

Written comments for the Special Rapporteur on the right to adequate housing on the draft Guidelines for the implementation of the right to adequate housing

18 November 2019

Submitting organisations:



Harm Reduction International is a leading NGO dedicated to reducing the negative health, social and legal impacts of drug use and drug policy. We promote the rights of people who use drugs and their communities through research and advocacy to help achieve a world where drug policies and laws contribute to healthier, safer societies.



The International Network of People who Use Drugs (INPUD) is a global peer-based organisation that seeks to promote the health and defend the rights of people who use drugs. INPUD will expose and challenge stigma, discrimination, and the criminalisation of people who use drugs and its impact on the drug-using community's health and rights. INPUD will achieve this through processes of empowerment and advocacy at the international level, while supporting empowerment and advocacy at community, national and regional levels.

Ms. Leilani Farha
UN Special Rapporteur on the right to adequate housing
srhousing@ohchr.org

18 November, 2019

Re: Submission to the Special Rapporteur on the right to adequate housing on draft Guidelines for the implementation of the right to adequate housing

Dear Special Rapporteur,

Harm Reduction International (HRI) and the International Network of People Who Use Drugs (INPUD) applaud your work on the right to adequate housing, and welcome the opportunity to provide written comments on the draft Guidelines.

Our contribution will focus on people who use drugs experiencing homelessness, a key population that is currently overlooked in the draft Guidelines, and incorporate recommendations for ways in which the Guidelines can be more inclusive of their unique experiences and needs.

People who use drugs experiencing homelessness

As recently confirmed in the International Guidelines on Human Rights and Drug Policy, everyone has a right to an adequate standard of living, including the right to adequate housing, and this right is equally shared by people who use drugs.¹ Yet while not everyone who uses drugs is or becomes homeless, and not every homeless person uses drugs, drug use among people experiencing homelessness is common. People who use drugs are more likely to experience difficulties with housing as a result of their criminalisation and social exclusion; in many jurisdictions, knowledge of tenants' drug use justifies - and can compel - eviction. For example, in a single night overview of rough sleeping statistics for autumn 2018, it was reported that out of 4,677 'sleeping rough' in the UK, nearly 20% used drugs.² Point-in-time (PIT) counts of the homeless populations in North America have also published comparable statistics:

- The Seattle/King County PIT count documented drug use within their homeless population for several years: 36% in 2017, 35% in 2018 and 32% in 2019.³
- Vancouver's 2019 PIT count reported that out of the 2,223 individuals counted there were 1,156 (56%) that stated they used drugs.⁴
- Thunder Bay's (Canada) 2018 PIT count reported the following: out of the 474 surveyed, 32.7% said the reason for housing loss was because of drug use, 48.9%

¹ UNDP, UNAIDS, WHO and the International Centre for Human Rights and Drug Policy. (14 March 2019) *International Guidelines on Human Rights and Drug Policy*. <https://www.undp.org/content/undp/en/home/librarypage/hiv-aids/international-guidelines-on-human-rights-and-drug-policy.html>

² Ministry of Housing Communities & Local Government (25 February, 2019). *Rough Sleeping Statistics Autumn 2018, England (Revised)*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/781567/Rough_Sleeping_Statistics_2018_release.pdf

³ Applied Survey Research (2019). *2019 Seattle/King County Count Us In*. Available at: http://allhomekc.org/wp-content/uploads/2019/05/2019-Report_KingCounty_FINAL.pdf

⁴ City of Vancouver (12 June, 2019). *Rapid Response to Homelessness Through Partnerships*. Available at: <https://council.vancouver.ca/20190612/documents/pspc1a-Presentation.pdf>

reported they had increased drug use since losing housing, and 70.9% stated they are currently using drugs.⁵

- Canada's 2016 PIT count which included 32 communities across Canada found that substance use was a common factor for housing loss: 18% for youth (14-24), 24% for adults (25-49), 17% for older adults (50-64) and 10% for seniors (65+).⁶

Inadequate housing has particularly adverse impacts for people who use drugs, including driving increased risk of drug-related harms. A report recently published by the British government found that people who use drugs experiencing homelessness have higher prevalence of HIV, hepatitis C, tuberculosis and drug-related deaths. For example, in 2017 drug poisoning, including overdose, made up 32% of the total number of deaths of homeless people in England and Wales. For comparison, drug poisoning accounts for less than 1% of all deaths in the general population.⁷ An analysis of 872 illicit drug overdose deaths in British Columbia, Canada, between 2016 and 2017 revealed that 9% of individuals were experiencing homelessness at the time of their death.⁸ A 2016 Coroner's report from British Columbia, Canada, reported that of 175 deaths of individuals who were experiencing homelessness, 53% were of a result of accidental drug/alcohol overdose.⁹ People who use drugs experiencing homelessness are also more likely to have complex medical needs that can go unaddressed due to, and as a result of, their criminalisation, stigmatisation, and homelessness, and so live with multiple morbidities, such as mental health issues and long term physical health conditions, and experience greater risk to their personal safety, including sexual violence, violence, theft.¹⁰

Accessing essential housing services is often very difficult for people who use drugs experiencing homelessness because they tend to face intersecting forms of stigma, discrimination, exclusion and criminalisation. Zero tolerance approaches to drugs and fixed expectations around behaviour are not uncommon in housing services, resulting in a shortage of services willing to house individuals who are not ready or willing to reduce or stop their drug use. In numerous contexts, people are homeless *because* accommodation services are abstinence-based.¹¹ People who use drugs are also more vulnerable to

⁵ The District of Thunder Bay Social Services Administration Board (November 2018). *District of Thunder Bay Point-In-Time Count 2018 of People Experiencing Homelessness*. Available at: <https://www.homelesshub.ca/sites/default/files/attachments/Enumeration%20Report%20Final%20-%20print%20-newest.pdf>

⁶ Employment and Social Development Canada (2016). *2016 coordinated point-in-time count of homelessness in Canadian communities*. Available at: <https://www.canada.ca/content/dam/canada/employment-social-development/programs/communities/homelessness/reports/highlights/PiT-Doc.pdf>

⁷ Office of National Statistics (20 December 2018). *Deaths of homeless people in England and Wales: 2013 to 2017*. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsofhomelesspeopleinenglandandwales/2013to2017>

⁸ Ministry of Public Safety and Solicitor General (27 September, 2018). *Illicit Drug Overdose Deaths in BC: Findings of Coroners Investigation*. Available at: <https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/illicitdrugoverdosedeadsinbc-findingsofcoronersinvestigations-final.pdf>

⁹ Ministry of Public Safety and Solicitor General: British Columbia Coroner Service (21 March, 2019). *Reportable Deaths of Homeless Individuals: 2007-2016*. Available at: <https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/homeless.pdf>

¹⁰ Advisory Council on the Misuse of Drugs (19 June 2019). *Drug-related harms in homeless populations and how they can be reduced*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/810284/Drug-related_harms_in_homeless_populations.pdf

¹¹ For more information, please visit Homeless Link's *Supporting People Who Use Drugs* webpage: <https://www.homeless.org.uk/our-work/resources/supporting-drug-users>

evictions. In tenancy and mortgage agreements, drug use is more often than not a justification for eviction all over Europe and Eastern Europe. A 2019 study in Canada found that people who use drugs are at risk of unlawful eviction and, when evicted, have little legal recourse to appeal.¹² The research followed 56 participants who had recently been evicted from single room occupancy in Vancouver, Canada. Moreover, their housing conditions were wholly inadequate and imposed health and safety risks such as a rodent, bed-bug and cockroach infestations, black mould, leaking pipes and broken locks. One year after the interviews, only 16 of 56 had been able to secure new housing.¹³

The housing needs of people who use drugs experiencing homelessness are unique, complex and require an approach that is integrated, person-centred and firmly grounded in evidence-based harm reduction principles. These principles include: respecting the rights of people who use drugs, a commitment to evidence and social justice, and the avoidance of stigma.¹⁴

Despite being particularly vulnerable and disadvantaged, people who use drugs and their unique experiences of homelessness are currently excluded in the draft Guidelines. HRI and INPUD believe this is a missed opportunity and respectfully put forward the following recommendations to ensure that this key population's needs are visible and taken into consideration going forward.

Recommendations

Firstly, when listing particularly vulnerable and disadvantaged groups in paragraphs 22, 31(d), 47(e) and 65, we recommend including people who use drugs to reflect their status as a key population that experiences homelessness. In paragraph 31(d), we would recommend replacing the word “addiction”, with “drug and alcohol use” in order to avoid stigmatising people who use drugs and alcohol. Considering that drug use is frequently grounds for discrimination in accessing housing services and emergency accommodation, you may also wish to consider separating this from the “disability” category, and having it as a stand-alone ground for discrimination.

An integrated and person-centred approach to the housing needs of people who use drugs experiencing homelessness is crucial. For this reason, we recommend adding an “integrated approach” to paragraph 18(a)(iv). We would also specifically recommend the addition of “evidence-based harm reduction” in the list of relevant policy areas included in this same paragraph.

In paragraph 35(b) (Guideline no. 7), you rightfully recommend that all measures that criminalise homeless people or behaviour associated with being homeless be immediately repealed. Considering the fact that people who use drugs experiencing homelessness are at a higher risk of dying from a drug overdose or acquiring HIV and hepatitis C because they have no safe space to use drugs, we believe this would be a good opportunity to also recommend the decriminalisation of drug use and possession, alongside the implementation of safe injecting facilities and overdose prevention measures to help protect the health of people who use drugs experiencing homelessness.

In Guideline No. 13, we would welcome the inclusion of a paragraph or sentence highlighting the fact that evictions can also take place on discriminatory grounds,

¹² Taylor Fleming, et al., International Journal of Drug Policy, (26 March, 2019). *Housing in crisis: A qualitative study of the socio-legal contexts of residential evictions in Vancouver's Downtown Eastside*. Available at: <https://doi.org/10.1016/j.drugpo.2018.12.012>

¹³ Ibid.

¹⁴ For more information, please visit HRI's *What is Harm Reduction?* webpage: <https://www.hri.global/what-is-harm-reduction>

including actual or suspected drug use. The International Guidelines on Human Rights and Drug Policy provide the following recommendation in the context of evictions, which you may wish to include or reference in the Guidelines: “Review laws, policies, and practices on land and housing to ensure the existence of adequate safeguards protecting against discriminatory eviction based on actual or suspected illicit drug use and providing access to timely recourse and commensurate reparation for victims of such eviction.”¹⁵

Thank you for this opportunity. If you have any questions or require any clarification, please do not hesitate to get in touch.

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¹⁵ UNDP, UNAIDS, WHO and the International Centre for Human Rights and Drug Policy. (14 March 2019) *International Guidelines on Human Rights and Drug Policy*. <https://www.undp.org/content/undp/en/home/librarypage/hiv-aids/international-guidelines-on-human-rights-and-drug-policy.html>