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HERA Intoxicating Spaces Project

Round-Table Discussion

1. **What method(s) do you use in your individual field(s)/practice to think about the issue of sharing and negotiating public space in relation to drug consumption?**
2. **What concrete strategy/strategies have you used to date to deal with this issue? Please provide one concrete example.**

**Negotiating space and substance use in Hamburg-Altona**

First of all the topic is complicated. In my experience, public space seems to be less public for those living in close by a park or a playground. This proximity might make residents feel they have a right to avoid the presence of unwanted people, such as people who suffer from the disease of drug addiction.

As a social worker, my first aim is to protect my clients – people with substance addiction issues – from the often diffuse and undifferentiated anger and aggression of the neighbourhood. My strategy for handling this kind of situation is first of all to inform residents about the disease of drug addiction. This might change their perspective and their newly won knowledge might enable them to handle the situation with a different mindset.

I listen in a focused manner and – as far as possible – empathize with their fears and needs without hiding my own point of view. In the best-case scenario, this is a step in bringing the different groups and their divergent interests together and might be a chance to negotiate terms for existing side-by-side and with respect for one another in the public space. I mediate the needs and frustrations of both sides and try to find people to support this process. So, for example, I enlist the assistance of a highly respected pastor of a neighbourhood church. Each group needs to feel that the mediators care about its needs in order to bring the discussion back onto a level of concrete and targeted thinking and action.
Another aspect of handling such a situation is to network with different institutions such as the police, the garbage disposal and local government institutions and services. Many problems can be sorted out better through social work rather than by calling in the police. Yet for this to take place, the various government services and institutions need to be in contact with one another. Hamburg’s garbage disposal can keep the public space clean (application of the broken window theory) and install special containers for used injecting equipment. Local government can be forced to invest more money in specific infrastructures for urban spaces. The public space should be designed in a way that makes peaceful coexistence possible. This begins with public toilets and might end with mobile tents for monitored drug consumption. All these kinds of interventions coupled with the most important tool – low-threshold street-based social work – can pacify the situation.

These concrete measures can be accompanied by education about the disease of drug addiction, for example, at the kindergarten near the contested public space. In this case again, I see my duty in bringing up these ideas with the specific groups; in this particular case the Kindergarten through a medium of social work specially equipped to teach children about this disease and the accompanying harm and misery. Although this may sound abstract in part, I actually deploy these various interventions in my everyday work. Long-term, however, only a change in health, drug and social policy can stop the immiseration that makes residents scared and frustrated about what is happening in ‘their’ public space and that causes a small number of people with drug addictions to behave antisocially, which, under the circumstances is a psychodynamically comprehensible position.