



Ending the War on Drugs & Homelessness:

Adopting Harm Reduction Strategies in Housing

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THRA

Texas Harm Reduction Alliance

OUR STORY

- Founded in 2019
- Responding to overdose epidemic
- Aims to end the drug war & its harms

OUR WORK

- Organizing + Advocacy
 - Local & statewide
- Services, Austin-based
 - Drop-in Center
 - Mobile Clinic & Outreach
 - Peer support
- Training



Today's Objectives:

- **Identify** how the War on Drugs has impacted housing systems and driven homelessness
- **Understand** harm reduction & situate the movement in housing justice
- **Learn** how harm reduction approaches work in housing

Where are we now?

- Nearly 50,000 people experienced homelessness across Texas in 2021
- In Travis County, racial disparities among people experiencing homelessness persist
 - Probability of experiencing homelessness for a Black individual is over 6x more likely than a white individual (ECHO report, July 2022)
- The need for affordable and supportive housing units far outweighs what's available
- Statewide camping ban enacted in 2020
- Continued criminalization of substance use & poverty creates barriers in housing access
- State crackdowns at the border & on sentencing laws for fentanyl continue to

Where are we now?

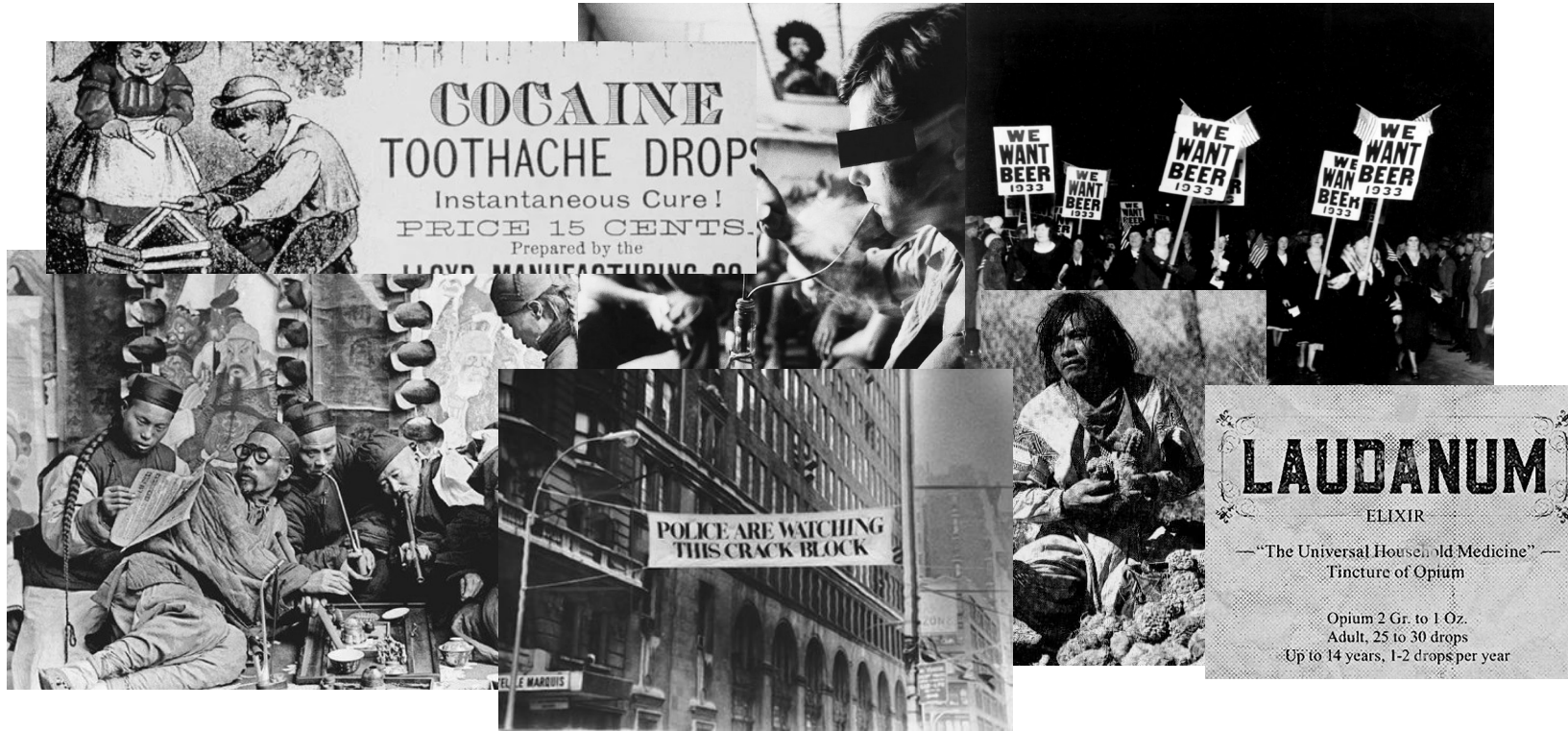
- **In Texas alone, over 5,000 people died of preventable overdose in 2021**
 - Statistics are underreported - only 15 of 254 counties have medical examiner offices
 - From state & local data - and even predictions from the CDC - 2022 will be the deadliest year on record
- **People experiencing homelessness face disproportionate risk of preventable overdose**
- Possession & distribution of “drug paraphernalia,” like sterile syringes & fentanyl test strips, **is illegal**
 - Syringe service programs are not authorized in TX, except for a pilot in Bexar County
- **Lack of harm reduction infrastructure** necessary to care for people who use drugs

The war on drugs & homelessness

People Use Drugs!

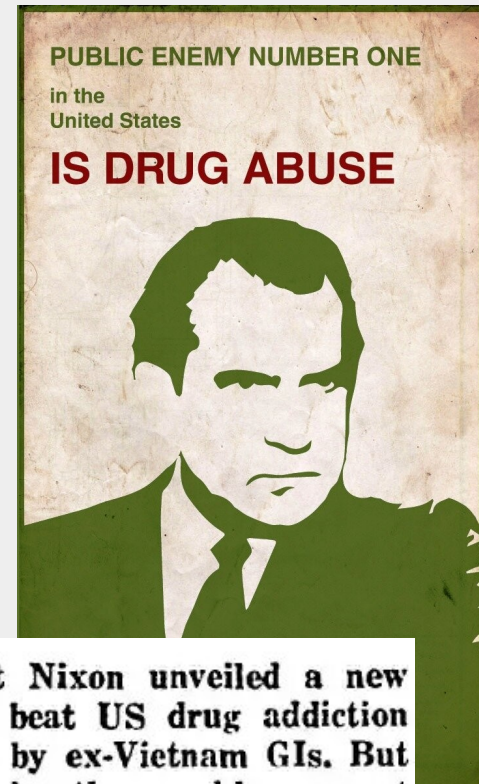
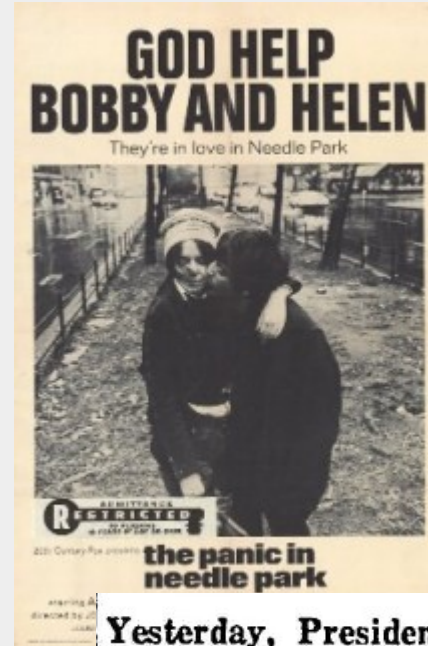
(and they always have)

What's changed? The way society normalizes or demonizes drug use.



Public enemy Number one

1960s-1970s



Yesterday, President Nixon unveiled a new \$155-million plan to beat US drug addiction—much of it caused by ex-Vietnam GIs. But all the campaigns in the world are not stopping it at the source. Peter Osnof reports from the Mekong Delta, Thursday.

Heroin heroes

“The Nixon campaign in 1968, and **the Nixon White House after that, had two enemies: the antiwar left and black people.** You understand what I'm saying? We knew **we couldn't make it illegal to be either against the war or black,** but by getting the public to associate the hippies with marijuana and blacks with heroin. And then **criminalizing both heavily, we could disrupt those communities.** We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. **Did we know we were lying about the drugs? Of course we did.”**

- John Ehrlichmann, Nixon domestic policy chief aide (1994)

Just Say No!

1980s



Over 50 years of
prohibition

Source: Drug Policy Alliance. An additional almost 240,000 people are on parole for drug law violations & over 510,000 on probation for drug law violations, according to the Bureau of Justice Statistics.

Number of people currently
incarcerated in the U.S.:

2.3 million



1 in 5 are incarcerated for a drug offense.

How does the war on drugs impact housing & homelessness in texas?

- Bans on public and private housing based on drug-related activity
- Evictions due to drug-related activity or suspected drug-related activity
- Exclusion from housing resources (vouchers, rental assistance, temporary shelters)
- Discrimination against people with records or prior arrests
- Discharge or denials from housing service providers
- Stigma in access to care & resources
- NIMBYism - ex, camping bans & calls for increased policing
- Family disruption & separation

What have you heard or witnessed before?

Is there anything missing that you would add to this list?

HOUSING FIRST & HARM REDUCTION

Housing first believes

- **Everyone is “housing ready”**

- Access to programs is not contingent on sobriety, minimum income requirements, lack of criminal record, completion of treatment, participation in services, or other unnecessary conditions
- Participation in services are choices, not conditions of tenancy
- Housing & service goals are person-driven

- **Everyone can achieve stability in permanent housing directly from homelessness**

- Services are informed by a harm reduction philosophy that recognizes drugs and alcohol use & disorders are part of some tenant's lives
- Substance use itself is not a reason for eviction

- **Stable housing is the foundation to achieving other health & social**

Harm reduction is

- **Built on the belief in & respect for the rights of people who use drugs**
- Grounded in knowledge of systemic injustices & inequalities
- Use of practical strategies to reduce risks associated with drug use
- Acknowledgement of the conditions that impact drug use
- Understanding the spectrum of drug use on an individual level
- Affirming of individual's agency and personal goals
- Effective & rooted in evidence-based strategies
- **Meeting people where they are at!**

Core Concepts Of Harm reduction

1. **Substance use is not inherently good or bad** - there are many ways to use many substances, all of which have potential benefits and potential harms
2. Every person who uses substances uses them in a specific context, and **that context must be part of our approach to supporting them**
3. **Every person is an expert in their own experience** of substance use, navigating systems of care, and what works for their survival

Harm Reduction values

services are **NON-
JUDGMENTAL** and **NON-
COERCIVE**.

decisions are made by
**PEOPLE WHO USE
DRUGS.**

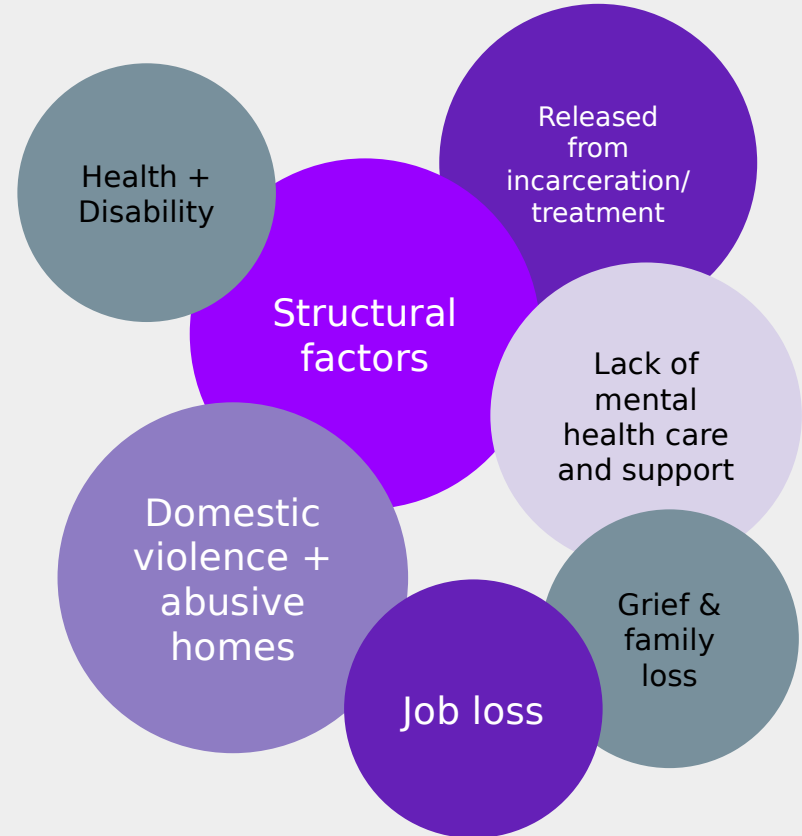
the most important
outcome is **QUALITY OF
LIFE.**

everyone is treated with
DIGNITY and
COMPASSION

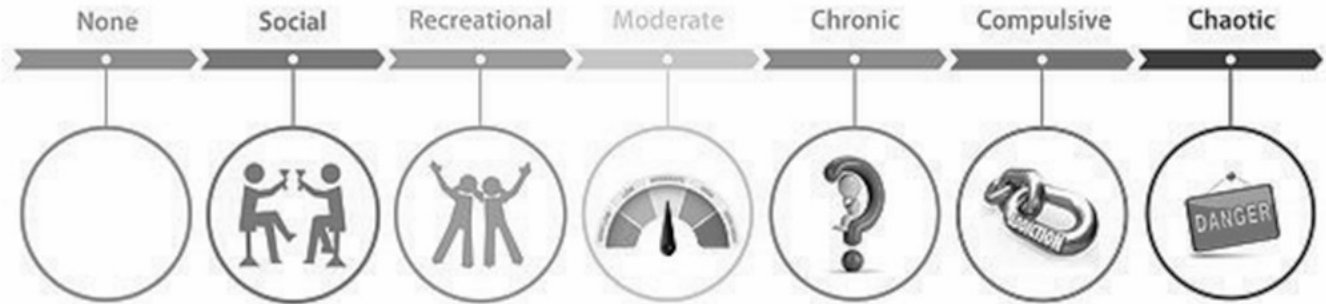
Why do people use drugs...?



...return to use?



Substance use continuum



Harm reduction approach to service delivery in housing

- No punitive sanctions to what people chose to put or not put in their bodies
- When we create punitive sanctions, people will lie
- Incremental change is normal
- Quality of life & well-being are the measures of success
- Tenant engagement & involvement in building community
- Person-based service delivery
- Use of motivational interviewing to explore ambivalence, change, and goals

Examples of harm reduction approaches in housing services

- Accept clients into TBRA and permanent housing programs with an assessment that offers, but does not mandate, supportive services to help them maintain housing.
- Include clients in site selection process.
- Develop individualized housing service plan with clients.
- Align supportive services with clients' identified goals.
- Schedule case management meetings first thing in the morning, late in the month before monthly check arrives.
- Budget for alcohol/recreation.
- Encourage going to AA/NA meetings while a person is still using substances.
- Have rental assistance provided via checks directly to the property owner or to a representative payee.
- Facilitate landlord-tenant negotiations.
- Focus on behaviors rather than on substance use.
- Align residential agreements with standard leases.

Time to reflect:

How have you seen harm reduction successfully used in approaches to housing?

If you are a service provider, what do you need to adopt more harm reduction strategies in your organization?

What can we do collectively to fill the gaps and needs we see across Texas?

Advocating for policy change & investments

Town Hall Calls for Quick Action to Combat Overdoses

The crisis is now

BY LINA FISHER, FRI., MAY 13, 2022

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Travis County officials declare drug deaths a public health crisis



Screenshot

resources:

- [HOPWA Housing First & Harm Reduction Fact Sheet](#)
- [Housing First in Permanent Supportive Housing](#)
- [National Harm Reduction Coalition](#)
- [Drug Policy Alliance](#)

Debrief + Q & a

What was new to me?

*What was confirmed
for me?*

*What questions do I
still have?*