



**How to...**

*support tenants in drugs  
recovery*



# How to... support tenants in drugs recovery

## 1 Why and how housing organisations can help tenants in recovery from drugs and alcohol misuse

This how to briefing follows on from the compendium of practice published by CIH in 2012. [The compendium](#) was a collection of good practice case studies from housing organisations that are supporting tenants recovering from significant drugs and alcohol problems.

Many of the examples in it demonstrate the benefits of partnership working with specialist agencies, and the development of in-house specialist teams. For many smaller and generic housing organisations, the development of in-house specialist teams is not a viable option, so this paper explores how such organisations might be able to provide additional support through partnership approaches in a local area, and why this will benefit the organisation as well as tenants and the wider community.

### Why support tenants in or towards drugs recovery?

#### **Improved housing management, and reduced business costs**

Tenants with drug and alcohol dependency may require support to manage their finances, maintain the property and sustain their tenancy. Housing officers, when tackling rent arrears, have the opportunity to work with tenants to identify such support needs and to help tenants to access appropriate support.

Identifying where tenants need extra help, and referring to local services, is part of an 'invest to save' approach to tenancy management and can provide significant long term savings for landlords alongside helping vulnerable tenants sustain independent living. Sustaining a tenancy in the long term can reduce the level of tenant and former tenant arrears, tenancy abandonment and high void costs. Recent studies estimate eviction and associated costs at well over £8,000 per case.

An [evaluation](#) of work with troubled families found average costs of £8,619.28 broken down as:

- average arrears at eviction £4,955
- average repair costs £2,452
- average rent loss during void period £563
- average officer time for eviction process £445
- average court costs £205.

Similarly, a study by [Friends Provident](#) for Hyde Housing and other associations identified eviction costs of £8,287.

Where properties are abandoned the rent arrears, repairs costs and void loss are likely to be higher due to:

- increased time lost whilst verifying that the property is abandoned
- increased repairs required and
- longer void period whilst repairs are completed.

Where areas have a reputation for anti-social behaviour (ASB) and criminal behaviour, there are likely to be added indirect costs including:

- difficulty in letting properties – more costs for marketing and allocation processes
- longer void times
- increased tenancy churn and repeated void costs.

## Learning from others

70 per cent of tenants engaged with **Genesis'** own intensive support services reduce drug use, stop offending behaviour and successfully maintain their tenancy. Financial losses are reduced, and other tenants are able to see the proactive stance that the organisation will take to tackle crime and ASB on its estates.

Genesis' STAR programme (Supported Treatment Accommodation and Recovery) in Suffolk provides self contained housing near to other Genesis schemes which have full time staff, and provides help for people to tackle their substance misuse, prepare for a settled tenancy and develop employment/ training opportunities

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Housing organisations receive benefits from linking their tenants to support agencies that will help them with problematic substance misuse, including:

- regular contact for the tenant and help to address the causes of ASB and other problems
- help to identify and tackle financial and other issues – preventing escalating rent arrears
- regular visits to, and viewing of, the property - identifying repairs etc.

### Safe neighbourhoods and communities

Tenants who are experiencing drug or alcohol problems can exhibit ASB; they can also be vulnerable to other people who engage in criminal activity and ASB in their home and neighbourhood.

Research carried out by [Gentoo](#) into the instances of ASB and repeat offences identified common triggers for offending behaviour as alcohol, drugs, mental illness and the influence of friends/ gangs. Drug related issues figured as the 7th most common occurrence of ASB type in HouseMark's analysis of ASB benchmarking, with alcohol ranking 12th.

Tackling crime and ASB is a priority for tenants and local communities. For many landlords, addressing these issues and supporting community safety are part of their core services.

Early intervention is an important factor in managing ASB effectively, including:

- challenging the perpetrator(s) appropriately swiftly and with authority
- assessing and acting on the perpetrator's support needs.

Warning letters and visits are the most common and often effective measures in preventing repeat offending behaviour in many cases. Interviews can help to flag up where other issues underpin ASB, and where additional support may be needed alongside challenging behaviour, for example; from statutory services or recovery partnerships.

Tools include:

- warnings and clear (verbal and written) messages about the risk to their tenancy, and their responsibility for the behaviour of visitors to the home
- acceptable behaviour contracts
- requirement to link to local support services (from statutory and voluntary agencies)
- support to disengage with associates who are perpetrating crime and ASB in the area

## Learning from others

A **Family Mosaic** tenant known to misuse drugs, together with friends, was causing ASB on his estate. Following a serious incident, action was taken that included:

- an injunction against a woman using his property for alleged prostitution
- work by the neighbourhood manager with the tenant to prevent eviction by setting up an acceptable behaviour contract (ABC).

The ABC required the tenant to engage with drug support agencies. The manager and the agency worked with the tenant to monitor progress. No further ASB has occurred and the tenant is progressing well.

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## Tackling homelessness and reducing costs for public services

Drug and alcohol misuse is a key risk factor for and consequence of homelessness and rough sleeping. A client survey by St Mungo's identified that 72 per cent of homeless people accessing its services had a history of drugs and/or alcohol misuse. There are increased risks for single people who are unlikely to qualify as being in priority need for statutory homeless services. Drug and alcohol misuse, mental health issues and homelessness are also increased risk factors for offending behaviour – 80 per cent of offenders have substance use problems.

The costs for wider local public services from homelessness are extensive; [government research](#) has estimated that gross total cost to public services range between £24,000 and £30,000 per person, per year.

The increased development of service delivery at a local area level, driven by the Localism Act 2011, means that housing organisations will increasingly need to look at how their services meet local priorities, support local communities and improve local neighbourhoods. This is particularly the case where services will be dependent for funding on local commissioners including:

- local authorities
- clinical commissioning groups
- police and crime commissioners (PCCs).

Costs to public services for local authorities include:

Estimated [costs](#) of providing services for rough sleepers average £7,900 and for single homeless people £5,600 per year. In 2010-11, local authorities spent £345million on homelessness services (temporary accommodation, prevention schemes and administration of statutory homelessness services).

Costs to public services for local health services include:

Homeless people are three times more likely to have inpatient admission as they are not likely or able to be registered with a GP. These admissions in turn are likely to be 1.5 times more expensive than for non-homeless people. The net estimate of additional cost to the health service overall is £64 million per year.

Costs to public services for local PCCs include:

Increased incidents of crime are associated with homelessness and problematic substance use. For [example](#); conviction for a drugs offence averages £16,000. Conviction for shop lifting averages £3,500. Providing secure housing has been demonstrated directly to reduce the risk of reoffending by 20 per cent.

## How to support tenants in drugs recovery?

Landlords can have a positive role in identifying existing tenants who want to address their substance misuse problems, and can help by supporting them to access the appropriate help. This may be a requirement for tenants to avoid losing their tenancy by tackling the causes of ASB.

There is also a role for landlords to support people in drugs recovery looking for secure accommodation away from previous locations, to minimise risks from previous associations. In both cases, there are some important steps for landlords to take to ensure that people are given the best chance to succeed in maintaining their recovery and their home.

### **Map local services available, both statutory and voluntary**

- identify what services exist locally, both statutory and voluntary, and how to make referrals to these services
- ensure that all housing management staff are aware of what local services are available and how to refer tenants
- maintain ongoing contact at senior level with these agencies (through local community safety partnerships, sub groups of health and wellbeing boards and other appropriate local fora).

### **Develop partnerships**

Look at establishing good working partnerships with statutory and other agencies, covering:

- agreements on how to make referrals to services
- protocols to set up information sharing practices covering: the nature and extent of details to be shared; the process for sharing data; justification or purpose for sharing; legal basis/consent; how and when data will be kept, used and destroyed; reviewing arrangements.
- service level agreements – for example shared pre-tenancy visits to ensure that the appropriate support will be in place when a tenancy is offered
- named senior officers in each organisation to oversee effective partnership working.

## Learning from others

**South Yorkshire Housing Association, Action Housing** (support specialist) and **Derbyshire Drug and Alcohol Team (DAAT)** work together to provide up to 10 homes scattered across general stock in Derbyshire to help people in contact with Treatment Services with the housing needs. Classed as move-on accommodation, it is aimed at people who have already gone through some treatment, who are able and committed to achieving a drug free life within the community.

In some cases the person will have worked through a tool/ workbook, developed by Derbyshire DAAT, which helps them to understand the challenges they might face and what strategies they can develop to cope (contact with previous friends, loneliness, risks and trigger points etc.). The client must agree to information sharing across the partner organisations. Joint assessments by the housing and support providers are done where possible to speed up the allocation process. Regular support reviews occur which can also include the housing management officer and treatment worker where appropriate.

The aim is to provide homes in the community, away from areas of risk, which can help people ready and willing to work at full recovery in the community setting. In some cases it may be possible and appropriate for the person to remain in the home when support and treatment come to an end; where this happens, the landlord will source alternative accommodation for the project. Alternatively the housing provider supports a move into another home in its stock.

Learning points from the initiative include:

- the benefits of partnership and pulling together collective expertise
- providing the right support at the right time – not setting people up to fail
- that support and treatment are ongoing throughout the tenancy
- that the support includes working with tenants to identify settled accommodation for the long term.

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Voluntary and service user-led recovery groups have an important role in helping people to maintain their recovery. Landlords could consider:

- in kind support to local voluntary services which provide ongoing support to people in recovery (e.g free venues for meetings).
- working with other local landlords to share such support costs for voluntary groups.

### Train staff

Even where the support will be provided through a specialist provider, it is important that housing management staff are trained to look behind presenting problems of rent arrears and ASB to identify additional support needs and help with referrals for access to support agencies. Housing providers should:

- ensure that staff receive appropriate drugs and alcohol training so that they can:
  - identify where additional support is needed
  - approach the issues with tenants appropriately and with confidence

- ensure that staff receive support from line management in taking appropriate action – both warnings and referrals to support
- consider having a senior level champion who can coordinate interventions, maintain external relationships and address any problems that occur with referrals
- ensure a consistent approach and link to all other policies and procedures, notably safeguarding vulnerable adults.

## Learning from others

**Midland Heart** has considerable expertise in supporting people with drug and alcohol problems – their services can be accessed by residents through their customer hub – in specialist and general housing, and they also support residents of other organisations. They recognise staff skills and training as a key component of providing effective and appropriate services. Their most recent scheme in Birmingham – The Snow Hill – provides high quality homes, for people who have successfully moved through their homeless and other services, as well as people who want an affordable home in a vibrant part of the city. Creating this mixed community enables people to socialise with those unaffected by issues of social exclusion. Other key vehicles for effective support include:

- multi-agency work with the Outreach Team - trying to engage with individuals with treatment prior to them getting a tenancy. This maximises their chances of tenancy sustainment
- providing a venue for prescribing clinics for people of no fixed abode
- service level agreements with agencies dealing with substance misuse, allowing individuals to access support in direct access hostels. This allows customers to get holistic support where they live, increasing the chance for engagement
- continuing support for people moving on from supported accommodation into independent accommodation through floating support.

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### Developing a local housing offer of support

Housing organisations may want to develop more direct offers such as providing homes for people in drugs recovery, or specialist ASB services. These may be new services, or building on current work around health or community safety. Key local commissioners will include the PCC and local Clinical Commissioning Groups. Other influential partners will include the local Health and Wellbeing Boards, who produce local health and wellbeing strategies which will establish priorities for action and influence commissioning strategies.

Housing organisations, when approaching such bodies, need to look at how to streamline approaches and make it easy for these commissioners to engage with them. Very few will have the capacity or will to communicate with all housing organisations operating in their local area. CIH has developed frameworks to help housing organisations in a local area to work together to develop appropriate local offers.

## Useful resources and information

The role of housing in drugs recovery: practice compendium

[www.cih.org/publication-free/display/vpathDCR//templatedata/cih/publication-free/data/Role\\_of\\_housing\\_in\\_drugs\\_recovery](http://www.cih.org/publication-free/display/vpathDCR//templatedata/cih/publication-free/data/Role_of_housing_in_drugs_recovery)

How to develop quality health and housing partnerships

[www.cih.org/publication-free/display/vpathDCR//templatedata/cih/publication-free/data/How\\_to\\_deliver\\_quality\\_housing\\_and\\_health\\_partnerships](http://www.cih.org/publication-free/display/vpathDCR//templatedata/cih/publication-free/data/How_to_deliver_quality_housing_and_health_partnerships)

How to manage ASB cases effectively

[www.cih.org/publication-free/display/vpathDCR//templatedata/cih/publication-free/data/How\\_to\\_Manage\\_ASB\\_cases\\_effectively](http://www.cih.org/publication-free/display/vpathDCR//templatedata/cih/publication-free/data/How_to_Manage_ASB_cases_effectively)

CIH ASB services

[www.cih.org/asbservices](http://www.cih.org/asbservices)

Ministry of justice data sharing guidance

[www.justice.gov.uk/information-access-rights/data-protection/data-sharing](http://www.justice.gov.uk/information-access-rights/data-protection/data-sharing)

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