has the largest concentration of SRO units in the city, where historically, seasonal workers found low-cost accommodations and entertainment. Since the early 1970s, the area has lost 43% or 7,600 affordable SRO units. ⁴⁵

Around 1914, the Downtown Eastside was the city's centre of warehousing and transportation, containing numerous sawmills that supported the burgeoning lumber industry. The term "skid road" stems from this period as the logs were "skidded" on their way to the several mills. During this time, skid road was a place of excitement where there was a large concentration of bars, hotels and brothels that catered to the single men who laboured in the logging industry. ⁴⁶

The first signs of decline in this part of the city emerged during the Second World War as manufacturers divested from the region in search of inexpensive land far from the Downtown Core. This was coupled with a declining base of migrant workers but an increasing number of retired resource workers, many of whom had been injured in industrial accidents. ⁴⁷

By 1960, concerns were raised over the poor quality of housing and the detrimental effects on the residents in the area. A transient population of middle-aged men joined the demographic make-up of the retired resource workers. Substance and alcohol abuse became increasingly noticeable in this rapidly declining area. As a means to counter this downwardly spiraling situation, urban renewal schemes began the steady process of conversion, demolition and closures of many SRO hotels. Meanwhile new projects were injected into the area to reverse the decades of decline. ⁴⁸

In 1986, the City of Vancouver hosted the World Exposition (Expo). As the city prepared for the event, concerns were raised over the further displacement of residents resulting from the conversions of SRO hotels into tourist hotels. As the residents held no tenancy rights under provincial legislation, eviction and displacement was not illegal and took place at an alarming rate. ⁴⁹

Social activists lobbied for a "time-limited, no-rent increase, no-eviction legislation" that would be applied to residential hotel residents, however, the proposal failed to pass by City Council because of the belief that "no hotel owner would evict tenants." ⁵⁰ In the end, 700 to 1,000 residents of SRO hotels were displaced during this event. Almost all of the hotels returned to residential use the following year. ⁵¹

An outcome of the tumultuous 1980s resulted in the formation of The Tenants Rights Action Coalition (TRAC), a community-based coalition of groups and individuals who lobbied for tenancy rights of SRO hotel residents. In 1989, tenants living in residential hotels were granted protection under British Columbia's Residential Tenancy Act. If a person is paying a daily rate of \$20 or less, they receive full protection under the Act. ⁵²



Vancouver: Legislative Practices

As of October 15, 2003, the Vancouver City Council enacted the Single Room Accommodation (SRA) By-law.* The purpose of the by-law is not to prevent SRO conversions, but to manage the rate of change in the portions of the existing stock in the city's downtown core only. The by-law applies to rooms that are 320 square feet or less. A provision of the By-law requires that 10% of rooms, within each SRA, be set aside for the tourist trade. ⁵³

The owner of the SRA must obtain a conversion/demolition permit, which is acquired through City Council's approval and conditions may accompany the permit or the permit may be refused. If a conversion/demolition takes place, the burden of moving/relocation expenses (for the tenant) rests with the owner of the SRA. \$5,000 per loss of room must be paid to the City by the SRA owner, which will then be applied to a reserve fund. This fee will be used for the future replacement of an SRA room. Demolition/conversion permits are valid for one year only. ⁵⁴

The Standard of Maintenance By-law has requires that SRO operators have sufficient bedding and furnishings in the rooms. Furthermore, the by-law states that they must be maintained in a clean and wholesome manner in tourist accommodations, including SROs. The city has a coordinated Integrated Services Team to ensure satisfactory health and safety of the tenants and the physical conditions of the building are up to code. ⁵⁵

The City of Vancouver has been creative and proactive by purchasing and renovating the Gresham Hotel in 1990 and The Old Continental Hotel in 1993. Since they reopened these hotels they have preserved them as affordable SRO units. Furthermore, the city allocates a portion of development levies in selected downtown areas for the provision of new affordable housing including the purchase and upgrading of SRO hotels. ⁵⁶

The Vancouver City Council is pro-active in addressing the status of the affordable housing stock through the implementation and enforcement of by-laws and the allocation of development levies that serve to protect the SRO housing stock.

The city has a strong leadership within civil society that has lobbied for low-income housing. The results have been the formation of the Tenants' Rights Action Coalition, which continues to strive for the rights of low-income persons.

Finally, there is no uncertainty regarding the role each civic department plays in the in the application and enforcement of the by-laws associated with SROs. Moreover, there is accountability in the system with the implementation of the Integrated Services Team, that inspect the SROs on a regular basis.

* The terms *single room occupancy* and *single room accommodations* refer to the same characteristics of a typical 10' by 10' room. Both terms will be utilized in this section.





Central City East Los Angeles, Skid Row: Case Study Two





H

istorical Review

In 1781, the Spanish founded Los Angeles in an area along the Los Angeles River. The city's primary role was as an agricultural station that supplied nearby Spanish Missions until the construction of railroads in the 1870s. During this period, the city began to evolve from its original agricultural nature to an industrial district. Similar to earlier times, the industrial activity was seasonal and attracted a transient population, most of whom were men who coming into the city for work. This transitory population gave rise to the development of single room occupancy hotels comprised of small rooms and communal baths. ⁵⁷

Even before the Great Depression, (the Great Depression began in late 1929 and lasted for about a decade) the city attracted "unemployed rail riders and others who migrated from place to place because Los Angeles was in effect the end of the railroad in the United States." ⁵⁸

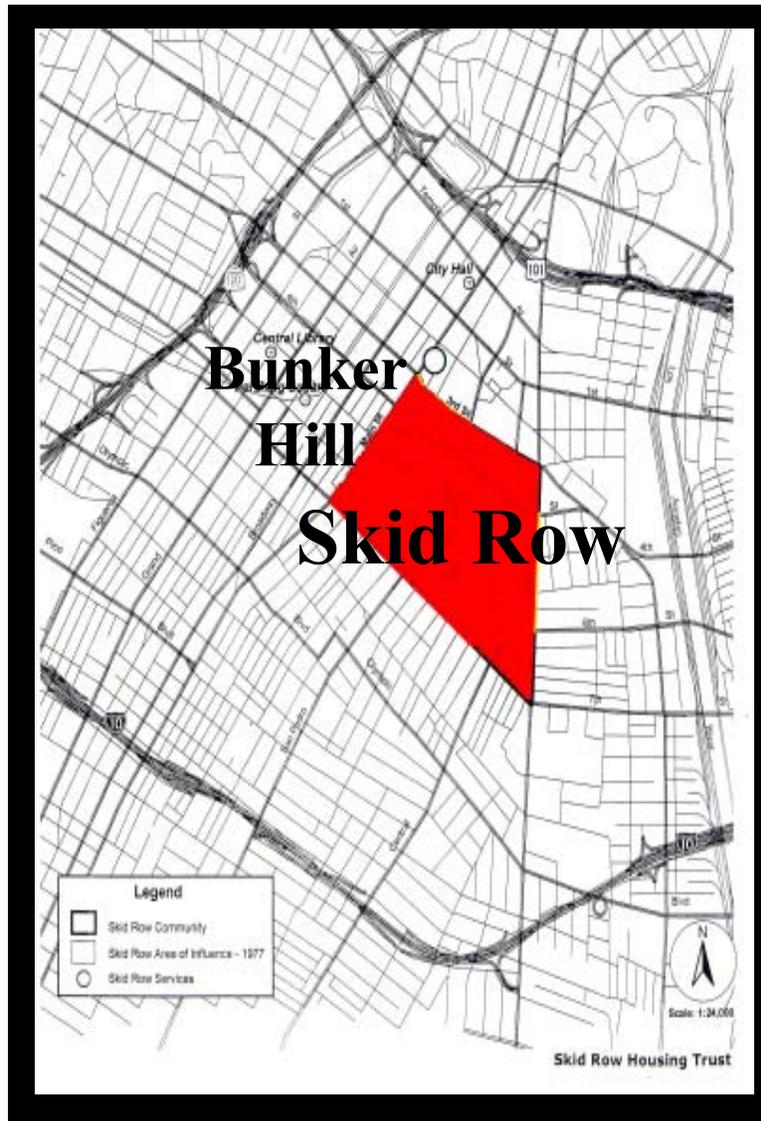
Many of these people could not afford shelter in hotels or other accommodations. In response, faith-based organizations constructed shelters and delivered services to the homeless. Many of these shelters still exist and trace their roots back over a hundred years.

After WWII, the demand for hotels by seasonal employees and railroad workers declined and the hotels became primarily a stopping place for people in transit. The area came to be known as Skid Row because of the availability of social services and affordable housing. Those who could afford to moved elsewhere in the city.



By the early 1970s, the City judged that the majority of affordable housing in the area were not meeting health and safety codes. The revitalization of Bunkerhill (see map) took place in accordance with the Central Business District Redevelopment Plan (CBDRP) but resulted in the displacement of many low-income residents. The Skid Row area was the second community to be targeted for redevelopment. Many other cities, at this time, were demolishing or conducting “slum clearance” in order to attract capital back to the central business district. The people of Los Angeles protested against the “slum clearance” of Skid Row and were successful in ceasing redevelopment and subsequent displacement of local residents. Furthermore, city planners reevaluated the CBDRP and placed affordable housing high on the list of priorities, and sought ways to preserve and protect the stock.

In 1976, Los Angeles City Council adopted a new Redevelopment Plan (RP), which sought to stabilize Skid Row through what is known as the “Policy of Containment.” The plan intended to stabilize the area through the formation of a light industrial area, the concentration of social services and the preservation and expansion of affordable housing. Because all three components of the policy of containment affect the management and residents of SROs, it is necessary to examine them beginning with the surrounding light industrial area. 59





Light Industrial Area

The Garment, Produce, Seafood, Fashion, Flower and Toy Districts surround the Skid Row area, each with their own manufacturing structures. The RP plan has subsidized these industries with the intention of providing casual labour to residents of Skid Row. Approximately 6,000 people are employed in 485 businesses in Central City East Los Angeles.

Each of these industrial districts has non-profit organizations known as Business Improvement Districts (BID). The mandate of these BID's is to provide information to visitors, generate feelings of safety, and maintain general cleanliness of the area. Their goals are to provide an improved business environment, including a pleasant shopping experience.

However, one year after the policy of containment was established (1977), the entrepreneurs, supported by local BIDs in Skid Row, fought against the jobless. They demanded police action against the homeless, the same population that the city sought to concentrate. They used zoning regulations to advance their own interests, which resulted in half of the skid row area now taken up by industrial districts. The loss of affordable housing has slowly occurred during this process.⁶⁰





C oncentration of Social Service Agencies

In the fifty-block area of Skid Row, there are close to sixty social service agencies that provide shelter and services to the residents. There are more programs that serve the male population as it is viewed that women with children should be discouraged from living in the Skid Row area. Conditions and regulations vary among the shelters and missions. ⁶¹

There are critics that argue for the decentralization of service providers in the Skid Row area. They reason that the lack of cohesion between community organizations fosters “the predators that prey on the at-risk population” ⁶² One such group is the Community Services Roundtable (CSR), a newly formed group consisting of management level decision-makers in the area of social service provision within Skid Row. The group was formed in response to the concerns of The United Coalition East Prevention Project, which were based upon the belief that the local service providers are primarily concerned with the activities within their own walls.

The CSR believes that housing should be viewed as a “tool for healing” and must be “service enriched.” Meaning that it is essential that housing be linked to meeting other needs through tools such as case management, self-help meetings and a clearinghouse for information. They concentrate on finding ways to add to and improve the permanent SRO housing stock.

An example of their efforts is found through the recent organization of the Tenant Advisory Council (TAC). Their goal is to increase local leadership, build empowerment, and give voices to those who are affected by the current housing and homelessness crisis. As a result of these goals, they encourage and recruit tenants of SROs to act as representatives on various sub-committees of TAC. ⁶³

The group focuses on the street environment and matters involving safety by community design. They work to implement practices geared towards prevention of substance abuse through designing healthy communities. If there are continuous and known narcotic sales in the front of an SRO hotel they encourage the owners to respond to the issue. The group has successfully lobbied for the legislated use of “nuisance abatement” to ensure that the SRO owners are accountable for the area surrounding their businesses.

In 2002, the city of Los Angeles filed a lawsuit against the Frontier Hotel, an independently owned SRO, in attempts curb drug-related activities. A permanent Order was set against the hotel the following year, also requiring several improvements to the property. A settlement was reached, putting an end to the lawsuit. The settlement required the hotel to pay \$250,000. The money was to go into the accounts of the Midnight Mission, Los Angeles Police Department, Legal Aid Foundation and the city’s general fund, organizations whose mandate is to assist the same population that the hotel houses. ⁶⁴



Preservation and Expansion of Affordable Housing

Much of Los Angeles's most affordable housing is still located in Skid Row's traditional SRO hotels. Between 1969 and 1986, approximately 2,330 units were lost. As of 1998 there were 6,500 residential units on the inventory list. Since its inception, the Redevelopment Agency has invested 80 million dollars into housing stabilization. Half of the SRO stock has been rehabilitated and is currently under management of one or another nonprofit organization. 65

The non-improved housing stock in Skid Row is found in buildings ranging in size from 150 to 500 SRO units. Many of these units rent for \$600 to \$800 per month. These independently owned hotels are structurally similar to the SROs in Winnipeg's inner city in that they were built in the early 1900s. Private security officers guard the larger hotels while front desk personnel supervise the smaller ones. Many of the lobbies contain a mis-match of wire, glass and countless signs directing residents on what can be done in rooms.

Known as the "28 day shuffle" or "musical rooms" owners and/or managers of these hotels force residents to check out and re-rent rooms every 28 days. Under California law, a person who remains in a SRO hotel unit for 30 days becomes a tenant and is afforded tenancy rights. This practice is implemented so that tenants have no protection under the law.

It is viewed that this practice causes great hardships to many low-income residents as they are forced to spend one to three nights in shelters or in the streets before returning to the hotel for another 28 days.

In January of 2002, the Los Angeles District Attorney, issued written warnings to twenty downtown residential hotels to stop forcing out stable long term tenants. 66



Skid Row Housing Trust

In attempts to provide low-income housing in Skid Row, the Redevelopment Agency funded two private SRO hotel owners in their efforts to rehabilitate their buildings. In assessing the results, the city realized that it was difficult to find owners who were capable and willing to both rehabilitate and manage the buildings. ⁶⁷

As a result, the Skid Row Housing Trust (SRHT) was created in 1989 to act as semi-independent non-profit entity of the Redevelopment Agency. Their responsibility was to obtain a substantial number of SRO hotels, rehabilitate them, and operate them under a managed quality program that guarantees affordable rents.

Today, the SRHT manages 1,099 SRO units for the city's poorest residents. It actively pursues new possibilities for development, recognizing the urgent need to preserve affordable low-income housing in SRO hotels. ⁶⁸

Skid Row Housing Trust is dedicated to strengthening the residential community of Los Angeles Skid Row by providing permanent, affordable, independent living opportunities to low-income residents. The Trust fosters residential stability, constructive social support systems, and positive life choices through the development and operation of high-quality housing and resident services.

The Trust receives rental assistance grants through the U.S. Department of Housing and Urban Development and California State Department of Mental Health. ⁶⁹

They also receive funding from private foundations and corporate donors, the U.S. Department of Housing and Urban Development, U.S. Department of Education. The residents' receive shelter allowance through a program known as Section 8, which is payable directly to the SRO management.

A portion of the residents in the SRHT hotels are self-sufficient from the beginning of their tenancies, however, others have a history of homelessness. The demographics show that 69% of the residents have annual incomes less than \$3000, 70% have histories of substance abuse, 30% live with mental illnesses and 15% live with some form of physical disability. ⁷⁰

In 1995, the Trust established its own non-profit affiliate, the Skid Row Housing Trust Property Management Company. Resident Services Coordinators, educated in social service delivery, are paired with hotel managers to work together to create a supportive atmosphere. They jointly intervene in crisis situations, such as when residents are at risk of losing their housing. The length of the average tenancy has increased; over half have lived in their units for over a year, well over one-third have lived in their units for two years, and many for longer. ⁷¹

SRHT believes that housing is the beginning of an improved future for many residents, but they also see other avenues for providing the residents with opportunities. For example, the SRHT Property Management employs close to sixty of the SRHT residents in positions that vary from maintenance and janitorial to on-site and professional personnel.



Supportive Services

The Trust offers supportive on-site services to assist tenants in independent living. Tenants Services provide case management, support groups, benefits advocacy, educational workshops, integrated mental health/substance abuse recovery and general health services.

One example may be found in the St. George Hotel, opened in 2003. The St. George has offices in the lower level to house the Skid Row Collaborative (SRC), which is comprised of nine agencies who have formed to provide comprehensive services and permanent supportive housing to chronically homeless adults. The list of agencies that make up the SRC are as follows:

- Skid Row Housing Trust
- Lamp Community
- LA County Department of Mental Health
- JWCH Institute Inc.
- Homeless Health Care Los Angeles
- Behavior Health Services
- LA Homeless Services Authority
- Corporation for Supportive Housing
- Veterans' Administration

On-site service delivery plays a vital role in the lives of residents of the St. George Hotel. Participating in the services offered is not a condition of their tenancy status.

If the residents find themselves in a crisis situation or simply want to partake in programs for their own personal needs, they simply walk downstairs. The services are conveniently located within their living quarters. They are available for their use at any time.

What is unique about the on-site service delivery model is that the system decreases the bureaucratic process for the tenants when they apply for assistance of any kind. The staff are warm and friendly and because they work within the building, relationships are formed amongst tenants and the program counselors.

Just as important, the different agencies work closely together. This helps link what they offer to their clients to other organizations' programs.



Skid Row Collaborative Staff



V viewpoints From a Lamp Community Case Worker

Despite limited spaces (six offices, one community room and one staff kitchen), we all get along quite well. Due to the nature of the project, we have many people in the field at one time. We make due with limited space. We practically all share our offices with each other. Because we are in a collaborative (common purpose), we are able to look past the frustration of limited space because we all have the common goal of helping our members. This also takes lots of creativity.

If I know I will be in a confidential conversation with a member, I often will leave my office and go somewhere else. We go for a walk (encouraging exercise), or go to the employee kitchen. We have glass doors, so everyone can see if whether or not it is appropriate to interrupt. The group meetings are held in the community room downstairs (TV room). In off times, there are counseling sessions if there is no room. We have also had Lamp Community Case Workers take members to the library and museums to have a therapeutical experience with beauty (and have privacy).

In my opinion, it has pulled us all together. The hotel management is very close to the staff. Any infractions or questionable behavior is immediately shared.

As for the agencies “downstairs,” we share the same excitement and frustration with our members. We see how they interact with others and when someone is trying to staff split or pulls a stunt. Also, if one person isn’t here, someone else is here to help. We pull each other’s loads when needed. There is definitely a sense of community.

Although Lamp is technically only working with twenty-seven residents of the eighty-four resident hotel, I think I know everyone. I am in charge of the Social Activities Committee for the building. I love having non-collaborative residents come down and just say hi. They also are able to help with the less functioning members. I know practically everyone and can approach just about anyone — and who I can’t approach, I know someone on the staff or a member of who management can.

The teams that sees each other and fights together for the same cause help each other out. We are a united front. We are here to help and I think that all the residents feel that support.

Kirsi Ayre



Skid Row Housing Trust: SRO Buildings

All the SRHT's units are fully furnished with a desk, table, chairs and a bed. To maintain the longevity of the furnishings, the SRHT purchase their furniture from one company that designs durable and high quality products. To safeguard against destruction and abuse of the rooms, they are inspected monthly under the guise of pest control inspections. This assessment process allows the management staff to act upon an possible issue of resident irresponsibility in a timely manner.

Each lobby is designed with an open-air concept that includes glass enclosures for front desk areas. Great measures have been undertaken to avoid an institutional atmosphere. Soothing paint colours are used on the walls and where possible, attractive wood trim and superior tiling is found on the floors.

Common kitchen areas are available for their residents' use. The kitchen appliances are industrial in design and durability is not an issue. They are equipped with individual lockers so that each person may store kitchenware. The lockers help prevent the storing of perishable items in rooms.

Each building has an outdoor courtyard where barbecues are held and small gardens are maintained. The residents are encouraged to take part in the cultivation of the plants and trees.

The following pages display photographs of physical areas of not for profit SROs. Beside each picture is another photograph that relates to the characteristics of a similar space, but located within a for-profit hotel. It is alarming to see the differences in each setting. The building plans of the St. George Hotel (Los Angeles, Skid Row) are included depicting the basement and the first and second floors where many of the for-profit photographs were taken.* The SRO hotel has six floors in total, not including the basement area.

* The building plans are not to scale.



Basement of the St. George Hotel



First Floor of the St. George Hotel

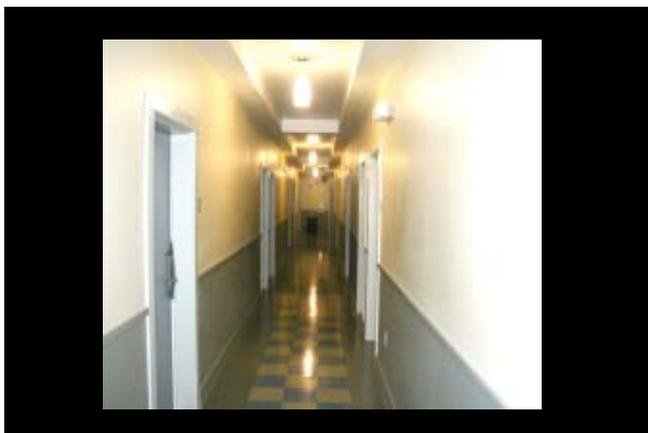


Second Floor of the St. George Hotel



Not for Profit SROs

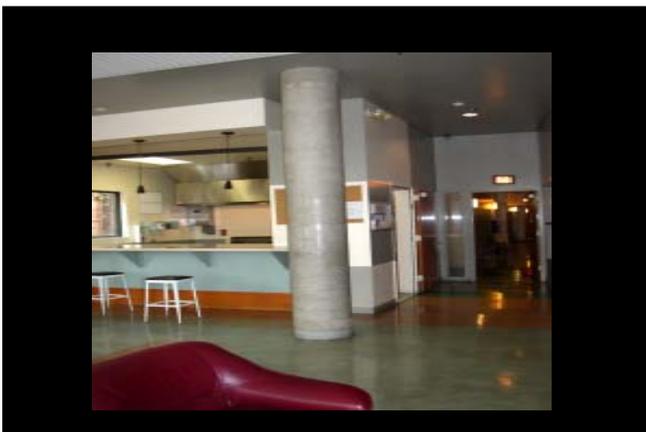
For Profit SROs





Not for Profit SROs

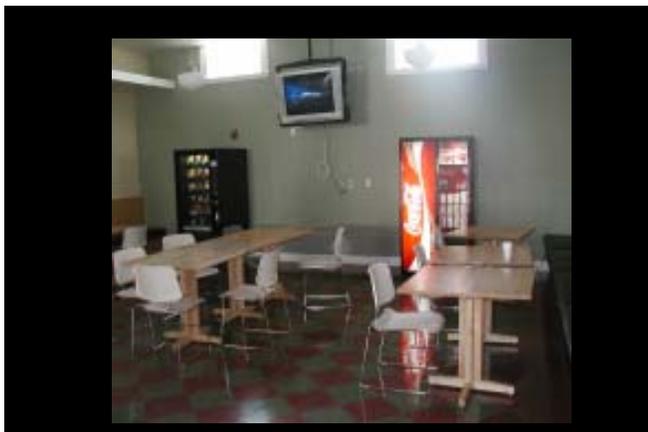
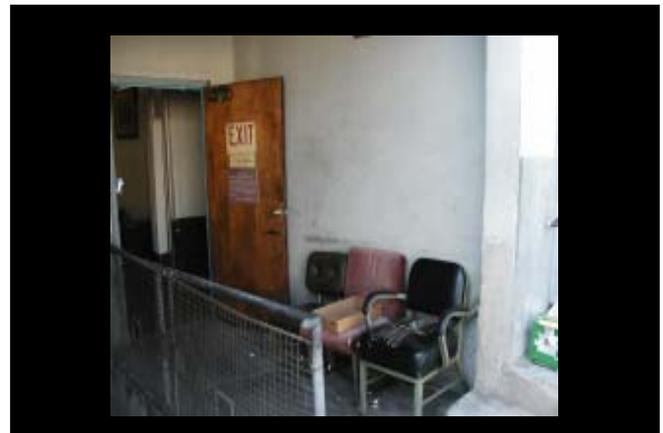
For Profit SROs





Not for Profit SROs

For Profit SROs





The Skid Row Housing Trust has rehabilitated slightly over 1000 SRO units since its inception in 1989. They provide supportive and affordable living quarters to low-income residents from diverse backgrounds. The Trust also provides employment opportunities that extend beyond the walls of the SRO and into the community of Skid Row. The areas that include the common kitchen, TV room and courtyard encourage tenants to “take ownership” of their residence while creating a strong sense of community.

The on-site service model offers residents opportune access to support groups, educational workshops and comprehensive health services. It is important to note that residents, on a voluntary basis, utilize these services reducing pressures from conforming to mainstream society. Because the services are on-site, the staff has time to build trust with those who may be fearful of seeking support. Further, the agency staff members work together in a harmonious manner and strive to avoid the overlapping of the much needed service provision.

During a visit to the St. George Hotel, city crews were out on the front street of the building bulldozing the belongings of those who found refuge on the street into city dump trucks to be hauled away forever. This assault to their personal property is a daily occurrence for the thousands of those who live in state of absolute homelessness in Skid Row. The SRHT offers a safe haven to the 1000 plus residents in an area that is surrounded by a hostile street environment with the promise of a peaceful and supportive atmosphere that they call home.



**Sidewalk Shelter at Night
Skid Row**



**“Street Cleaning” Crews
Skid Row**



Recommendations

The following recommendations are offered as a means to stimulate discussion among key stakeholders who have the ability to address concerns while also positively changing the lives of tenants. As was our intent, we recommend that the suggestions be taken within the context that hotels currently house approximately 1000 persons. Thus, we must act with their best interests at heart and that decisions are based on protecting/preserving the hotel stock and enhancing the lives of persons residing within SROs.

1. Work with hotel owners, Hotel Association and Residential Tenancies Branch (RTB) to extend to residents the same rights afforded to others under the existing RTB legislation. *
2. Seek innovative and imaginative ways to allow hotel owners to access programs, incentives and other means to improve the quality of housing (such as extending Rooming House RRAP).
3. Find ways to link hotel owners and social agencies (Environmental Health, Employment Income Assistance etc...) in ways that provide better support to those most vulnerable by providing frontline support or delivery within hotels.
4. Create a single act of legislation that recognizes the “rooms” of hotels as being distinct and separate from other functions such as the beverage room and restaurant. This may include a designation as “Residential Hotel.”
5. Encourage hotel owners to seek ways to have monthly rents increased from Employment Income Assistance, especially for housing persons needing supportive care or additional services.
6. Immediately review occupancy standards to ensure that rooms are safe, healthful and afford residents with an acceptable level of furnishings and linen, mattresses bedding etc...
7. Encourage and support residents in forming a “tenants association” to voice concerns or to have a venue from which issues can be addressed. This should include a community component to allow the community to voice issues and offer ideas.

* (i) Emphasis on stays in excess of 28 days.
(ii) If EIA subsidizes a monthly rent at a hotel the tenant would qualify for RTB rights.
(iii) If a person is paying a daily rate of \$20 or less, they should receive full protection under the RTB.



8. That we look to explore how aspects of Vancouver's legislation might work in Winnipeg.
9. That we look to explore how aspects of Los Angeles's non-profit model might work in Winnipeg.
10. To develop a comprehensive management training program for owners and/or managers of SROs.**

** It would be our suggestion to be comprehensive in scope and the following agencies would contribute to its development: RTB, MLCC, Environmental Health Services, Police Services, EIA and the Hotel Association, so that all supportive services work effectively together to support the management needs of the SROs.



Conclusion

Single room occupancy hotels are not uncommon across North America, and remain a form of shelter that is chosen by many through freewill or lack of alternative. In Winnipeg, it was estimated that perhaps 1000 people call SROs home, and the reasons for choosing SROs over other forms of shelter include the need to find affordable housing, the ability to live in a nonjudgmental environment or simply as a place to retire. In the pages of this work, it was observed that many living in hotels suffer from addictions, disabilities or have come to hotels via being de-institutionalized or forgotten by society. Equally, it was observed that others have selected SROs because they are affordable places to live while working or remaining in the city on a temporary basis.

Those who shared thoughts about living in hotels expressed diverging opinion that ranged from SROs being comfortable to hoping to find something better. There also remained little doubt that the physical composition of the SRO stock is unlike in both quality and types of accommodation offered. Some had superior services, while others appeared to feed off the misfortunes of some in an exploitive manner such as charging inflated prices for goods sold or offering rooms that lacked even rudimentary furnishings. Overall, it was clear that hotels and their clients, are much too diverse to categorize, nor is there merit in doing such.

In respect of the management practices, they too vary with some hotels being run better than others. In the “good places” hotel owners and staff appeared caring, driving persons to appointments, giving haircuts and genuinely taking an interest in their lives and welfare. Owners complained that their chosen profession is not respected and that their ability to be profitable has been impinged upon by cutbacks to EIA payments that have remained frozen at 1993 levels. They felt that it is increasingly difficult to carve out a business in a climate of razor thin margins, where the obvious outcome is disinvestment in the business and an increasing reliance on squeezing residents for additional money.

Perhaps it is important to also revisit the research questions posited at the outset of this endeavor. As was noted, these questions were the result of both community meetings and the subsequent formations of an advisory and steering committee. Those questions were:

- What are the general characteristics of SRO tenants?
- What are the characteristics of the hotels and surrounding community?
- Why do persons select this form of housing over others?
- Does a sense of community exist within the SRO environment?
- What effect do SROs have on the surrounding community?
- What is the regulatory environment that governs the operation of SROs and are there viable options for improving this form of shelter?
- What would be the outcome of closing SROs or what options and alternative exist elsewhere?



Was this work successful in addressing the seven research questions? In some ways yes but in other ways it proved much too difficult to generalize about life in hotels within such a limited time-span. However, it is strongly felt that the experience gained from talking with residents helped chronicle a life fraught with challenges and issues. One outcome was a clear understanding that residents of SROs are people who live in places that few understand or respect as a legitimate form of housing. Therefore, the question of “*What are the characteristics of SRO tenants?*” is difficult to quantify. Perhaps the lives of residents are better understood by the misconceptions that exist, by the uncaring nature we have shown in providing alternatives, or through our paternal instinct to find ways to “help those persons in need,” when some does not want assistance. Ultimately, residents were people with names, lives and stories that made them who they were. Coming to know this was not gained from fleeting visits to the area, but more so it was observed in the sentiment offered by persons who took time to talk with us and shared intimate moments of their lives. In the end, we cannot possibly describe all persons beyond saying that there was a mix of people, who presently call SROs home.

The characteristics of the community are also difficult to pinpoint. The Main Street Strip is a place that has become synonymous with the perception of poverty and all its related manifestations (e.g., Missions, Shelters, Welfare). A conclusion of the report is that in many respects the street has become the living room for residents. It is a place away from the small cramped rooms or smoke filled bars. The street was therefore a “place to blow off steam” or for some, the recreation centre. The community was deemed important by most but lacking in much needed services like medical, recreational and emotional or spiritual.

Why does this form of shelter exist and why is it chosen? SROs present people with an option, a reasonable place to live that perhaps has not been previously afforded to them. Some have come to hotels because no one else will take them in, such as those persons termed by owners as being “hard to house.” The nature of this form of shelter is thus emphasized by its tolerance or acceptance of the many lifestyle choices made by residents either willingly or not. Yet it is also important to stress that, in most cases, there is nothing glamorous about this form of living, that addictions have led people to poverty and destroyed lives. However, there are also many stories of long time residents living comfortably in hotels for decades. For these persons, their families have known this as a place where grandpa lives and where grandchildren have visited. This is part of the contrasting nature of these places, of hard living lifestyles mixed with a more caring human side of family and fellowship.

One might then describe SROs as a series of stark contradictions; of good and bad elements. This thought might also explain the differing thought on sense of community. As in some hotels it was evident, such as the residents who took time to offer prayer and thought to a staff person who suffered a loss of a family member. In others places, it was an uncaring nature that was prevalent “*don't bother me and I won't bother you.*” Maybe the sense of community was most represented in the “code of the Strip” a loose sense of solidarity among residents or along Main Street’s outstretched arms that in someway welcomed all, without passing judgment.



The final two questions asked:

What is the regulatory environment that governs the operation of SROs and are there viable options for improving this form of shelter?

What would be the outcome of closing SROs or what options and alternative exist elsewhere?

Within the legislation and governing of hotels there does appear to be room to assist people by affording them with rights. At present, SROs are more of an afterthought for those in power, a type of fringe housing that is not well-represented in by-laws, nor in Residential Acts of Manitoba. It is within the pages of legislation that there exists an opportunity to not only provide rights but to offer owners the chance to formalize this type of accommodation, potentially offering them access to a broader range of assistance programs. To say that improvement would benefit all hotels and their residents would be naïve. Without question, radically altering the physical makeup of hotels would create a better form of housing but it must be taken within the context that without support, most owners could not bear the costs. Change to legislation or otherwise must recognize that SRO hotels operate at the lower end of the rental spectrum and to ask owners to substantively rehabilitate their properties may result in the closure of some. Perhaps it would be important to examine the proactive legislative changes in Vancouver for direction on how to proceed in a manner that ultimately protects the affordable housing hotels offer.

As for alternative means of managing hotels, the California experience was seen as offering a potential model from which to explore options for Winnipeg. The ability of the non-profit delivery model was viewed as promising and viable. For Winnipeg, decoupling the linkage between rooms and liquor sales may offer a choice to some owners looking for alternatives.

In closing, the SRO of the 21st Century is much changed from just a few decades previous. It has emerged as a complex mix of people, places and environments. Over a few months, we were able to spend time along one street in Winnipeg where a cluster of ageing hotels still cling to the shards of their former grandeur as old world materials and ornate facades, now illuminated by neon signs, offer daily specials and markers to the past. Inside the front doors, the once opulent lobby is now a mismatch of wire, glass and signs. Outside, the street is devoid of the bustle of trolleys and arriving workers who had dreams of making a new life. Today, that dream is replaced with the desire to find a safe place to sleep, a cup of hot coffee and a warm meal.

In short, we captured a snapshot in time of a place that we were only able to observe from the periphery. The intent remains to try to give voice to those not often heard and seldom listened to. The concluding comment is, therefore offered by Bryan, a hotel resident who greatly assisted us in gathering an insight and understanding from his vantage point of hotel resident and researcher.



Viewpoints From Community Researcher and Resident

I recently had the opportunity to assist the Institute of Urban Studies by compiling information on hotel living. It was an exciting, insightful learning experience.

There were several reasons for me doing this survey, the main one being that I was a hotel resident of three years at the time. It showed me how “desensitized” I had become to the problems of these hotels. As I talked to residents of hotels, many of them my neighbours, I realized how we all get used to what we have, and think we can’t get anything better.

For instance, the majority of residents said they felt safe or very safe. But we really aren’t very safe in our hotel rooms. Security is basically non-existent in many hotels. On any given night, anyone, eighteen to sixty, can be stabbed or robbed in these hallways. I’ve recently experienced both people breaking into my room and people lighting fires in my trash can. This is not a reasonable standard of safety, yet I had become accustomed to it.

They should have security door checks and the occasional person patrolling the hallways. You can’t just have one staff looking after the beer vendor, buzzing people up and running the front desk. Problems are going to explode.

All hotels should have two or more staff on at night. Half of these residents interviewed say it is an ongoing problem but there’re afraid to say anything out of fear of retaliation.

In closing, I think that all the hotels and community should come together and listen to each other, instead of everyone looking out for Number One.

As I write this, I know that security will be a concern to someone on the Strip tonight. I wonder who will be there to listen to that person’s plea for help? Is anybody listening? What will we do about it together, as a community?



Bryan
Community Researcher and Resident



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3. Ibid.
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5. Groth.
6. Ibid.
7. Ibid.
8. Ibid.
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11. Gray.
12. Ibid.
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42. Gray.
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