

Heroin use and housing

WITHOUT SECURE HOUSING, IT IS VIRTUALLY IMPOSSIBLE FOR HEROIN USERS TO ACCESS SERVICES PROVIDING MAINTENANCE, WITHDRAWAL AND DETOXIFICATION TREATMENTS OR FAMILY SERVICES AIMED AT ASSISTING THE CHILDREN OF DRUG USERS.

KEY POINTS

- The reasons for individuals choosing to use heroin are as varied as the impact that it will have upon other aspects of their lives, including housing. It is therefore important that policy makers avoid drawing upon stereotypical generalisations in developing sensitive policy and program responses.
- Social housing – including public housing – is the only realistic option for low-income dependent heroin users seeking secure and affordable housing because this group is systematically excluded from the private rental market.
- Drug use and an endemic drug trade has led to some public housing estates becoming unpopular with using and non-using tenants and public housing applicants alike. It has therefore diminished the capacity of public housing authorities to provide secure, affordable housing.
- Some heroin users present considerable challenges to social housing providers and other health and welfare providers through ‘chaotic’ behaviours. These behaviours can only be effectively responded to by further integration of service provision using explicit protocols and guaranteed resources.

Based on research by Judith Bessant, Heidi Coupland, Tony Dalton, Lisa Maher, James Rowe and Rob Watts.

The research, undertaken at AHURI's RMIT-NATSEM Research Centre, investigated the impact of housing options on heroin use, primarily through interviews and a survey of heroin users and focus group discussions with service providers.

CONTEXT

There are several key features of the policy context for this research:

The last decade has seen a marked increase in illicit drug use, especially in heroin use, among younger Australians. Current research suggests that the number of Australians who have used heroin increased by 50 per cent between 1995 and 1998 and that approximately 112,000 Australians used heroin in 1998. In 2000-01, in the face of evidence of significant variations in the availability of heroin, the policy responses of federal and state governments became increasingly unstable, with the federal government urging a tighter prohibitionist approach while some state governments sought relaxation of prohibitionist policies.

In recent years, policy research and advocacy has directed the attention of policy makers towards recognising broader 'environmental factors' in the lives of heroin users. This broadening of the analysis by public health professionals and service providers in other service systems, like homeless accommodation, prisons and public housing, recognises the need to adjust to new and complex demands placed on these systems by long-term heroin users. The growing number of heroin users within the crisis accommodation service system in 2000-01 brought the issue of housing into particular focus.

Service providers in both the housing and public health sectors are recognising the need to better integrate service provision. Housing managers are considering how to respond to the relationship between illicit drug use and homelessness and establish stable tenancies in public housing. In the health sector, providers have begun to recognise that stable and affordable housing is important for improving the health status of illicit drug users. At a policy making level the health/housing issue is reflected in some of the 'whole of government' responses to illicit drug use.

METHODOLOGY

The research approach included a literature review, interviews with 47 heroin users, a survey of 150 heroin users and three focus group discussions with

service providers. The field research was conducted in three locations (Yarra City Council in inner Melbourne, Geelong in Victoria and Cabramatta in outer Sydney) in order to capture the experience of illicit drug use in inner city, suburban and provincial centre service systems and housing markets. Each of these areas had a documented history of government and non-government responses to heavy drug use by local residents.

Names in this report have been changed to avoid identification of individuals.

FINDINGS

IN WHAT WAYS, IF ANY, DO ACCOMMODATION OPTIONS AFFECT THE WELLBEING AND SOCIAL EXPERIENCE OF YOUNG HEROIN USERS, TAKING INTO ACCOUNT SUCH FACTORS AS AGE, GENDER AND MENTAL HEALTH?

In terms of current living circumstances, interview participants were broadly divided into three groups: homeless, private rental and public housing. Most of the homeless were living in squats. However, being precise about housing circumstances was difficult for a number of the participants because they were facing immediate crises. For example, Alex, who had been renting with his girlfriend, had left home at the time of interview because she had found out that he was using (heroin) again. Consequently he was:

now partly splitting time between a squat just up in Johnston Street, and ah, some friends of mine who had been living in a house in Burnley [whose tenants had stopped paying rent in a dispute with the landlord].

How participants first came to use heroin was a question always posed in the interviews. In responses it became clear that there was no axiomatic connection between becoming a heroin user and leaving home or becoming homeless. There is no obvious 'cause' or 'link' making heroin use and housing circumstances into an interdependent relationship. There are simply too many elements in the life circumstances of users

to produce a neat, simple story about how heroin use shapes housing circumstances or how housing circumstances shape heroin use.

However, when discussions focussed on how participants' housing, or lack of housing, influenced their patterns of heroin use and their lives more broadly, it became clear that housing was important. The findings reveal the potential for safe and secure housing to increase the wellbeing and social capacity of heroin users. In terms of physical wellbeing, access to housing results in a range of general health benefits, including better nutrition and improved hygiene. Additionally, the research shows that stable housing minimises the potential for drug-related harm by reducing the risk of overdose and by allowing users to engage in safer injecting practices.

Moreover, being 'homeless' is shown to exacerbate problematic drug use. In this context, stable accommodation provides the means by which an individual may place distance between themselves and their drug using peers in the 'street' environment. For example, Finn, a squatter, describes his surroundings.

You'd walk out of the bedroom and there'd be five people I didn't know in the lounge whacking up. Walk downstairs, there'd be ten people I didn't know whacking up.

Stable secure housing allows heroin users to look beyond their immediate survival to the consideration of longer-term issues such as employment, education, health and relationships. It enhances the individual's capacity to access basic life opportunities that should be available to all. Twenty-three-year-old Tiffany illustrates the difference that suitable housing made to her life:

Stability. You're not worried about where you live, where your clothes gonna be, how you're gonna shower. You can get along with other things in life like getting a job, get socialising, get a bunch of new friends. How to get money, what would you like to buy next. Work on how you look. Um, go back to school. Work out the future things. Not the things...work on things that normal people would work on...the essential things should already be there if you had a house, so you could worry about the things that you're supposed to worry about.

IN WHAT WAYS DOES CURRENT SERVICE PROVISION FOR LONG-TERM HEROIN USERS ADDRESS THEIR HOUSING NEEDS?

In terms of housing provision, the research found that public housing is the only realistic option for low-income dependent heroin users seeking secure and affordable housing. Overwhelmingly heroin users who were public housing tenants spoke about how important their housing was for their wellbeing. Vicki, who lives in Geelong, is 'on the dole' and enrolled in a methadone program, encapsulated this view:

I am grateful for the roof that I have got over my head from the Ministry and that's why I would never lose the Ministry place. How pathetic if you can't keep it. I pay \$45 a week rent. It is not even a cap of heroin.

However, the research found that providing public housing to heroin users is difficult for four reasons.

- There is a severe shortage of public housing, particularly well-located one and two bedroom dwellings.
- Heroin users can place additional demands on public housing providers because there can be a loss of residential amenity resulting from drug use and dealing.
- The shortage of supply and the configuration and location of existing housing stock constrains the way housing officers allocate housing and the resulting quiet enjoyment of public housing by both non-users and users.
- Sustainable tenancies for many heroin users are dependant on ensuring that they receive a range of other health and community services. These services are often not available and/or are difficult to arrange with service providers already struggling to meet demand.

Indeed, the relationship between housing and other forms of service provision was shown to be vitally important. Discussions revealed that long-term secure and affordable housing is vitally important in facilitating users' access to:

- drug treatment services providing maintenance, withdrawal and detoxification treatments;

- family services aimed at assisting the children of drug users; and
- general health supports which are necessary as many users are in poor health.

POLICY IMPLICATIONS

Many heroin users are currently unable to access priority housing due to excessively long wait lists and the lack of availability of one or two bedroom housing stock. Others are housed inappropriately in areas that exacerbate rather than ameliorate drug related difficulties due to the presence of an active drug trade in the community. Without access to secure, affordable housing, illicit drug users will continue to put their own health, and the health of others, at risk.

Targeted training courses could help housing officers to improve their understanding of drug-related issues so that they have the knowledge and skills required to integrate housing provision with the support services required by drug users. Additionally, to ensure an appropriate response to the accommodation needs of illicit drug users, policy makers could engage this group of people in the development of programs aimed at providing them with secure and stable housing.

FURTHER INFORMATION

For further information about this project the following papers are available on the AHURI web site.

Positioning Paper:

www.ahuri.edu.au/attachments/pp_heroinusers.pdf

Final Report:

www.ahuri.edu.au/attachments/30056_final_heroin_users.pdf

Or contact the AHURI National Office on +61 3 9660 2300.



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ACKNOWLEDGMENTS This material was produced with funding from the Australian Government and the Australian States and Territories. AHURI Ltd gratefully acknowledges the financial and other support it has received from the Australian, State and Territory Governments, without which this work would not have been possible.

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