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Sustaining Tenancies whilst Attending Alcohol and Drug Rehabilitation

Community Housing Rent Policy – what are My options when I need to be away from my Community Housing for an approved reason)

North Brisbane Partners in Recovery ‘System Reform Project’

Richmond Fellowship Queensland

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June 2016

Executive Summary

The intention of this proposal paper to highlight and advocate for the more frequent use of the Community Housing Rent Policy and the Social Housing Tenancy Management Policy.

This proposal is particularly pertaining to Rent Reduction [Sections 6.9.1 & 6.9.1] and Temporary Absence of Leave [section 3.4] respectively. These sections provide options for tenants in Community Housing to sustain their tenancies while exploring or seeking different treatment options, such as residential rehabilitation programs.

In consultation with participants and front-line service providers, feedback suggests that there is a lack of clarity and awareness around these sections of the policies, how they are applied and which housing providers are willing to offer reduced rent.

This proposal paper suggests that services assisting those clients to make informed choices regarding treatment for substance misuse would benefit in having this policy information more easily at hand; which in turn could assist to sustain tenancies through providing consistent and clear information on how to access and utilize these policy sections.

Key issue(s)

Significant numbers of PIR consumers (24% - North Brisbane PIR intake needs assessment 2015 / 16) have a dual diagnosis – the existence of mental health challenges and substance use (drugs and/or alcohol) issues. For those living in Community Housing, participation in a residential rehabilitation program can mean that their housing tenancy is placed in jeopardy.

Participants can often not afford to pay full rent and costs of rehabilitation simultaneously, and will often choose not to attend necessary Alcohol and Other Drugs (AOD) residential rehabilitation as they do not want to lose their housing.

For individuals with multiple and complex needs and vulnerabilities, there is often a significant ‘back story’ regarding their journey into the safe, secure and affordable housing. Often it is at this point that participant engagement with support occurs once the stability of housing has been gained. It is therefore a challenge if the options to support both treatment and sustain housing are not known when participants are in their pre-contemplative stage of recovery.

An offer of a place in a residential rehabilitation program often comes quickly, and in some cases the same day. The client is then faced with the reality of a decision making process which has an impact on their tenancy arrangements going forward. There is a misaligned timeframe as the tenant would not have the opportunity to seek the approval of absence and the rent reduction from their housing provider at the time they enter a rehabilitation program.

Participants and service providers may not be aware of options under the Community Housing Rent Policy (CHRP) and Social Housing Tenancy Management Policy (SHTMP) that could assist the participant’s decision making regarding treatment. Community Housing providers advised that they are supportive of tenants seeking treatment and support, but raised the concern about the financial viability for the organisation in applying the rental reduction / minimization over a lengthy period or across multiple tenancies.

Main Objective(s)

The objectives of this project is to:

- To raise awareness among service providers and clients about access and use of sections in the CHRP and SHTMP pertaining to minimum/reduced rent and temporary absence of leave.
- To support clients to access the necessary support/treatment that could enhance their capacity to maintain their housing tenancy.
- To engage in consultation with service providers for capacity building to help address knowledge gaps in the application of these sections of the CHRP and SHTMP.
- To foster collaboration between housing providers and AOD services in supporting people to help minimize barriers to accessing support.

Method

- We sought to gather information through contacting front line services in the AOD sector and conducting phone base surveys exploring awareness and knowledge of the dilemma faced by their clients in having to make a choice between treatment and retaining housing.
- We interviewed participants who informed the project through their individual needs assessments within the PIR program and who identified themselves as being in the pre-contemplative stage of seeking treatment
- We consulted Community Housing providers which offered long term housing in the North Brisbane catchment area about the prevalence of this issue in their experience managing tenancies for this client group.
- We sought further clarification from the Department of Housing and Public Works Strategic and Policy area regarding the rent minimization within the CHRP; and Community Housing Providers utilizing the same questionnaire.
- We presented our topic at a Dual Diagnosis Forum held by Queensland Network of Alcohol and other Drug Agencies (QNADA) where, we surveyed frontline services.

Summary of Impact or Result

Our consultation with Service Providers and direct work with clients has shown that there is often a lack of knowledge of the policy and clarity around the policy Sections in of the CHRP and SHTMP and how they can be utilized. Most service providers and consumers we consulted were unaware of the possibility of a rent reduction or temporary absence and use of this as an option to support the choice to enter a residential rehabilitation program.

Of the 40 AOD frontline service providers surveyed at the QNADA Forum, only 25% reported having knowledge / awareness and application of the CHRP and SHTMP. Whilst a small sample size, coupled with anecdotal evidence, there is an emerging trend that some service providers who often are in a position to support clients to make informed choices during the pre-contemplative stage of their recovery, are not adequately informed of the CHRP and the SHTMP policy sections.

We also found in our direct work as PIR Coordinators that where there was some awareness of the policy sections by service providers there is a varied and inconsistent understanding of the information being shared relating to these options. This is demonstrated through the following examples:

- QLD Health Mental Health Case manager working with participant who was housed in a Brisbane Housing Company property incorrectly assumed that their client could apply the absence of leave and rent reduction to their tenancy when trying to address the client's issue with alcohol.
- Community organisation tenant sustainment program advised that their client (in social housing) did not qualify for this assistance; as they were not in a Department of Housing property

Anecdotally, service providers and client experience show that the option of reduced/minimum rent is pivotal when clients are contemplating going into rehabilitation. Retaining housing in the short term was also found to be of great benefit in these consultations. The discussions with Community housing providers advised that the request for temporary absence and reduced rent was not commonly sought by tenants who identified that they would like to enter a rehabilitation program.

Case Study examples

To illustrate the impact of this issue, two case study examples of PIR participants are presented in the following; one demonstrating a barrier and the other a positive outcome.

Case examplebarrier to support

Participant in the Partners in Recovery Program had been evicted from Affordable housing previously due to behaviour and struggled to maintain tenancies in the private boarding house market due to his alcohol issues.

He came back into the Community Housing sector with a different provider and was more stable but still drinking alcohol. The participant's support service contacted the housing provider regarding accessing the rent reduction and absence of leave to enable the client to attend a residential rehabilitation program and was advised that the provider did not offer that option.

As a result the participant vacated the tenancy of his own volition and exited himself from his support services.

Case example.....good outcome

A 30 year old male with a dual diagnosis of schizophrenia and AOD, with ongoing legal issues relating to drug use. He lives alone in social housing and receives a Disability Support Pension. He identified that he needed to attend rehabilitation for an extended period of time but was concerned about losing his accommodation. The Queensland Court Referral connected him with a rehabilitation facility, which was able advise him about temporary absence of leave policy. He was able to complete a residential rehabilitation program which was a big step in his recovery journey and also addressing the offending behaviour whilst maintaining his tenancy long term. Whilst we understand that support around requests for rent reduction and temporary absence and subsequent arrangements are made when a client enters a program; our focus has been on those clients who are in their pre-contemplative stage and weighing up the cost to them of choosing to access a rehabilitation program.

**Conclusions
and
Recommendations**

Social housing provides a safe and secure standard of accommodation which is of a standard higher than what is affordable within the private rental sector.

The intention and the value of the pertaining sections in the CHRP and the SHTMP offer great flexibility for individuals in negotiating their tenancy to meet their changing needs.

However limited awareness of the rent reduction and approved absence under the policies impacts on accessibility. Clients and service providers are often unaware of the existence of these options, how they can apply for them and the overall question of eligibility.

We will recommend that the current available information be expanded to include:

1. How to make an application and access rent reduction/minimisation and temporary absence of leave.
2. Brochure/flyer developed explaining options / policy made available at all housing service centres, AOD facilities etc.
3. Relevant CHRP and SHTMP sections are published in newsletters periodically.
4. More opportunities for collaboration across sectors and information sharing.
5. An explanation of the processes involved and the timeframes to consider when submitting an application to access this assistance under the policies.