FEANTSA’s response to the Commission Green paper on the role of the Civil Society in Drugs Policy in the European Union:

Making the most of the expertise of the homelessness sector on drugs and substance abuse issues

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The added value of civil society organisations in the implementation of the EU Strategy on Drugs

FEANTSA is the European Federation of National Organisations Working with Homeless People and represents civil society across the whole of EU working with this very vulnerable population. Drug and substance abuse can be a substantial contributing or aggravating factor in situations of homelessness and housing exclusion and therefore it is a very important issue for FEANTSA.

Building on its ongoing work in the area of health and social protection, FEANTSA has placed the health of people experiencing homelessness at the core of its work in 2006 by choosing health and homelessness as its annual theme for this year. In this context, issues such as multiple needs or barriers to healthcare services faced by people who are homeless have been a particular focus of our work. One major output this work on health and homelessness is the European report that has been produced, on the basis of contributions from FEANTSA member organisations in the form of national reports. These national reports are based on a survey carried out in each member state and they provide valuable information on the problems faced by homeless people in the field of health. The findings have showed that substance abuse is at a problematic level amongst people experiencing homelessness. The reports have served to clearly highlight that there is a significantly higher proportion of substance abuse related problems within the homeless population than within the general population. Improving the quality of drug addiction and related services is not only vital because it contributes to the reintegration of marginalised groups, but, more generally, it is essential from a public health perspective.

The Commission’s intention to ensure the involvement of all relevant actors and stakeholders, including civil society representatives, in its Action Plan on Drugs (2005-2008) is warmly welcomed by FEANTSA. We strongly agree with the Green Paper that civil society has considerable responsibility for implementing actions set out in the Action Plan, such as drug prevention, treatment and rehabilitation of drug users. We also welcome the integrated, multidisciplinary and balanced approach combining demand and supply reduction set out as the basis of the Union’s approach to the drugs problem. We also agree

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1 OJ C 168, 08.07.2005
that actions on demand reduction should involve sectors beyond the medical sector, such as the education and employment sectors.

Key messages of FEANTSA:

• FEANTSA warmly welcomes the suggestions set out in the Commission’s Green paper to encourage the participation of the European civil society in its Drugs Policy. The recognition that NGOs and voluntary groups of various kinds are good at developing innovative approaches based on realistic picture of what is actually needed is also welcomed. Service providers, non-governmental organisations (NGOs), or patient’s organisations in the field of public health have valuable experience concerning the special needs of marginalised groups with substance abuse related health problems that should be taken into account when formulating and implementing the European policy on drugs. Regarding the seriousness of the drug addiction amongst the homeless people, FEANTSA believes that the special needs of this vulnerable population should be considered as a priority under the EU drugs policy.

• For the homelessness sector, certain measures in the field of demand reduction - such as providing treatment programmes, rehabilitation, social reintegration programmes or reduction of drug-related health and social damage - are especially important. Service provider organisations working in the homelessness sector have valuable expertise in these fields. Their experience in fields of harm reduction related to drug use (for example, needle exchange programmes, distribution of health information, condom distribution or safe user rooms etc.) are an important dimension of any strategy on drugs and a valuable part of the contribution that civil society can make to the EU strategy on drugs. These measures have a direct impact on the quality of life of drug abusers. Such initiatives would also have also a clear public health value, in that they can prevent the spread of contagious diseases such as AIDS, or hepatitis. Therefore we reiterate that FEANTSA firmly disagrees with the Green paper’s suggestion that only organisations who have drug related activities as the core focus of their activities should be included in the structured dialogue between the Commission and civil society organisations. We believe that it would be an error as it would fail to take account of the experience of service provider organisations working with the people who are homeless and other vulnerable groups in this area.

• We believe that a structured Dialogue between the Commission and civil society organisations could contribute to improving the situation of marginalised groups suffering from substance abuse related health problems and more generally the health of the great public. FEANTSA hopes that these two frameworks could create an opportunity for putting forward themes of discussions which are directly relevant to the homeless sector in order to tackle their special drug related needs. However, we would favour a stronger focus on the Forum because we see it as a more effective framework for sharing information or exchanging expertise in many drug related fields by means of bringing together relevant actors to think about solutions for developing structures to enhance universal access, fairness, solidarity and a greater social inclusion. We think that the Forum and the thematic linking of existing networks could complement each other in an effective way.

• Furthermore, FEANTSA encourages a more active involvement of the general public, including drug users, in resolving drug-related problems. FEANTSA outlines the
importance of ensuring the inclusion of all who are affected by decision-making in the democratic process in various sectors and contexts. Many homeless service providers work to promote participation of the service users in order to involve homeless people in the decision-making processes affecting the services that they use. We believe that the participation of these groups would unquestionably bring an added value to the European strategy on drugs.

**Developing Dialogue on the field of drugs between the Commission and Civil society**

In the Green paper, two options are suggested for organising a structured dialogue between the Commission and the civil society in the field of the European drug strategy: these are a Civil Society Forum on Drugs and a thematic linking of existing networks. FEANTSA welcomes the proposal to create new structures intended to give a good opportunity for civil society organisations to channel their voice in many drugs related fields.

The homelessness sector has valuable expertise in the area of drug related services, and more generally in the fields of treatment and prevention of associated health threats. These may be direct physical symptoms of drug addiction or they may be more indirect threats such as AIDS or other diseases communicable through intravenous drug use. Improvement in targeted and diversified treatment programmes and in access to services for the prevention and treatment of AIDS, hepatitis, other infections, diseases and drug related health and social damage are vital objectives concerning not only the homeless population but also the general public. Given the impact of these health threats on public health, the development of infrastructure in this area should be given a central place in implementation of the EU policy on drugs. Prioritising these problems within the framework of a structured dialogue (between civil society organisations and the Commission) would offer a valuable opportunity for mutual learning and identification of good practice.

In addition, in the framework of the EU Drugs Strategy (2005-2012), FEANTSA welcomes the European Parliament’s call for a greater involvement of the general public, including drug users, in resolving drug related problems. Participation should be an objective in order to improve the quality of a policy produced by increasing its applicability and relevance and taking account of a greater diversity of views. It is clear that making possible participation of groups of drug users in structures that might not ordinarily be accessible to them is something that requires investment and the taking of specific enabling measures. Generally, there is a need to adapt the structures or elaborate a comprehensive and accessible preparation process to facilitate participation. This investment is worth making as it means that the participation will be valuable and meaningful. Therefore, FEANTSA encourages the participation of disadvantaged groups (homeless people or other groups) suffering form substance abuse related problems in the framework of the structured Dialogue between civil society and the Commission.

Regarding the forms of consultation between civil society and the Commission, in our opinion, the thematic linking of existing networks is useful in order to bring together the expertise of all networks with experience in this area. We agree with the Green paper that a cooperation of networks might offer an informal, light and cost-effective way to structure the information flows and enable an effective consultation with civil society. However, FEANTSA believes that the Forum, as a way of bringing together relevant civil society
organisations on a more firm and established basis, should be the principal body of consultation between the Commission and the civil society. We think that the Forum would be a useful instrument to support policy formulation and implementation, to which the participation of services provider organisations working with the homeless people could bring an important added value. Consequently, FEANTSA thinks that the suggestion of the Green paper - that is to only include civil society organisations in the Forum who have drugs related activities as the core focus of their activities- would be a mistake and it would not serve the interest of the groups targeted by the EU policy on drugs.

**Thematic discussions: integrating the homelessness perspective**

As it was pointed out in the majority of FEANTSA member’s national reports on health and homelessness, substance abuse is a major problem for a large proportion of the homeless population. Substance abuse often begins before one is in the streets and it is qualitatively one of the most significant causes of marginalization. The complex health needs of homeless people are often inadequately understood and therefore inadequately met within the health system. The general problems that homeless people meet, such as isolation associated with chronic homelessness and mental health problems may be worsened or even provoked by substance abuse. Many homeless people experience dual diagnosis (co-morbidity of addiction and mental ill health) and healthcare services are frequently not adapted to the challenged of dual diagnosis and the holistic approach it necessitates.

Training and information for healthcare professionals is lacking in this area. Very often, rehabilitation services have very long waiting times and there is a lack of specialist drug rehabilitation services. Also, FEANTSA finds it very problematic that some vital health services are only available to homeless people who are not actively using substances (drugs or alcohol). In many cases, even specialised services for people with mental health problems do not work with people who are addicted to drugs or alcohol. It can create a catch 22 situation where homeless people are excluded from health services they need because of alcohol abuse, but the detoxification and rehabilitation services are inadequate and inaccessible. Drugs and substance abuse can block people from other vital services too: the rules of convalescent homes or supported housing facilities can be too strict for drug addicts or heavy drinkers unless specially adapted. Being drugs and substances free should not be a condition of access to services. It is clear that the inadequacy of these services is at the expense of public health and quality of life.

It should also be noted that issues related to substance abuse can not always considered in isolation from alcohol. In practice people who abuse drugs may also use alcohol and this poly-drug use needs to be approached holistically. An integrated and multi-disciplinary

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approach is vital, and it is an area in which FEANTSA members and other service provider organisations in the homeless sector have a valuable expertise.

Improving the quality of drugs related services, the access to quality care, or harm reduction are very important for the homelessness population but they are also important from a public health perspective. For FEANTSA, there are some priority areas, such as harm reduction that should be one of the topics involved in the framework of the dialogue between the Commission and the civil society. Given the vital role of these services for public health, FEANTSA recommends that the development of infrastructure in these above mentioned areas should be given a central place within the discussions of the Forum.

Conclusions

FEANTSA warmly welcomes the suggestions set out in the Commission’s Green paper to encourage the participation of the European civil society in its Drugs Policy. The recognition that NGOs and voluntary groups of various kinds are good at developing innovative approaches based on realistic picture of what is actually needed is also welcomed. Service providers, non-governmental organisations (NGOs), or patient’s organisations in the field of public health have valuable experience concerning the special needs of marginalised groups with substance abuse related health problems that should be taken into account when formulating and implementing the European policy on drugs. Regarding the seriousness of the drug addiction amongst the homeless people, FEANTSA believes that the special needs of this vulnerable population should be considered as a priority under the EU drugs policy.

For the homelessness sector, certain measures in the field of demand reduction - such as providing treatment programmes, rehabilitation, social reintegration programmes or reduction of drug-related health and social damage - are especially important. Service provider organisations working in the homelessness sector have valuable expertise in these fields. Their experience in fields of harm reduction related to drug use (for example, needle exchange programmes, distribution of health information, condom distribution or safe user rooms etc.) are an important dimension of an any strategy on drugs and a valuable part of the contribution that civil society can make to the EU strategy on drugs. These measures have a direct impact on the quality of life of drug abusers. Such initiatives would also have also a clear public health value, in that they can prevent the spread of contagious diseases such as AIDS, or hepatitis. Therefore we reiterate that FEANTSA firmly disagrees with the Green paper’s suggestion that only organisations who have drug related activities as the core focus of their activities should be included in the structured dialogue between the Commission and civil society organisations. We believe that it would be an error as it would fail to take account of the experience of service provider organisations working with the people who are homeless and other vulnerable groups in this area.

We believe that a structured Dialogue between the Commission and civil society organisations could contribute to improving the situation of marginalised groups suffering from substance abuse related health problems and more generally the health of the great public. FEANTSA hopes that these two frameworks could create an opportunity for putting forward themes of discussions which are directly relevant to the homeless sector in order to tackle their special drug related needs. However, we would favour a stronger focus on the Forum because we see it as a more effective framework for sharing information or exchanging expertise in many drug related fields by means of bringing together relevant actors to think about solutions for developing structures to enhance universal access,
fairness, solidarity and a greater social inclusion. We think that the Forum and the thematic linking of existing networks could complement each other in an effective way.

Furthermore, FEANTSA encourages a more active involvement of the general public, including drug users, in resolving drug-related problems. FEANTSA outlines the importance of ensuring the inclusion of all who are affected by decision-making in the democratic process in various sectors and contexts. Many homeless service providers work to promote participation of the service users in order to involve homeless people in the decision-making processes affecting the services that they use. We believe that the participation of these groups would unquestionably bring an added value to the European strategy on drugs.