



FLIP

The Association of

SIDE

Participating Service Users



Home sweet home

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Housing

I would like to focus this article on the time I spent in rooming houses and share accommodation. I was comfortably living in a nice house situated on the side of a mountain overlooking a bay, with a beautiful view, in the small town of McCrae on the Mornington Peninsula. I was living there with my wife and our two young children, both beautiful girls aged three and eight years. We also lived there with a close friend, until the day of her accidental suicide when sadly we lost her. My wife and I were out on the day and came home to find her on her bed, not breathing and in pretty bad shape. We did everything we could including CPR for 40 minutes, then when the paramedics arrived they took over and continued to try and bring her back, but it was all too late, we lost her. This had a major impact on my family's lives.

After this event we were taken under police protection, due to the harassment and threats by some of her family (one of whom belonged to a well known biker gang), who were looking for someone to blame. The police put my family into their vehicles and headed straight out of the area to a crisis accommodation centre to help us find somewhere to stay. Then my wife and I were hit with a bombshell; due to the lack of family accommodation our children would have to stay with relatives. There was only a room for my wife and me in a supported accommodation centre. Talk about hard to deal with!

We were both suffering some serious issues dealing with the loss of our friend but not having any other options my wife and I moved into the supported accommodation centre, luckily our relatives could help and look after our children for us. One of my strongest memories of staying in supported accommodation was the amount of drugs going through the place. It was unbelievable, you name it, it was there and if you weren't using substances when you first got there you soon would be. I mean look at my situation, I'd just lost a close friend, my house and my children were no longer with me and then I was put in a place where I was surrounded by all sorts of drugs, so of course I started using substances to hide all the pain and to help me cope with my deteriorated lifestyle.

Due to her own suffering, my wife decided that

she would move to another room within the accommodation centre with another man to be able to use heroin with him and not around me, as I hated heroin. So there I was with what felt like nothing. I had pretty much hit rock bottom. Three weeks went by at the accommodation centre, with a support worker who I found was not much help to me as she was so under qualified. She told me that I had to leave as they had helped me as much as they could and they needed the room for someone else. So I was placed on the street.

After losing everything that mattered to me during this period of time my mental health was not good. I was suffering severe depression with constant suicidal thoughts. It was at this moment I decided to contact my parents and I told them everything that had happened and that I was not coping with life very well. They suggested I come and stay with them for a while.

Time passed by and I managed to pick myself up from a very dark place: it was then I felt my luck changing. I had managed to find a room for my wife and me through a crisis accommodation service, which put me onto a rooming house.

So my wife and I reunited and moved into a rooming house which just happened to be in The Pines, Frankston (a notoriously dysfunctional area). At first I really felt my luck had changed, but I soon realised that it had not. It is very hard to describe what it's like to live in one of these shared houses to someone who has not had to live in one before; I guess I would describe it as: living in a jail without any screws. By this I mean there is just no safety, stability or order to these rooming houses, it's just total chaos! My wife and I would have to phone the police at least once a week due to being placed in danger by other residents, or due to a window or door being broken by break ins, which would then take the landlords months to replace. One time when I wasn't home a man who had very recently moved into our share house, decided that while in a severe psychotic state and affected heavily by substances, he grabbed hold of my wife and put a large kitchen knife to her throat, luckily she managed to get away and phone the police, who very quickly and efficiently took him away. We later found out that he was wanted for armed robberies and other serious charges.

The worst thing that happened to me was getting hit with a steel rake by an intoxicated man for no apparent reason, causing a compound fracture to my left arm. The point I

am trying to get across is that every person I witnessed to be in one of these rooming houses was extremely unsafe. Now having managed to get into a secure place privately owned through a close friend of mine (not through any service), my wife and I feel safe. Then the other day I happened to be watching a television program and saw my old landlord who used to manage the rooming houses; he was in a lot of trouble being called things like: 'the slumdog millionaire' and the landlord of the flies'.

Most of the story was showing how two people who had lived in one of their properties in Brunswick were killed by a fire when they were trapped in their room with faulty door locks that the landlord had installed himself. This news story also showed the appalling/unsafe conditions of some of the other houses that all belonged to the same people. The other houses shown, were in no way different to the ones that I had lived in of his, so I definitely was not alone and there were many others living around Melbourne in extremely unsafe and what I think are just inhumane living conditions.

I wanted to share some of my story so that people can understand what it is like to live in these conditions, it's no wonder that people suffer mental health and substance abuse problems. It is so hard to get out of these situations when paying up to \$250 per week for a room, when most of the people are living on benefits. After paying so much rent to these 'slumdog millionaires' one can barely afford to even just put food on the table.

Jason



my home

EVERY MORNING I WAKE UP IN MY HOME, AND FIND IT OCCUPIED BY TWO CHRONIC ALCOHOLICS. BOTH THESE GUYS ARE NO STRANGERS TO BOARDING HOUSES, DETOXES, REHABS AND PSYCHIATRIC SERVICES; ALL THE COLORFUL CHAPTERS THAT WEAVE LONG TERM SUBSTANCE ABUSE TOGETHER; BUT I HAVE NEVER SEEN EITHER OF THEM DRINK OR TAKE ILLICIT DRUGS. IF THEY CHOSE TO PICK-UP, THEY WOULD HAVE TO HONOUR OUR AGREEMENT AND LEAVE OUR HOME IMMEDIATELY, THEREBY FORFEITING THEIR SECURITY OF A SAFE, WARM, CLEAN HOUSE TO LIVE, LEARN AND GROW IN.

I spent fifteen months in rehab, then a further six months in an integration house. A total of twenty-one months in the care of a service, knowing I desperately needed to examine, overhaul and learn new life skills without the assistance of substances. I knew from my own experience that if I was to have any chance of breaking free and remaining clean, I could not live in environments that weren't conducive to healing.

Living with others that use, no matter how little or much, keeps me stuck as I'd tried many, many times to get and stay clean only to find myself using. After twenty-one months I was skilled up, but lacked the practical experience of living unaided. After the integration house I only had a few options: return back to the world I'd left, go into supported accommodation, or live independently.

Myself and two other guys chose to try and break into the private rental market. Independent living. None of us were working, we had few reliable references and very little capital. There was also the concern that one of us could use, or relapse taking the others with him. We needed an insurance policy, and with that we drew up an agreement to live by, signed it and got it witnessed by the CEO of the service we were attached to.

We found a place and immediately offered \$20 more a week. Money talks and we secured the place and got bond assistance from the DHS, rent assistance from Hanover, and furniture from various sources including Saint Vincents. Our agreement is probably not unique but simply covers principles we wish to live by: no alcohol or other drug use or storage, (this includes visitors), rent, bills account, kitty, chores and garden up-keep are integral, no intimidation, sexist, racist behavior or violence is tolerated and we regularly try to have a meal and a chat together to discuss any house or personal issues that need addressing. It's agreed that a breach of these guidelines results in forfeiting your place in the house. This is not negotiable as we all signed off on it.

Sixteen months later our house in the leafy eastern suburbs of Melbourne is a home. We have a veggie patch, a dog, and are all studying or working and getting on with our lives. Our insurance policy remains firmly in place, I rarely consider it, but it's nice to know it's there.

Ross



Poetry

To the street

When the daylight dims in the busy town
and the sky looms overhead

One will turn his damp bed down on the
cold hard ground instead

God help him and I hope maybe someday
he'll find what he desires

I listen to him and he says whatever my
heart requires

Now I think to myself if my chances were
slim if ever a spec of grey

Take me back I'd be just like him with no
great deal to say

Because what's the point when you
already know the price that you have
paid.

Life can be dull and awfully slow when we
lie in the bed we've made

And if anyone matters I humbly regard
that fate is a player indeed

People are strange and life is hard for
those who don't succeed

God help them and I wish them all the
best this Christmas I repeat

When the daylight dims and the sun's in
the west my prayers go out to the street.

George Hall



CHANGE

Does life deserve living
While death remains free
Devine as one's giving
For dark cannot see
Birth the beginning
Come long friend and foe
With pain in my heart
Please no tomorrow
Picture one's legs
Suggesting don't walk
Biting our lips
Requesting no talk
Floating in darkness
Would be so unkind
Feeling percentage
Brings peace of mind

Lloyd Ronald Thompson 'Thommo'

Melbourne Accommodation Services

EMERGENCY ACCOMODATION

Flagstaff Crisis Accommodation Centre

Cnr King and Rodan Streets, West Melbourne

Ph: (03) 9329 4800

Flagstaff provides emergency and short-term accommodation for men over the age of 18.

Hanover Southbank

Ph: (03) 9699 4566

Emergency accommodation line open 24 hours—7 days per week.

Ozanam House

179 Flemington Road, North Melbourne Ph: (03) 9329 5100 *Crisis accommodation for men.*

St Kilda Crisis Centre

29 Grey Street, St Kilda Ph: (03) 9536 7777 Toll Free: 1800 627 727

Provides emergency accommodation for men aged 16–25 and women 16–30. It can also provide referral and information for other emergency housing services.

Wesley Eastern Homeless Crisis Service

219A Maroondah Hwy, Ringwood Ph: (03) 9871 1594 *Eastern Region Only Open hours 9:30am to 10:00am.*

Front door service allowing people to walk in off the street to access services including getting crisis, short-term and long-term housing for families and individuals, food vouchers and material aid, rent and bond assistance, advocacy and referral.

Women's Domestic Violence Crisis Service

Ph: (03)9373 0123 Toll free: 1800 015 188 (both numbers 24/7)

Provides counselling, referral and links to women's refuges for women experiencing domestic violence. Also runs an Aboriginal womens' refuge and a young womens' incest refuge.

ASSISTANCE WITH RENTAL ISSUES

The following agencies assist people who are in rental accommodation with information about their rights and responsibilities as tenants.

Tenants Union of Victoria

55 Johnson Street, Fitzroy Ph: (03) 9416 2577

Rooming House Residents Advice Service

Ph: (03) 9411 1444

TRANSITIONAL HOUSING MANAGEMENT PROGRAMS

Eastern Metro Region

Community Housing Limited

9 Prospect Street, Box Hill Ph: 9856 0000

Salvation Army Social Housing Service Eastcare

Toll Free 1800 811 916 31-33 Ellingworth Parade, Box Hill Ph: (03) 9890 7144 85

High Street South, Kew Ph: (03) 9851 7800

Northern Metro Region

North East Housing Services

353 High Street, Preston Ph: (03) 9470 4800

Society of St Vincent de Paul 163–165 Wheatsheaf Road, Glenroy Ph: (03) 9300 2977

HomeGround

2/107 Cambridge Street, Collingwood Ph: (03) 9417 2500

Southern Metro Region

HomeGround

122 Chapel Street, St Kilda East

Ph: (03) 9537 7711

Hanover Southern Housing and Support Service

Level 1, 11 Chesterville Road, Cheltenham Ph: (03) 9556 5700

WAYSS

Level 1, 294-300 Thomas Street, Dandenong

Ph: (03) 9791 6111

Western Metro Region

MetroWest Housing Services

218 Nicholson Street, Footscray Ph: (03) 9689 2777

Salvation Army Social Housing Services Western

27 Sun Crescent, Sunshine Ph: (03) 9312 5424

Women's Housing Limited

12 Paisley Street, Footscray Ph: 9687 3066 (Times 9:30am - 1:30pm and 2:30pm - 4:30pm)

COMMUNITY ROOMING HOUSES

Aboriginal Hostels

Ph: (03) 9642 2775

Inner East Rooming House Group

Ph: (03) 9853 7501

Prahran/Malvern Community Housing

Ph: (03) 9826 5194

Salvation Army Social Housing Services

Ph: (03) 9653 3228

Southport Community Housing Group

Ph: (03) 9696 1128

Port Phillip Housing Association

Ph: (03) 9534 5837

St Kilda Rooming House Group

Ph: (03) 9534 1809

Yarra Community Housing

Ph: (03) 9419 0009

'DRY' ACCOMODATION

Quinn House

Ph: (03) 9419 4874

Provides short-term (approx. 3 months) supported accommodation for homeless men with drug and alcohol issues. Full board and lodgings are provided at

*a cost of \$250 per fortnight. It is a 'dry house', and random urine and breath tests are conducted. Support is provided by workers at the house 9:00am to 5:00pm Monday to Friday.*This is not a rehab program, though counselling and relapse prevention groups are provided in-house. Independent living skills and a willingness to participate in group programs is required.*

SHARC

140 Grange Rd Carnegie Ph: 9573 1700 Peer-based residential, supported accommodation service. Ages between 16-25.

Mind Oxford Houses

Ph: (03) 9872 2207

Provides accommodation treatment and recovery and with a minimum of 30 consecutive days of sobriety/cleantime. Residents pay their own way and live in self-managed houses in the community. Office open 9am–5pm Monday–Friday.



WHEN YOUR HOME IS NOT YOUR OWN...

Back in March 2010, the Age newspaper reported that a pilot program running in the Fitzroy high rise housing commission was set to go state-wide if found to be successful.

This program, run by the Office of Housing, can evict residents based on police evidence presented to the Victorian Civil and Administrative Tribunal (VCAT), rather than waiting for a resident to be charged by police or found guilty of trafficking in court. Forget about being innocent until proven guilty in a court of law; Forget the fact that this pilot program seems to have removed one of the most important steps of our law and order system—the right to present to a fair and non-bias audience the defendant's version of events.

Of course this brought about great debate from the so-called experts. Phil Lynch, Director of the Human Rights Law Resource Centre stated: 'If a person is found guilty and incarcerated they lose their public housing anyway!' James Farrell, the manger of PILCH'S homeless person's legal clinic said: 'The shortage of affordable housing and the long waiting lists for public housing had prompted the government's hard line approach in a cynical attempt to push people through the system.'

Being lucky enough to have never had to live in the public housing system I can only imagine how hard it would be to go about your daily life, bringing up your family, or doing whatever it is that makes you happy without being affected by the ever present drug dealing and using that has taken place for a very long time in this setting. The fact is the police have long been aware of the ongoing problem in high rise community housing yet seem to have turned a blind eye.

I have personal experience of visiting this type of housing while scoring drugs, I actually went to the same flat for over a period of nearly 15 years. This particular housing block is roughly 100 metres from a police station and as you can imagine

I was not the only person attending this flat daily to pick up drugs yet it continued on uninhampered for many years even when they did get busted. Makes you wonder doesn't it? Since then there is only a scarce few documented cases, but on Tuesday, 4th January, 2011 The Age reported, 'that a man convicted of heroin dealing inside the public housing block he lives in at Flemington'. He pleaded guilty to selling drugs to an undercover police officer at his door. The office of housing moved to have the man evicted, but VCA T overuled the application in November. Now there is talk about changing the laws.

In contacting the police media unit I am assured that at this stage there have been no changes to the currant laws. Now I know as well as the next person that dealing drugs is illegal and no I don't really want the drug dealer living next door to me but let's face it they have to live somewhere. Are these laws infringing on our basic human rights? Should we be able to do whatever we want in our own home? Is a rented property ever really your private home? I guess these sorts of self policing programs bring up a lot of questions and as far as I can see not many answers.

Making people homeless is not beneficial for any reason, not only does it add strain to an already over loaded system but it is no answer to the problem. At the time of writing this article I did contact the Department of Human Services to get a comment regarding the pilot program in the Fitzroy high rise and whether the program went state-wide as suggested.

Mr Brendan Ryan, head of the media unit for DHS community housing was unable to comment when contacted and suggested he would forward my requests for information to the minister in question. I am still waiting on a response. Although Mr Ryan did state that the Office of Housing has always been able to remove tenants in this way. Seems to me this is unjust and unfair.

APSU Member

Using your homelessness and addiction to get a home?

After living for many years with addiction and its associated mental health issues, I, like many others, found myself without family support and abandoned by friends. The end result for many of us was that life on the streets was a continual struggle to stay warm, safe and have food in your belly. Not to mention trying to stay out of jails and mental insitutions.

I went through rehab several times and came out clean with a positive mindset to move on, only to be given a room in a boarding house full of people with addiction and associated social issues.

This environment from my experience was not conducive to a healthy recovery. Within one to two weeks I was associating with these people and of course, back in the trap of an addiction motivated lifestyle. I felt helpless in trying to improve my life and suicide seemed like the only option for peace. I was stuck on a merry-go-round from hell.

So how did I get a home you might ask? I needed to understand the social welfare system and keep my frustrations and temper in check. I was fortunate to finally get a support worker that knew and understood the welfare system and he encouraged me to be patient and not give up—easy to say when you are not homeless and struggling to survive. Nevertheless, I trusted this worker and thank him for the life I have now.

This is how I received a two bedroom unit using the system in or about 2005. Before I went into a therapeutic community for rehab and recovery, I registered myself with the aid of my worker to the ministry of housing and applied for an S 1 application. S 1 applications were given to people who were homeless for a period of two years or more.

I firstly had to prove I was homeless for that period; I needed statutory declarations from people who had known me during that time saying that they were sick of me living in their lounge rooms and crashing in their homes.

I had receipts from boarding houses like the Gatwick to prove I didn't have a

residence.

I had letters from my AOD workers, rehabs and my case worker stating that a permanent residence would be beneficial to my health, recovery and welfare. Also, if your doctor is willing to write you a reference declaring the same that would be beneficial.

I had the mother of my child write a statutory declaration to state that if I had a safe place to live I could have access to my child on weekends and school holidays. I was now eligible for a two bedroom dwelling instead of a single room bedsitter. If you have a son and a daughter with access you will get a three bedroom home (something to think about).

So to finish up: I spent three months in a therapeutic community to help with my recovery process, went into a supported accommodation for a couple of months, and six months after the initial application I received a new, two bedroom unit and I have never looked back. Thanks to the workers that encouraged, believed and supported me through my struggles.

I know that in 2011 they say there is a very long waiting list, but my advice is to make the application NOW! If you fulfil the requirements it's just a matter of time and great patience before you too might feel safe once more.

As a worker now, I would like to point out that even if you are homeless and living in a supported accommodation program for a period of time, you are not deemed homeless by the welfare sector, you must be HOMELESS at the time of application. Wishing you all safety and good luck.

Frank

Reflections of a Birth Mother

There's something inside her at last
 For the longest time there was nothing
 She gazes into the mirror
 And raises her glass, drinks and turns away
 Pragmatism wins over introspection
 Her glass is empty
 She already loves her baby more than
 she has ever loved herself, but will that
 be enough?

She imagines how he will look when he is
 born, how she will dress him What sort of
 man he will become

He nudges her and she smiles briefly She
 feels different now—special

And for someone who has never felt
 special in her life It's a good feeling

She watches as her image fills the glass
 and raises it to her lips

And as she sips the only thing that has
 ever made her happy, her baby waits to
 be born.

Elizabeth

This poem was sent to Flipside via the Russell Family Fetal Alcohol Disorders Association (RFFADA), which is a not-for-profit health promotion charity dedicated to ensuring that individuals affected prenatally by alcohol have access to diagnostic services, support and multidisciplinary management planning in Australia and that carers and parents are supported with a 'no blame no shame' ethos. The RFFADA can be found at: www.rffada.org/

News flash!

Great news, the Department of Health has funded APSU at share to facilitate a project of Capacity Building in Consumer Participation in the AOD Field. I read a support letter by Doctor Ruth Vine from the Department of Health speaking of the department's support of this project and their long term commitment to the development of consumer participation in the AOD field. As consumers we believe the partnership between service users and organisations can only bring about better and richer service delivery.

Grace

Thanks for the latest edition of Flipside.

I have been involved with running residential rehabs for a lengthy period of time. I am also concerned about the impact compulsory non-smoking environments have on people's decisions to even consider detox or rehab. **Unfortunately, anecdotal stories don't impress hard heads committed to these sorts of ideological policies.**

What we really need is some proper research done to measure the impact of non-smoking policies on people's decision-making around seeking treatment. The only research we have at the moment is about people who are already in treatment, not about the ones who don't go because of the smoking ban.

Obviously, if they are in treatment they have accepted the non-smoking environment; they are therefore not representative of the broad cross-section of people seeking treatment. I would argue that those most in need of treatment are the very ones most likely to exclude themselves because of the smoking ban –if someone is together enough to accept a smoking ban as part of dealing with their other drug use they are reasonably

Letters

mature and able to make wise decisions for themselves. The people I come across are more likely to have the attitude—'what! I can't smoke there! Stuff them; no way am I going there!' To me, that is much more what I would expect, rather than—'oh yes, I can see that they have my best long-term interests at heart, I'll give up tomorrow'.

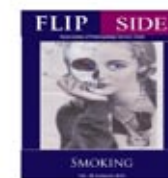
To me the best bit of research I have seen on this is that the average relapse rate back to smoking on discharge from detox is measured in minutes, not even hours—long enough to get to the nearest shop. And the relapse rate was 100%. You have to ask, what's the point?

Also, SANDAS, the peak body for AOD NGOs in South Australia and where I work, has been approached by some members concerned about the impact of some Government services going non-smoking and that the burden of service provision could be shifted to those services that still allow clients to smoke when in treatment. You could argue that the non-smoking policy could lead to Government services taking only the easier, 'more compliant' clients willing to accept a ban—those (few) more mature and reasonable clients who are in a stable frame of mind when booking into detox or rehab.

I believe that detox and rehabs are there to help people get to a more stable frame of mind, not demand it on entry.

I would encourage you and other user groups to **lobby organisations like the ANCD or Australian Government** to fund proper research into the issue—there is a strong case for this research to be done because people may not seek help because of this policy. And it needs pushing because researchers will not take it on off their own bat—too controversial and could be seen to be supporting the smoking lobby.

**Andrew Biven, Comorbidity Coordinator
 SA Network of Drug & Alcohol Services
 (SANDAS)**



I work with the service user movement in Auckland, New Zealand. I work both within a detox unit and also with an AOD Pregnancy and Parental service.

We struggled with smoke free for over a year in this unit, my job was to present the service user voice which was clearly that consumers respected the right for others to not be exposed to second hand smoking, or smoking as a trigger but still wanted to be able to smoke.

They made many complaints, petitions, etc. As a service we struggled with implementing smoke free, at one stage even banning smoking on walks (which is actually illegal), at this time smoking on the unit was at an all time high and at one stage there was even a fire, albeit a very small one, very easily contained.

But, we are now at a stage where it is working. We are allowing people (who are assessed as being safe to do so), to leave the unit with a buddy and go off site to smoke, unescorted by staff. It is working!

There was much fear about implementing this—what if they took off or got hold of drugs or alcohol out there, well, this has happened on occasion and we deal with it when it does, it really is not such a big deal. And yes, some people utilise their visit to detox as an opportunity to give up smoking, the whole team is trained in providing NRT and support around quitting.

**Hayley Theyers
 Consumer Liaison, Community Alcohol
 & Drug Services, Auckland**



The Association of Participating Service Users (APSU) is a service area of the Self Help Addiction Resource Centre (SHARC)

