

HOMELESSNESS



2021/22 Point in Time Survey



FINAL REPORT

November 2022

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1. Introduction

Shelter is the basic human requirement. Without it, people cannot guarantee their basic needs such as safety and protection from inclement weather. Homelessness is generally the most extreme form of poverty. People become homeless for many different reasons, these aspects that lead to homelessness are diverse and this makes it a challenge to formulate an understanding of the homeless sub group of the population.

There are not many studies that have been dedicated to understanding the homelessness community and migratory behaviors of the homeless. Building on from previous work (2016 Homelessness study) for the eThekweni Municipality with its intention to develop a comprehensive understanding and quantify the causes, challenges, needs and outcomes associated with the life experiences of the homeless people living at the shelter or on the streets.

The overall objective of this study is to understand homelessness in eThekweni Municipal Area and to provide homeless people a platform where they can share their narratives as homeless persons. These narratives would enable researchers to draw the linkages with the socio-economic and political spheres of South African society, as perceived by homeless people, leading to their homelessness.

2. Background

The 2021-22 Point-in-time Survey conducted by the eThekweni's Research and Policy Advocacy Department in collaboration with the Safer Cities Unit follows the first 2016 eThekweni Homelessness study aimed at understanding homelessness in Durban. The primary purpose of the 2016 study was to develop a contextualized understanding and quantify the causes, challenges, needs and outcomes associated with street and shelter living confined to the Durban Central Business District (CBD) and immediate surroundings.

Study objectives were to:

1. Understand who is living on the streets and in shelters, where within the CBD they are located, and their pathways into and out of street living.
2. Understand the needs and challenges faced by the street and shelter living.
3. Determine what support is being provided to the street and shelter living by NGO's, FBO's and the Municipality.
4. Work in collaboration with the eThekweni Municipality, key NGO's and FBO's and members of the community (both street and shelter-living) to build relationships and establish project ownership.

The Point-in-time 2021/22 Survey focused throughout the eThekweni on who is living on the streets and shelters, their location and their pathways into and out of street living. The survey explored the needs and challenges faced by the street and shelter living people. Results were presented to all stakeholders who have interests in eThekweni and KwaZulu Natal homelessness. This initiative led to the establishment of a forum to enable the findings to determine what support is being provided to the street and shelter living by NGO's, FBO's and the Municipality.

3. The Conceptualising Homelessness for the City

Homelessness tends to be very broad and vague in nature. Definitions of homelessness vary considerably across different contexts, but the underlying definition captures the lack of adequate and satisfactory shelter (Kok et al., 2010). This section presents various interpretations of the concepts; as conceptual clarity would better inform the approach for this study.

Despite the fluid nature of the concept, there is a significant need for a 'strong' definition of homelessness that would form the fundamental basis for understanding this sub group of the population. Homelessness tends to have different meanings in different contexts. South Africa, homelessness is attributable to poverty and the socio-spatial displacement of people historically (Kok et al., 2010), as opposed to more developed countries where homelessness is attributable to personal and household circumstances (Tipple and Speak, 2009).

Naidoo (2010) offers a broader interpretation, indicating that homelessness embraces both the absence and the poor quality of shelter, and this is more prevalent in South Africa. Naidoo (2010) further argues that street homelessness means more than just a lack of shelter as it is closely connected to a range of other social and economic factors. Undoubtedly, homelessness is broader than just a lack of shelter, as it does not only result from the lack of affordable housing, but it also includes a range of complex factors including poverty and unemployment (Cross et al., 2010). Many people would leave their homes to be closer to where employment prospects exist, however such people would not be considered homeless, but they however end up without shelter. Blomely (2009) puts yet another argues that, homelessness itself is partly and not entirely produced by lack of property, since property alone does not cause homelessness, but it however remains a crucial and often overlooked factor. According to Doherty et al. (2008), homeless people by definition are unable to access adequate housing of their own, and societal property rules forbid access to property, hence the alternative location for the homeless becomes open public spaces. In addition, they do not only inherit the status of lacking property or shelter, but they also experience socio-spatial exclusion. This makes understanding them better a priority, but it is even more important to grasp the conditions that lead to and perpetuate their homeless status.

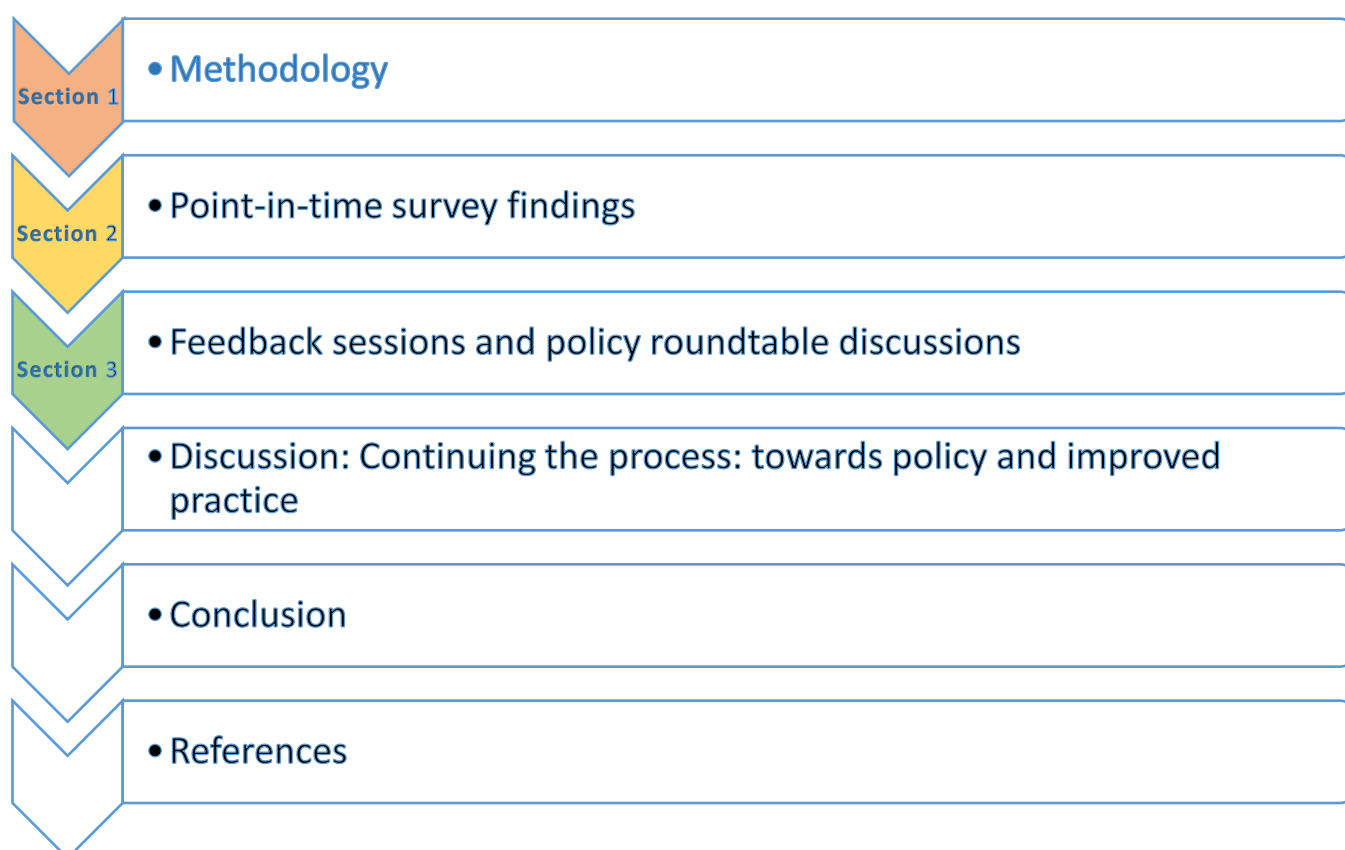
In conclusion homelessness becomes a challenge to define and even harder to measure. However, a definition of homelessness is essential for accurate and reliable identification and classification of homeless people, which cannot be set apart from its framework and historical foundation.

Other terms that are related to homelessness are: -

Term	Definition
Street-living person	A person for whom the street or other outside spaces has a central role in their lives.
Shelter- living person	A person for whom a homeless shelter has a central role in their lives.
Formalised Shelters	Beds rented out on a daily/monthly basis. These spaces may compromise of a mix of private and communal accommodation. These shelters were widely known by both the street and shelter-living communities.

4. Overview of report

This report is structured in 3 main sections followed by a discussion, conclusion and references.



5. Methodology

Methodological framework: Community-based Participatory Action Research (CBPAR)

The 2021-22 Point in time survey was undertaken from the 13th to the 24th of June 2022. The survey profiled the extent of homelessness within eThekweni municipality. One particular form of community engagement research is Community-Based Participatory Action Research (CBPAR); where community members are viewed as co-researchers, rather than as study subjects or participants.

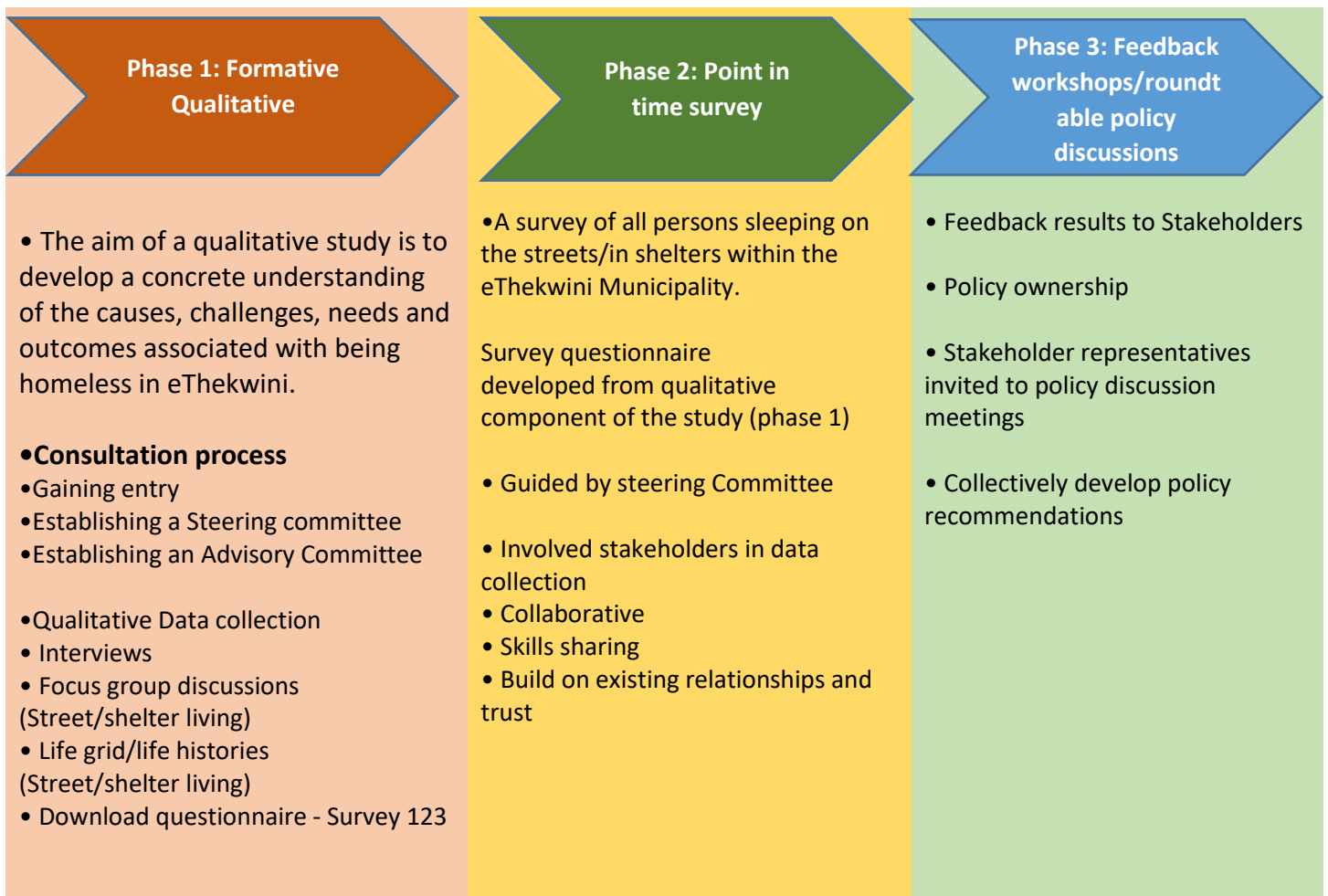
A background on Community Based Participatory Action Research (CBPAR) which is a shared approach to research that involves various stakeholders throughout the research process, this could include establishing the research questionnaire, to developing data collection tools, as well as analyzing and dissemination of research outcomes. It is a research framework that aims to address the practical concerns of people in a community. The CBPAR framework begins with a community's issue, proposed action, or strategy and then supports or enriches this action with research that is community based engagement. CBPAR, place-based research recognizes that residents have the ultimate knowledge of the issues, strengths, and solutions that most impact their community. It thrives with community engagement in the research process, especially through primary data collection methods such as interviews and focus groups. This community engagement ensures that those who represent that place, particularly those who reside there has firsthand knowledge. (<https://bmcpublichealth.biomedcentral.com-articles>)

In keeping with the CBPAR framework, it became necessary to note that individuals who are homeless, were previously homeless, or work closely with individuals who are homeless, are the experts. A Committee was appointed by the Research and Policy Advocacy Department to contribute and assist with the study processes. The Committee consisted of a Steering Committee and an Advisory Committee. The Steering Committee advised the research process direction, vision, and implementation protocols. The Advisory Committee consisted of stakeholder groups like the street-living, policymakers, service providers, and provided input in relation to methodology and project implementation process. This group (i.e. Research and Policy Advocacy Department, Safe Cities Unit, City People, Metro Police, etc.) assisted to further establish networks, build trust and gain entry. Furthermore, the Advisory Committee assisted the research team to strengthen its relations with service providers, who in turn facilitated community participation.

Study Design

In order to achieve these objectives a three-phase study was designed with each phase building on the work of the preceding phases. Phase 1 of the study comprised of building relationships, gaining entry and qualitative data collection. Phase 2 comprised of a point in time survey and a final component, phase 3, comprised of feedback sessions and policy discussions.

Figure 1: Study phases



6. Phase 1: Qualitative

The aim of a qualitative study was to understand homelessness in the eThekwinini Region, through providing homeless people a platform where they can discuss their predicament as homeless people. These narratives had enabled us to develop a concrete understanding of the causes, challenges, needs and outcomes related to being homeless in eThekwinini. Phase 1 was intended to assist in identifying the themes to be included in phase 2 (Point-in-time homelessness study). Phase 1 included the Safer Cities department consultative process with focus group discussions (FGDs) with adult individuals who self-identify as street/shelter living and resided in the eThekwinini Municipal Area during the time of the study. Facilitators from Safer Cities were able to offer insight on the places that the homeless frequent, map and facilitate access to the homeless community. While children below the age of 18 years old were an important part of this study, however due to legal implications, we had to exclude them in the qualitative interviews.

7. Phase 2: Point-in-time survey

This component of the study entailed conducting a Point-in-time Survey of all people sleeping on the streets/ in shelters in the eThekwinini Municipal Area. An attempt at securing a sample of such a population came with its challenges, given their nomadic lifestyle. With the guidance and assistance of a Non-Profit-Organisation (City People) with who were working with the homeless people that the study was conducted successfully. Given the time constraints and the study sample, a non-probability sampling method was applied. This sampling method was preferred because homeless people are highly mobile and hard to find and recruit. We also relied on insights from stakeholders on the places that the homeless frequent which facilitated access to the homeless community in all regions within the eThekwinini Municipal Area. In this regard, a consultative meeting was held with all relevant stakeholders to obtain this information using a mapping activity.

A semi-structured questionnaire was adapted from the previous homelessness survey. The survey variables covered the following topics: demographic information; pathways to homelessness; current living arrangements; returning home (re-united with family); surviving on the street; social and health challenges associated with street/shelter-living. As far as possible established questions from a previous 2016 survey “Understanding homelessness in Durban” was used.

8. Data collection processes

Following a strict recruitment drive in collaboration with relevant departments, unemployed graduates who are registered in the Presidential Employment Program (PEP) were recruited. The Project team decided to do an in-house study and employed PEP (Presidential Employment Program) graduates to conduct the fieldwork. The fieldwork team had been through a training program and were further trained to capture the survey questionnaire electronically prior to the study. Team members were kitted in eThekweni blue t-shirts and bright vests with the city logo printed on them to make them easily identifiable. The intention was to create community awareness about the study and ensure co-operation from the intended respondents. The fieldworkers' uniform enabled the fieldworkers to be easily identifiable as well as allay fears of the community so that they can freely interact and ask questions about the study to allow for swift data collection during the survey.

The fieldwork team comprised of 24 graduates divided into 5 teams. Each team covered a sample area within the study regions. Teams travelled in two or three vehicles, each team had a dedicated facilitator, researcher, security personnel, project coordinator and a social worker.

Interviews on the street were conducted early in the morning, preferably by 09:00 latest. This was to ensure that only individuals sleeping on the street were part of the survey. Data was collected using an application (survey 123) downloaded on the fieldworker's phones. At the beginning of each interview the researcher read out the consent form and explained the purpose of the study to the research participants in a language they understood, mainly in English and isiZulu. This was to ensure they understood what the study entailed and its objectives.

Shelter interviews in the CBD were also conducted in the early evening until about 9pm. During phase 1 certain areas were identified as high risk, such as: Albert Park and the area immediately outside Dalton Road Hostel. Specific security arrangements were made in these areas with the deployment of the City's Metro police personnel. Data collection was also conducted inside the shelter, a small team would enter the shelter and interview residents.

9. Study Limitations

As with all studies, the findings must be considered in relation to the limitations of the study. Due to time constraints as well as reasonable efforts were made to interview all people sleeping on the street/in shelters. Certain individuals could not be interviewed due to mental illness and severe intoxication. While their presence was recorded and is included in the headcount numbers, the extent of mental illness or substance use may be under-represented. Furthermore, direct measures of the prevalence of mental illness, chronic illness or substance use were not included in the study. The survey relied on self-reported accounts of homelessness, illness and substance use. As with all self-reported studies, there is a possibility for misrepresentation.

10. Point-In-Time Survey Findings

In this section we present the main findings that emerged in our study and draw on the survey results. The results will be discussed according to the four core categories below:

- **Headline findings:** Who are the street and shelter-living people in the eThekweni?
- **On becoming homeless:** What are the pathways to homelessness?
- **On being homeless:** What are the daily experiences of people living on the streets/in shelters?
- **Overcoming homelessness:** What are the factors that would facilitate pathways out of homelessness?

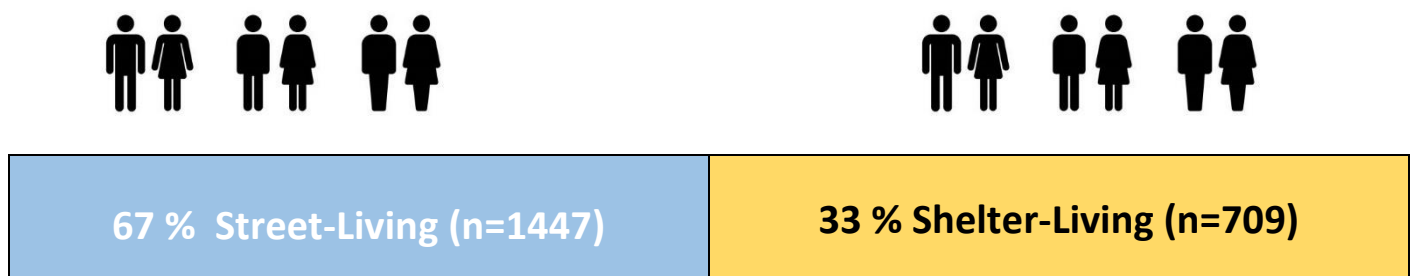
Overall a total of 2156 street and shelter-living people were interviewed in eThekweni Municipal Region in June 2022. Of this population, 67% were found living on the street, in abandoned buildings, parks or other places outside with the remaining 33% found in formal shelters (see Figure 2 below).

The overall results from the Point in Time Survey have shown that the street and shelter-living community consists of different type of individuals ranging from persons:

- a) literally roofless,
- b) secondary homeless who stay in overnight shelters,
- c) temporary, occasional and prolonged homeless persons,
- d) Individuals who have some form of 'employment, e.g. car guards, recycling cardboard
- e) jobless individuals, substance abusers,
- f) and foreign migrants.

The following results confirm on the various challenges facing the homelessness people. They have different experiences of homelessness and need different kinds of support to help them get off the street.

Figure 2: Total number of street and shelter-living individuals in the eThekweni



Overall, the results indicate that street, respondents living in abandoned buildings and shelter-living community of the eThekweni Municipality is not an identical group. Evidently, within this community, there is a range of persons including the following overlapping groups a) persons who are literally roofless, b) secondary homeless who stay in overnight shelters, c) temporary, occasional and long-term homeless individuals, d) persons who have some form of 'employment e) jobless individuals, substance misusers and abusers, f) foreign migrants and g) children. The study confirms that homelessness is a multitude of persons that are homeless.

11. Characteristics of the sample

The characteristics of the sample reflect the demographic composition of the South African population. This indicates that homelessness occurs to people of all population groups and sexes.

Table 1 presents the percentage distribution of the study sample by selected socio-demographic characteristics. The study participants consisted of a much higher male population compared to females.

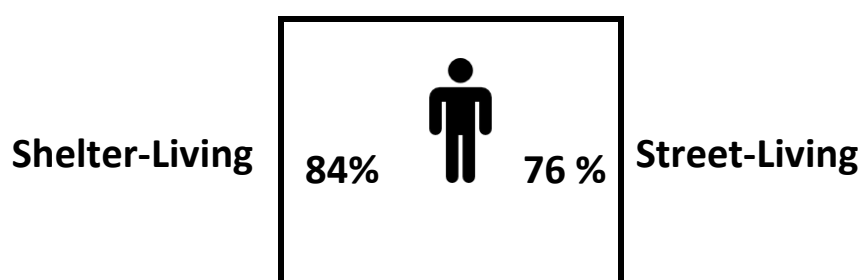
The participants' ages ranged from 14 years to over 80 years of age. The highest grouping of n=1301 participants fell between 25 – 35 years' age group, while n=410 participants were between the ages of 36-46 years old. About n=153 participants were between the ages 47-81 years' old. Only n=7 participants were 70 years and above.

Demographic characteristics

Race

The study shows that majority of both shelter and street-living respondents classify themselves as Black (87% and 92% respectively). A total number of 1145 black participants live mostly on the street.

Gender

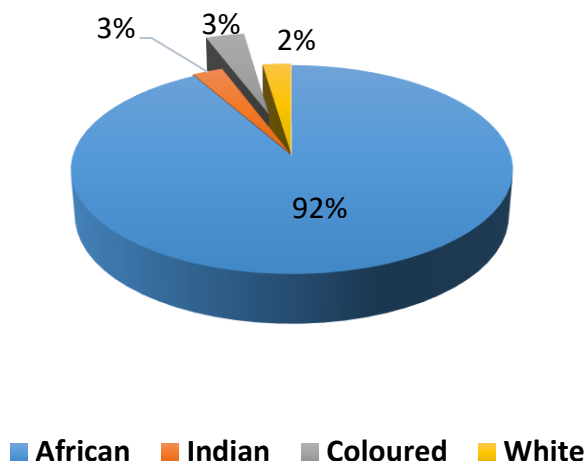


Overwhelmingly the majority of street and shelter-living people are male.

Age

Survey results indicate that the street and shelter populations are between the ages of 14 and 81 years. Younger people tended to stay on the street while the older population are found in shelters. Twelve respondents are over the ages of 65 with a further 6.8 % are between the ages of 45 and 59 years.

Race



The homelessness population comprise mainly of Black Africans (92%)

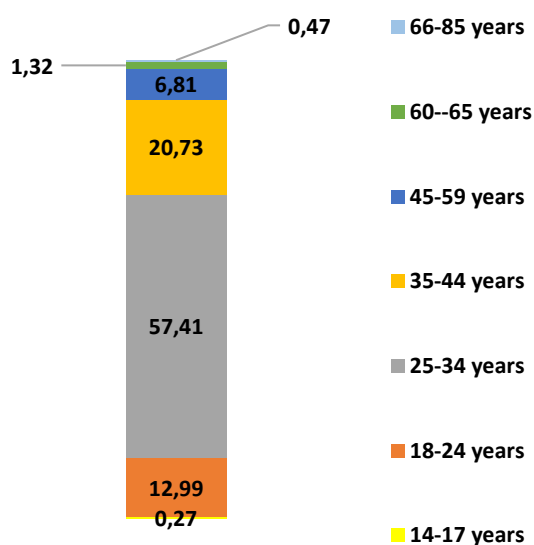


82 % Male



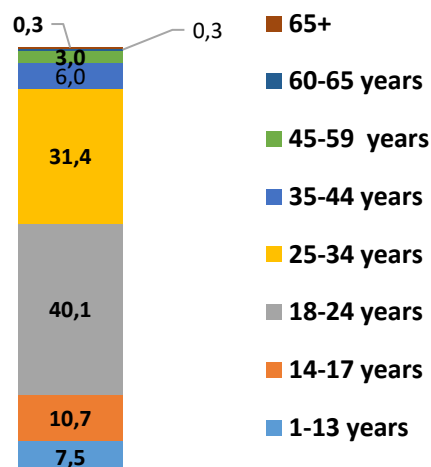
47% have children under the age of 18 years

AGE - STREET/SHELTER LIVING



Relatively young population who are homeless. Largest portion of this sub-group are young adults between the ages of 25 and 34 years (57%) followed by those between the ages of 35 and 44 years (21%).

Age at first experience of homelessness



Respondents making up this combination of Shelter and Street sub-group who first became homeless at a relatively younger age when compared individual sub-group population. Forty percent of respondents first became homeless between the ages of 18-24 years followed by a further 31% that first became homeless from the ages 25 and 34 years.

Table 1

12. Who are the street and shelter-living people of eThekweni

Respondents have followed dissimilar pathways into homelessness, have different familiarities of homelessness and require different kinds of assistance to help them overcome homelessness. The population cannot be thought of as a similar group of individuals. Action to address homelessness in the city will require different means, with a combination of interventions tailor-made to the needs of specific sub-groups. To plan and balance such services, it is important to understand the scope and characteristics of the target sub-group. Categorising sub-groups of this larger population can be done in a number of ways. In this report, we will reflect on the results of 6 overlapping sub-group populations.

n = 852

**Engaged
daily in
activities
for pay**

Nearly 40% of the combined street and shelter population engage in activities daily such as recycling or small scale jobs. Thirty-Four percent have some sort construction related skills.

35 %

**Reasons
for coming
to the
streets**

The most common reason of homelessness to leave home was to seek employment.

n=1060

Health

Almost half in this sub group suffer with acute conditions such as diarrhea, fever, flu (49.2%) and 16.9% had tested (HIV/TB etc.)

Race – Sub-Groups

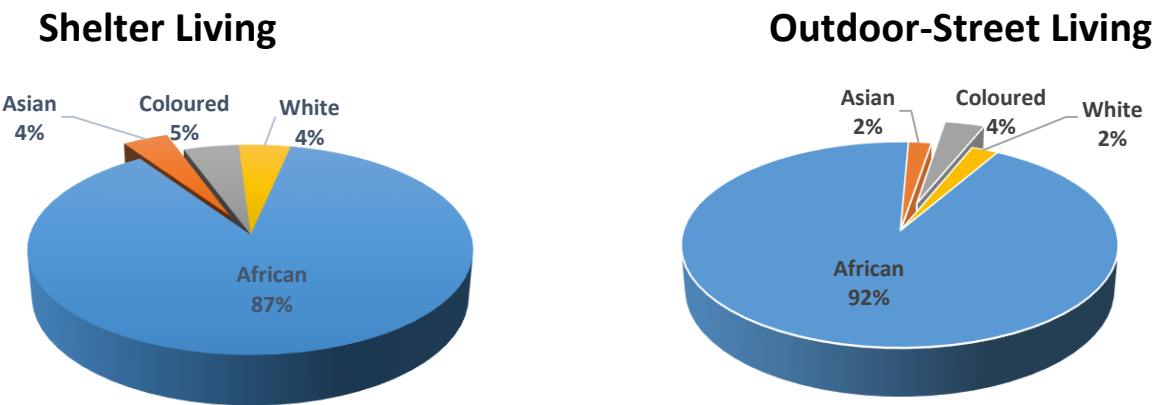


Figure 3

Age Breakdown

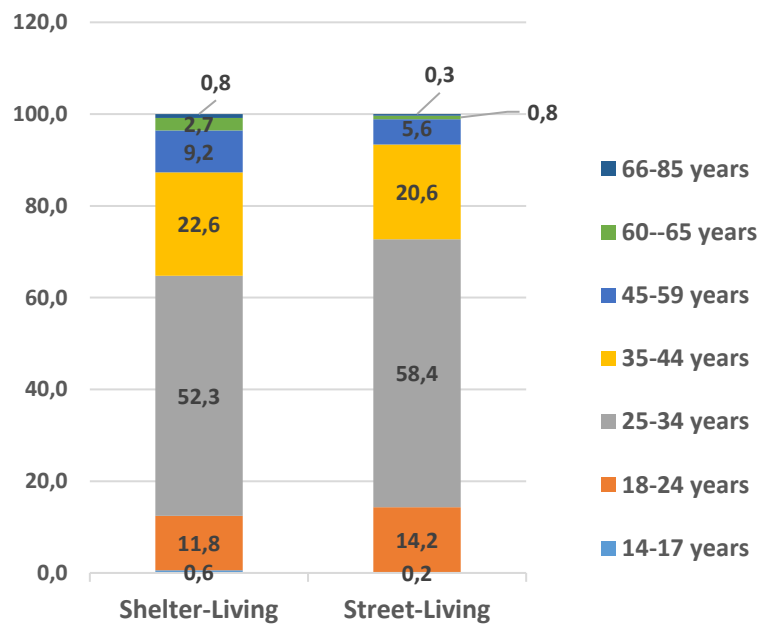


Figure 4:

Across the sub-group populations, the largest proportions of people are between the ages of 25 and 34 years.

13. Age at first experience of homelessness

For both street and shelter populations, a large proportion of people first came to the streets in between the ages of 25-34 years of age. For the unsheltered population, 58% come to the street between the ages of 25 and 34 years, while 14% reporting coming between the ages of 18 and 24. The majority living in shelters report coming to the streets at about the same age as the street-living population, 52% reporting coming between the ages of 25 and 34 years, with a further 23% coming between the ages of 35 and 44 years.

A noteworthy portion of shelter living people first became homeless at an older age with 9% reporting having first come to the street between the ages of 45 and 59 years and a further 4 % once they had already reached pensionable age.

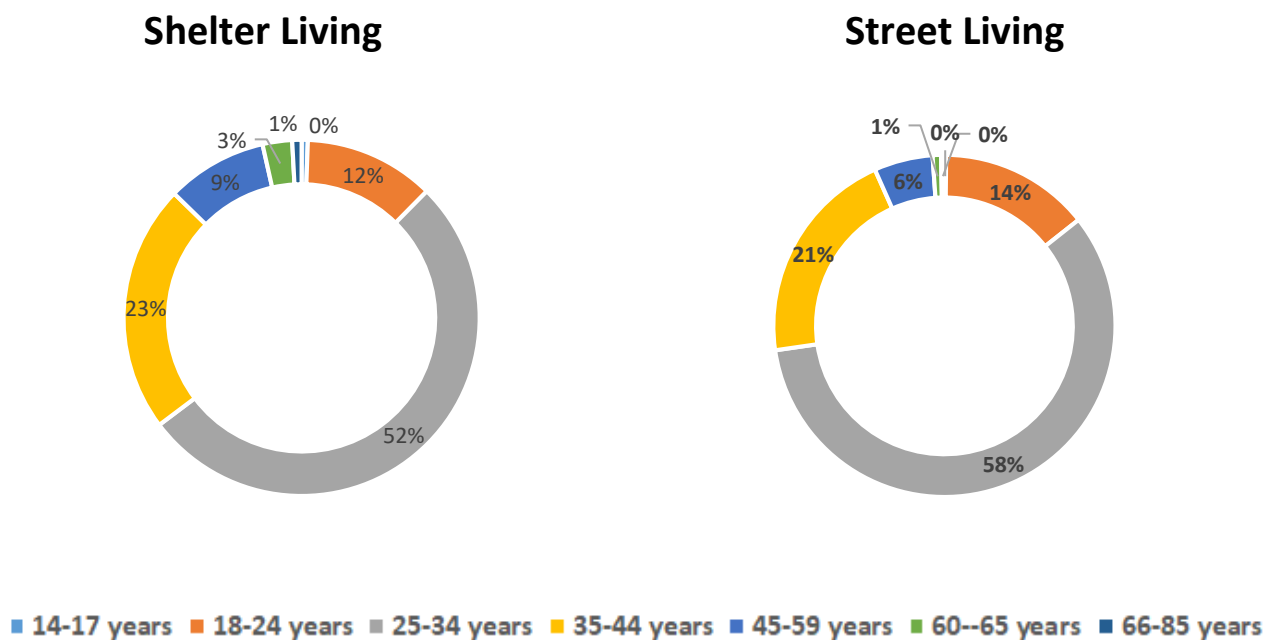
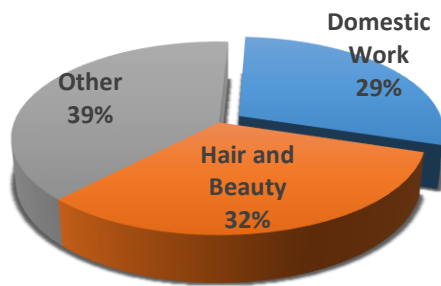


Figure 5

South African studies have suggested that street children are resilient but also suicidal, engage in unprotected sex and other high risk sexual behavior as a means of survival, have high rates of substance abuse and are physically abused and stigmatized due to their state of homelessness. However, few studies have explored in a more holistic manner the lived experiences of street children in South Africa. The main purpose of the study was to explore qualitatively the lived experiences of street children living on the street of Durban. (Hills F, Meyer-Weitz A, Asante KO. The lived experiences of street children in Durban, South Africa: Violence, substance use, and resilience. Int J Qual Stud Health Well-being. 2016 Jun.)

14. Employment-related skills – Female – Street/ Shelter Living



The most common skills reported among females were hair and beauty (braiding etc.). Some reports of Domestic work and a high number of respondents (84%) did not have any skills.

Figure 6

Female Age % - Street/ Shelter Living

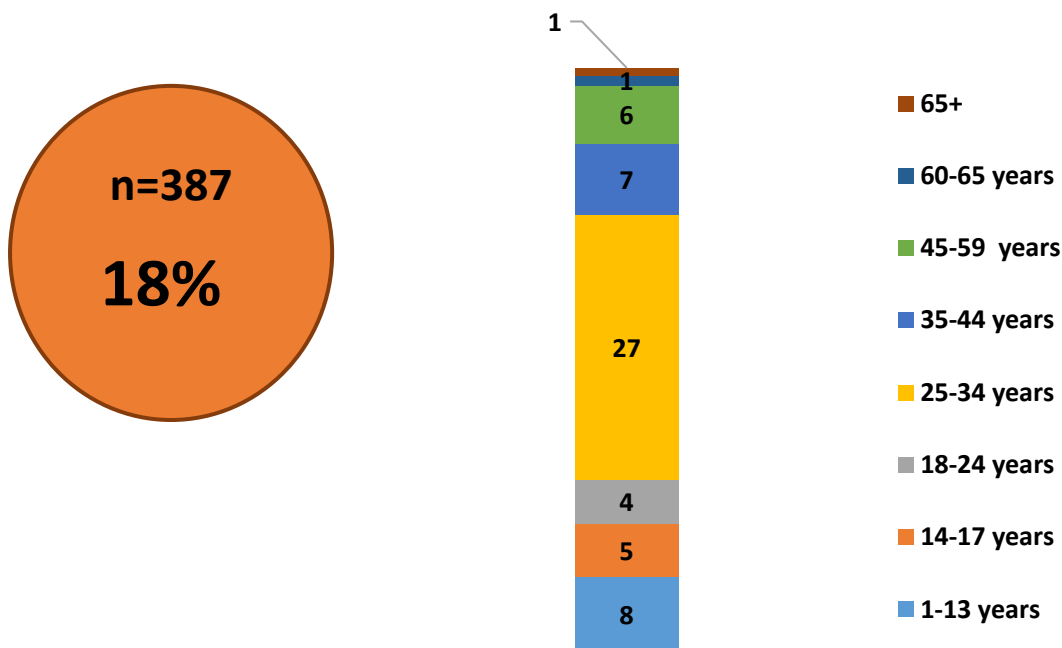


Figure 7:

Homeless women have received relatively little attention, perhaps because they are far less likely than men to be in this position. But this asks the question of why this should be. This study also highlights the plight of homeless women in the eThekweni.

A total of 387 women were interviewed, which forms 18% of the homeless population. A noticeable more even distribution is noted in the age at which females became homeless. However, a substantial larger portion of this subgroup became homeless at an older age (27%) of first becoming homeless at 25-35 years or older

15. Educational Attainment

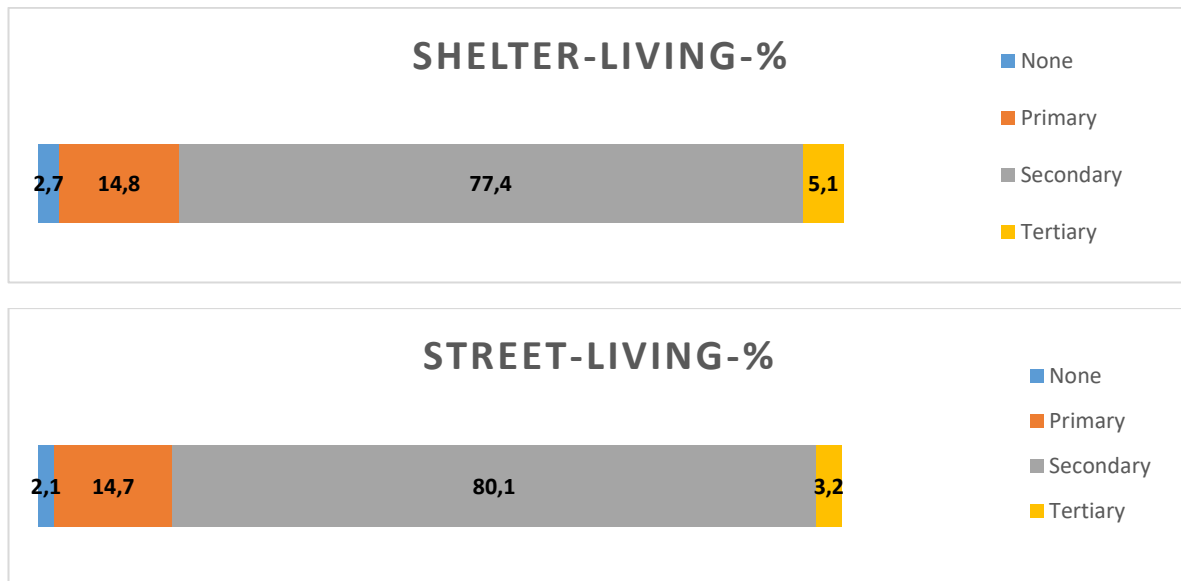


Figure 8:

Education is an important trait to our understanding of homelessness. Persons with lower educational attainment are at higher risk of unemployment and poverty.

Nationally, 5% of the adult population have no schooling, 15% have some primary education, 65% have some secondary schooling and 13% have tertiary education (Statistics South Africa, 2014).

The above diagram (figure 8) shows that the education levels of homeless persons fall above the national levels, majority of shelter and street-living respondents, report having some secondary education (77% and 80% respectively) with 5% of the shelter living population reporting having some tertiary education. The study indicates, 2.3 % of the respondents have no schooling, 15% have some primary education and 3.7% have tertiary education.

16. Employment-related skills

In order to better understand and unpack respondents' employment situation, questions were asked relating to the skills people have.

Sanchez-Guerra (2011) argue that educational attainment is generally not considered a serious variable in the study of homelessness yet the lack of formal education can form an obstacle in securing employment in the current socioeconomic climate. Therefore, with the majority of participants having not completed secondary education and few with tertiary qualifications has shown to be an important factor in understanding the dynamics of homelessness. The lack of a steady and decent income can often lead to difficulties in having and maintaining a stable household life. Though it cannot be argued that the lack of a decent education causes homelessness, but the lack of a decent education increases the likelihood of being vulnerable to homelessness (Sanchez-Guerra, 2011).

The most common skills reported were construction related skills (building, painting, welding etc.). There were those that are computer literate and a high number of respondents did not have any skills, the same number of respondents do not have any skills.

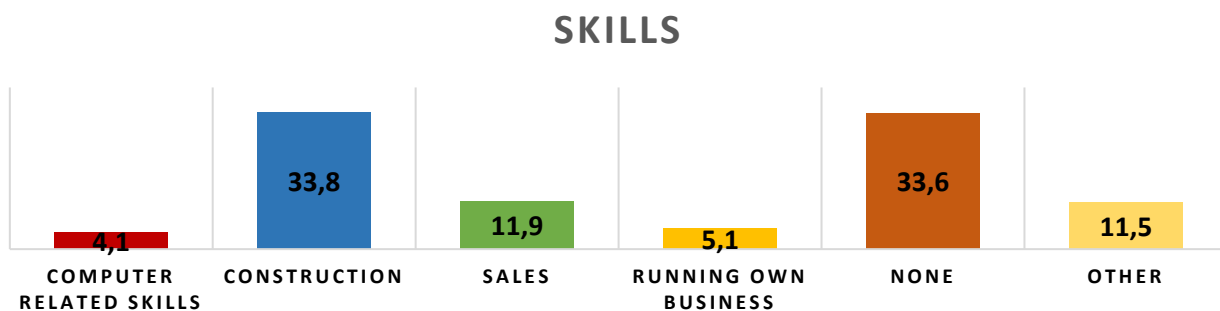
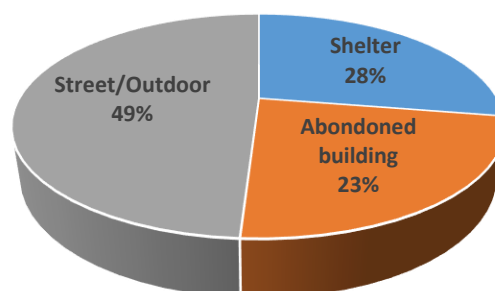


Figure 9:

17. Transitional spaces

The homeless population in eThekweni was mostly found to spend all nights in the week preceding the survey in unsheltered locations (49%) or in shelters (28%), Twenty-Three percent report spent staying in abandoned buildings/parks.



18. Country of origin

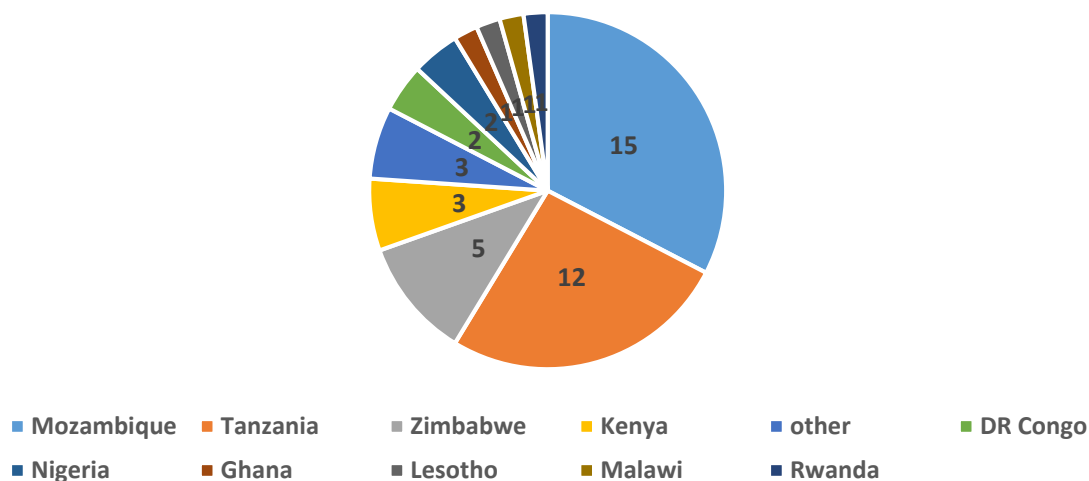


Figure 10:

A total of n=46 Foreign Migrants (Figure 8) were interviewed in eThekweni. Most foreign migrants on the streets are of Mozambique nationality (15) followed by Tanzania (12).

The research participants consist were between the ages of 18 to 65 years, seven of whom were 44 males and two females. 41 % of the respondents fell between the ages between 35-44 years.

Out of 36 who had responded majority of foreign migrants 21 live in street-outdoors. 72% have construction skills while 28% have no work experience.

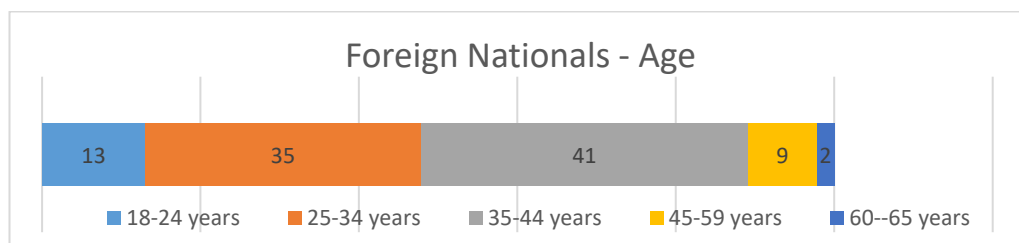
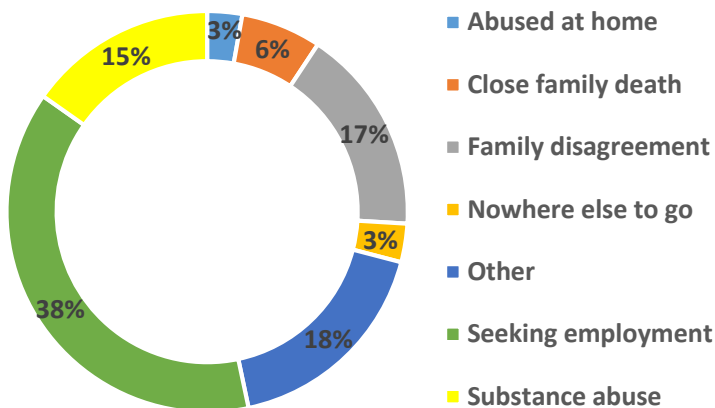


Figure 11:

On becoming homeless

19. Pathways into homelessness

Shelter Living



Street Living

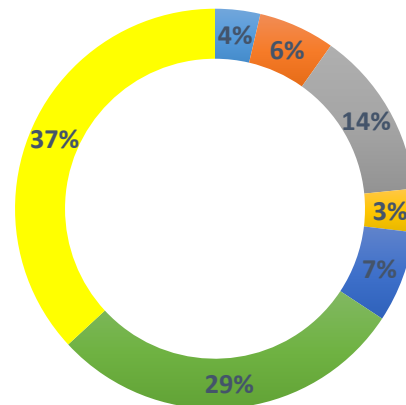


Figure 12

A range of factors that were identified by the participants as having led them to homelessness can be classified into different categories. These included, in order of significance, seeking employment in the city, family trauma (including family conflict and death of a close family member), individual substance abuse and the lack of an alternative place to go (see Figure 12). Most respondents also indicated that the inability to find reasonable employment was one of the main reasons they have remained homeless.

The majority of the participants (38%) living in shelters cited unemployment as the major reason why they were homeless while participants living on the street cited substance abuse (37%) as the major factor.

While unemployment was also mentioned as a reason for being homeless, probing into the background of some of the participants revealed that there were also family disagreements which pushed respondents into homelessness; some of which were linked to individual characteristics such as substance abuse that played a role in the participants' homelessness.

The study's qualitative data indicates that the pathways into homelessness are not mutually exclusive. Rather they are complex as well as various factors that contribute to shaping pathways to homelessness. For example, we have noticed strong influences that family factors (family conflict); individual factors (like drug abusive behaviors) and financial challenges have on the development of this participant's pathway to homelessness.

The challenge related with unemployment and linked to poverty was a common theme that was observed throughout the data. For some, moving to the streets was a consequence of their financial circumstances, while for others, 'the city' was perceived as a suitable place to seek employment. Although 'the city' offered some financial relief to persons from trading on the streets to recycling cardboards, many of the participants' searches for jobs had been unsuccessful, even for those who had relevant skills and experience.

On being homeless

20. Surviving the streets

The aim of the study was to understand homelessness and the behavior of homeless people. We needed to understand how homeless persons' experience life on the streets. The emphasis was focused on the participants' experiences and challenges associated with a) making a living, b) living conditions c) experiences of violence and intimidation and d) health and wellbeing.

The participants were asked questions regarding their experiences of living on the streets in the eThekweni and were asked how they made a living being homeless. In relation to obtaining money, begging and hustling arose as key activities as this was one of the methods used by the participants to secure money. Based on the participants' descriptions, hustling refers to the activities, including begging and small short-term jobs they would do to make money to obtain food.

Most of the participants stated that they were unemployed at the time of the survey as per figure below. With just a few having small scale jobs (such as car-guarding or selling goods on the street), begging and hustling came up as the main sources of income for the participants (see Figure 13 below).

21. Employment and Finances

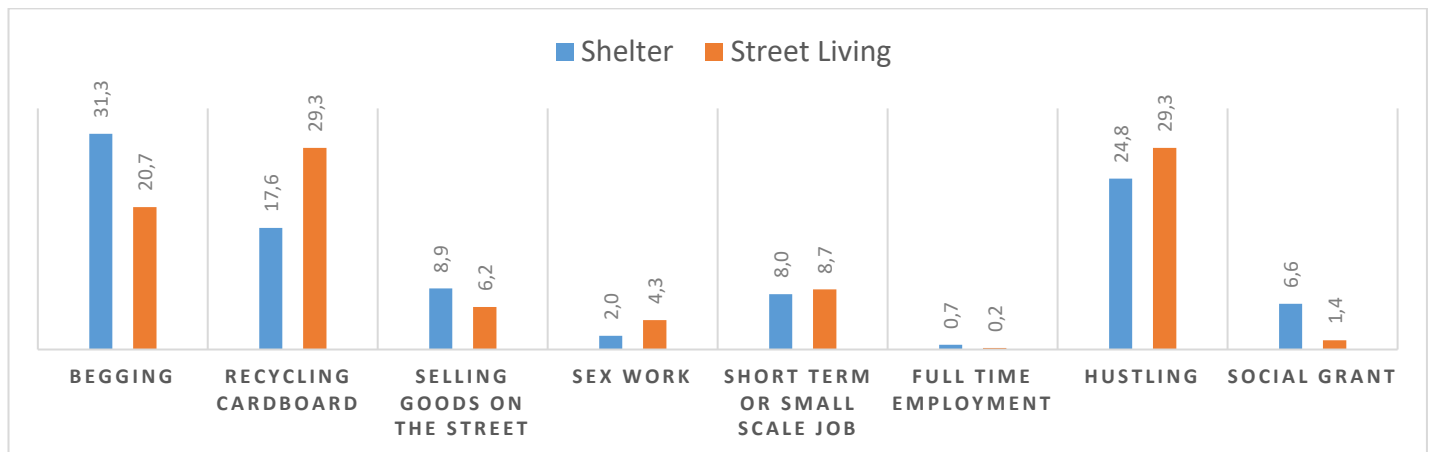
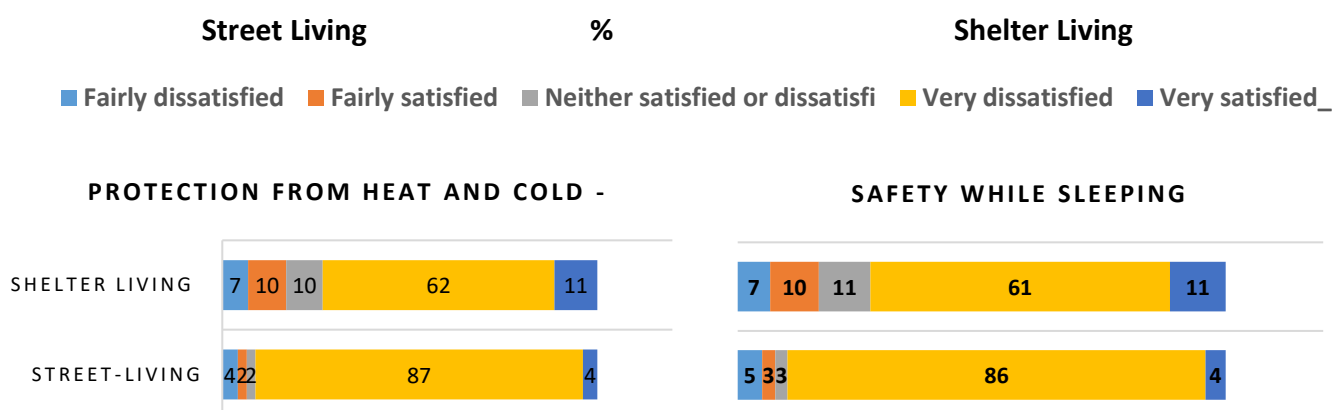


Figure 13

22. Living conditions/amenities

Our analysis of the survey data revealed a difference between the perspectives of shelter-living and street-living individuals in relation to their living conditions. Specifically, shelter-living persons reported slightly higher satisfaction with their living spaces in terms of protection from heat and cold, their personal safety, the safety of their belongings and protection against sexual abuse (see Figure 14).

In general, most groups were very dissatisfied with their protection against sexual abuse, as well as their protection from heat/cold and the safety of their belongings in the area where they sleep. Street sub group with 86% concerned about safety while sleeping.



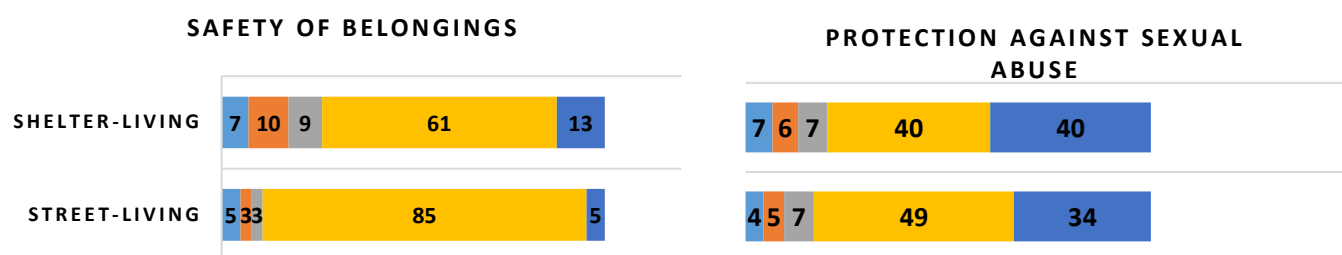


Figure 14: Satisfaction with living conditions

23. Health and wellbeing

Physical health

Seventy-nine percent (79%) of shelter-living populations and 77% of the street-living population have at some point required medical assistance. 53 % of residents living in shelter have indicated to having required assistance less than 6 months ago. Most people access healthcare at public clinics and hospitals. Key reasons for seeking out medical assistance the last time people were in need of healthcare include acute conditions (street-living: 49%, shelter living: 53%) and accidental injury (street-living: 15%, shelter living: 10%). Communicable Disease such as TB and HIV were reported by 18% of the street-living population and 17% of the Shelter-living population

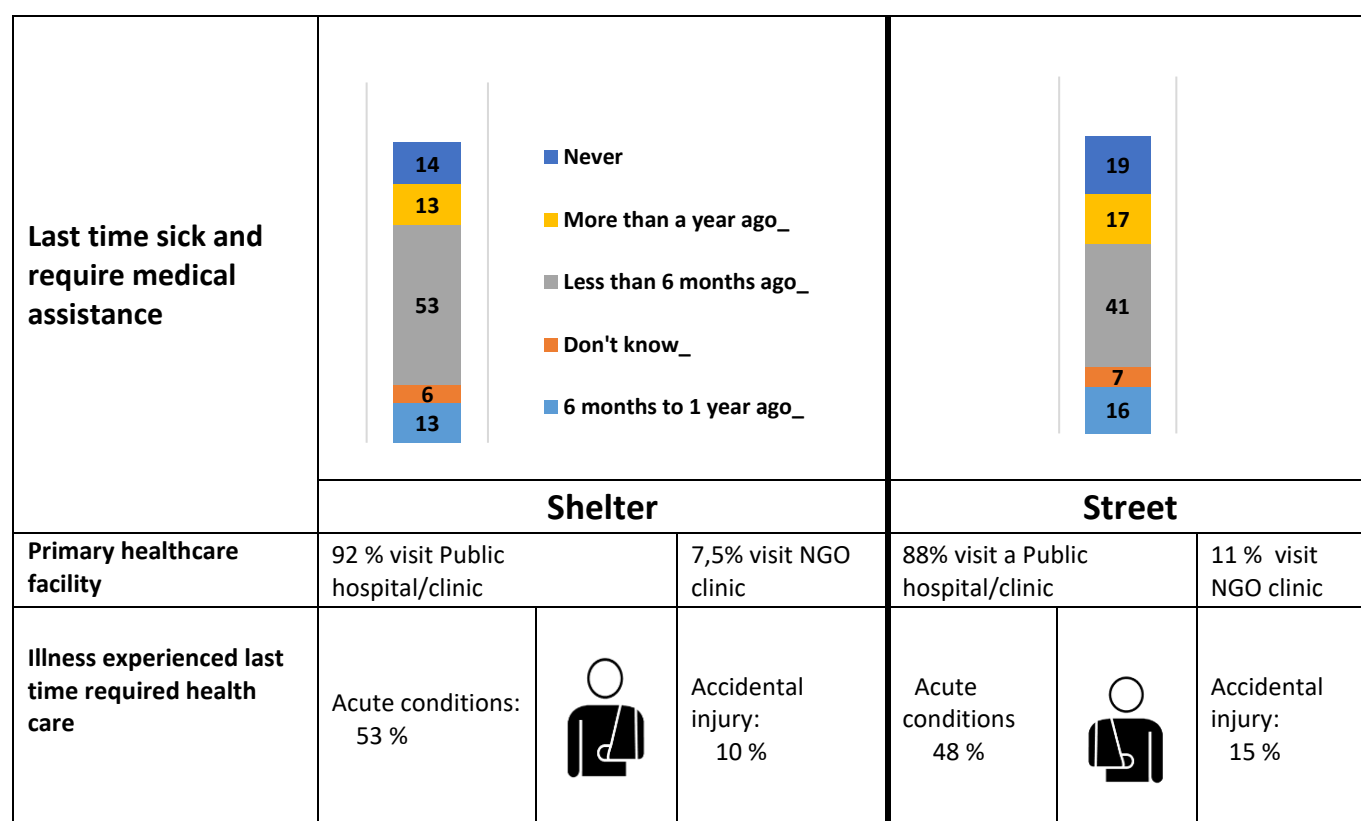


Figure 15

24. What was the reason you needed health care?

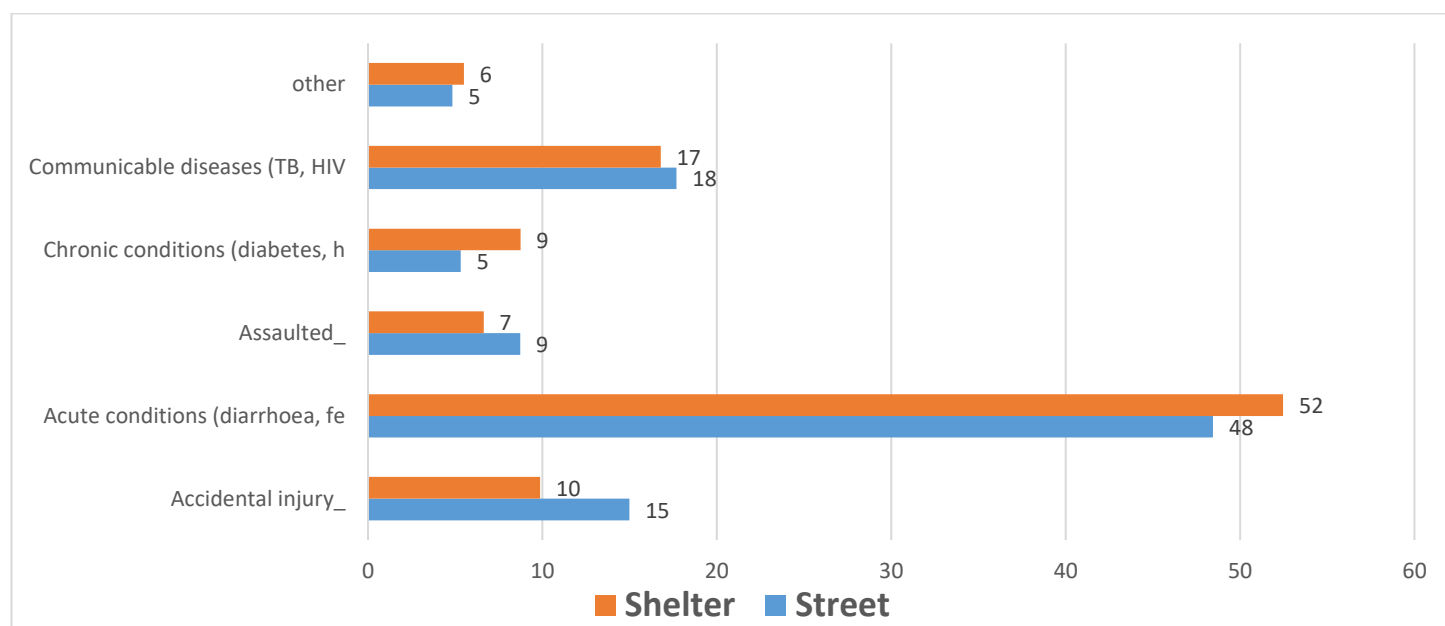


Figure 16

It should be noted that male respondents had reported a higher rate of having to seek medical assistance for Acute conditions (39%) such as (diarrhea, fever, flu) as well as communicable diseases (13%) were reported for these reasons. Testing for various illnesses was relatively high. Highest rates were noted for HIV (street-living: 79%, shelter living: 76%) and TB (street-living: 74%, shelter living: 48%).

25. Psychosocial wellbeing

Participants were asked on their mental wellbeing. The results suggest that 9% of the street-living participants and seven percent of shelter-living participants in shelters suffer from distress or anxiety.

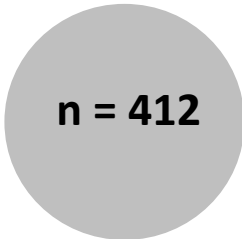
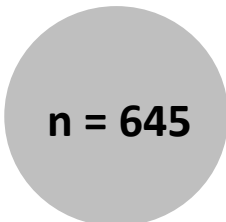
The results presented here are not unexpected, given various psychosocial challenges that the homeless face on daily basis. In the qualitative data, the mental wellbeing is perhaps replicated in the participants' narratives on hope and hopelessness. Accounts of hopelessness appeared to be more prevalent during the interviews than narratives of hope.

26. Movements home

Sixty-five percent of the street-living population have a place somewhere off the street that they refer to as home. A slighter higher proportion (69%) of the sheltered population also have another place they refer to as home. Of these people, most report visiting home, indicating visiting home often or when they have money to give to their families. Of those people that do have a place somewhere off the street that they refer to as home but do not go home/have not tried going

home. The key issues raised included an inability to return home because they don't have a relationship with their family/ community anymore and the lack of resources at home. Largely similar findings were noted across subgroups. These experiences of respondents living in Shelters (15%) and Street Living (17%) often felt too ashamed/remorseful to go home, which can damage family relations and, to some extent, continue their lives to being homeless.

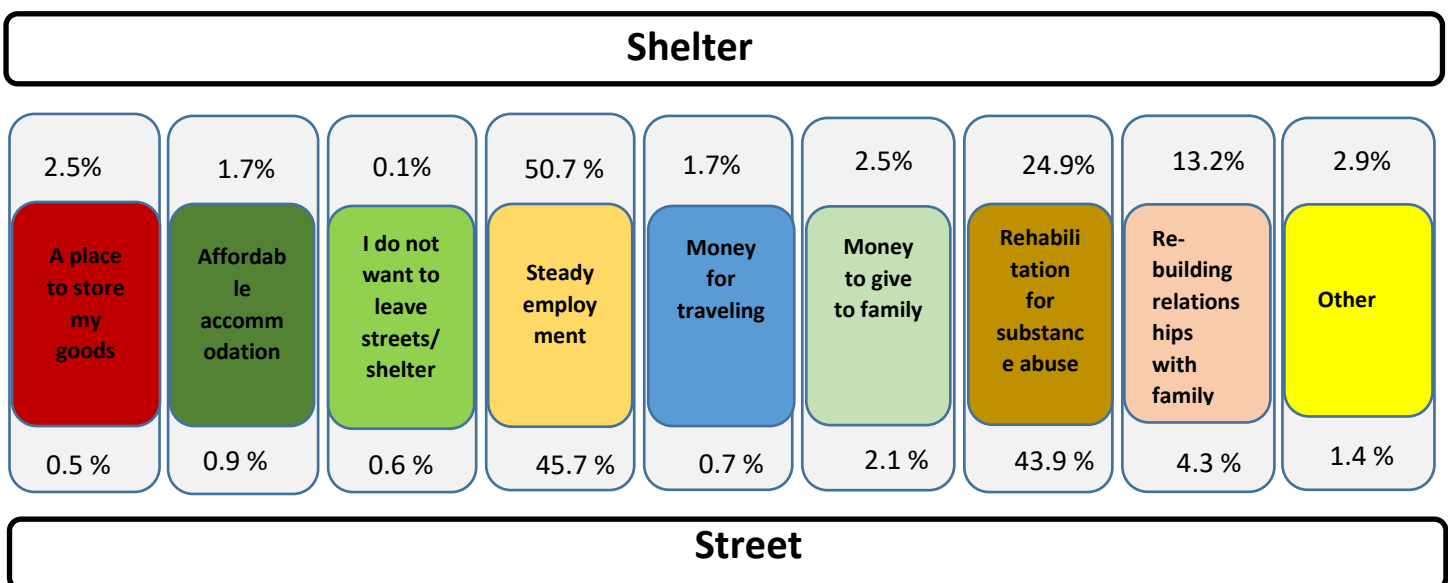
Figure 17 – Home Movements

Street-living persons			Shelter-living persons		
65%		Have a place somewhere else that they refer to as home	69%		Have a place somewhere else that they refer to as home
		<i>Of these people, 61% report going home/ having tried to go home</i>			<i>Of these people, 61% report going home/ having tried to go home</i>
Of those that visit home:					
64 % visit home often	8% Visit home only when they have money to give their family	11% have tried to go home, but don't have money for transport	66 %visit home often	9% Visit home only when they have money to give their family	16% have tried to go home, but don't have money for transport
Of those that do not visit home:					
11% Indicate that there aren't sufficient resources at home for them to go home	17% Want to return home, but don't have a relationship with their family/ community anymore	18% Do not want to visit home	18% Indicate that there aren't sufficient resources at home for them to go home	16% Want to return home, but don't have a relationship with their family/ community anymore	29% Do not want to visit home

Overcoming homelessness

People living on the street or in shelters were asked what they felt would help them overcome homelessness. Participants were able to give more than one response. By far the most common response was the need for steady employment. Respondents felt that if they were able to obtain employment they would be able to move off the street/out of the shelters. Money to give family and a plea for the rehabilitation of substance use were also mentioned more prominently in street participants.

Figure 18: Needs to get off the streets/out of shelters



Employment was cited as a major factor of individuals across the sub-group populations as an important reason that would enable them to get off the streets or shelters.

For those living on the streets 44% felt that rehabilitation for their substance use would help them transition out of homelessness and 13% of people living in shelters felt that re-building relationship with family members would be a pathway out of homelessness.

Sanchez (2010) separates between economic homelessness and chronic homelessness; whereby the former refers to those with qualifications and some work experience but lack employment, the latter refers to those with mental problems caused by living on the street, drug abuse and lack of esteem. The economic homeless could benefit from early intervention and hopefully be integrated back into society. Another conceptual difficulty lies in the true nature of the homeless

person, as not all people on the streets are actually homeless, as some beggars and day strollers live on the streets temporarily for street trading (Sanchez, 2010).

27. Prior access to services and current support service needs

In terms of support needs by street and shelter living persons, the greatest demand for both groups is for skills development and education support. Demand for other services such as support for improvement in their health and ID books is greater amongst the street-living population. 65 % of the street living population requiring assistance with these services compared to just over third of those in shelters that require assistance.

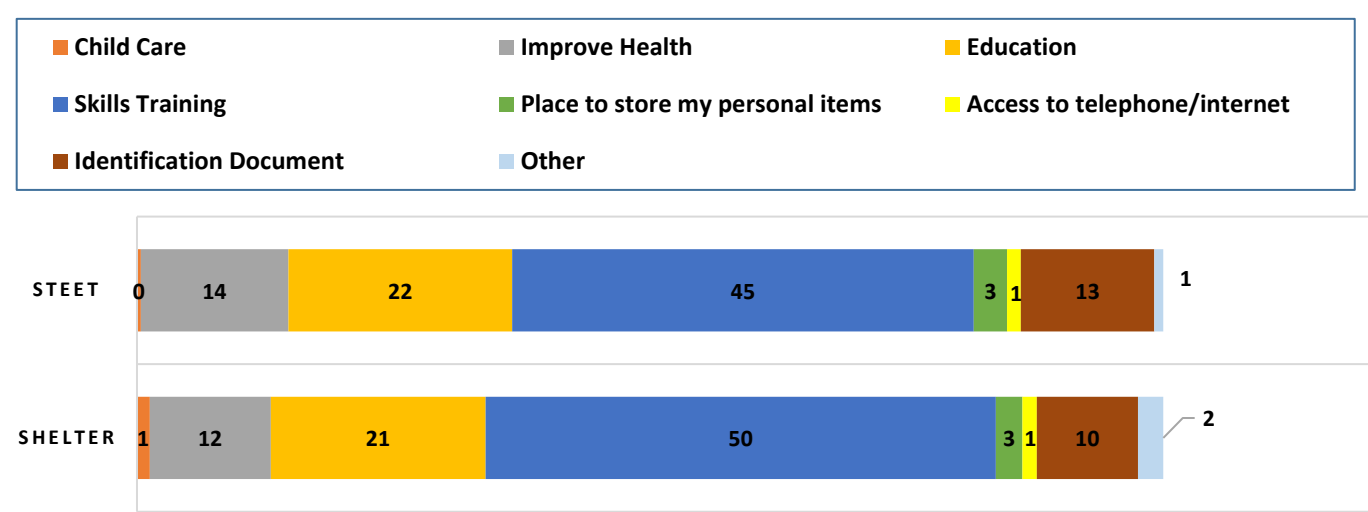


Figure 19

The need for capacity development opportunities for the homeless was also mentioned in the qualitative data. Specifically, requests were made for support to complete secondary school.

28. Improving employment

Unemployment is a major factor in the persistence of homelessness across the country. 29% of unsheltered adults and 38% of sheltered population cited unemployment or a financial reason as a primary reason why they are homeless.

Being unemployed while experiencing homelessness also makes it difficult to exit homelessness, and people experiencing homelessness face a range of barriers to employment.

The study findings were distinctive in the relation to their needs to gain better employment with many citing improved skills and education as a stepping stone to their exodus from the streets. Missing ID books was also mentioned by many as a hindrance to better employment.

29. Employment related skills

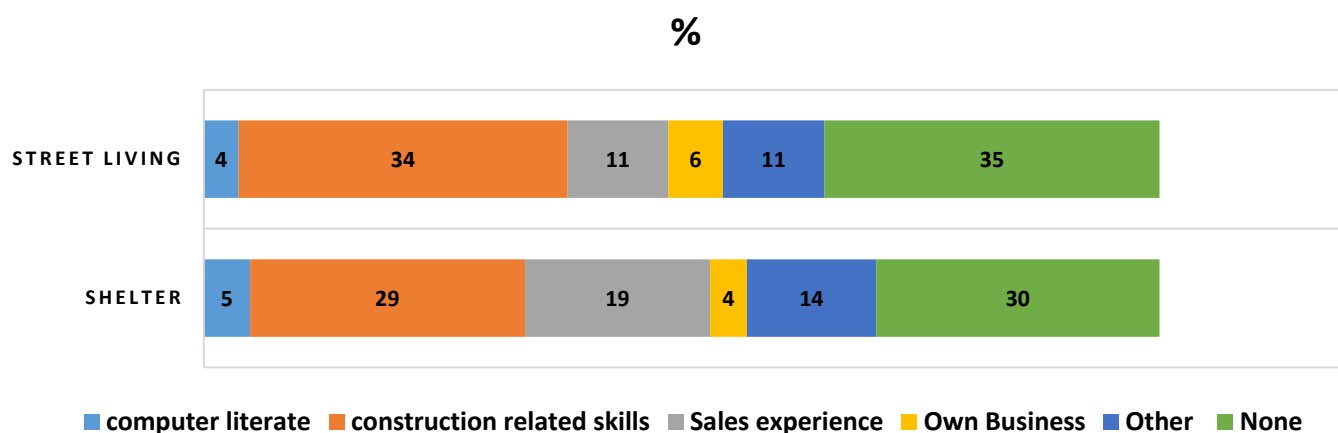
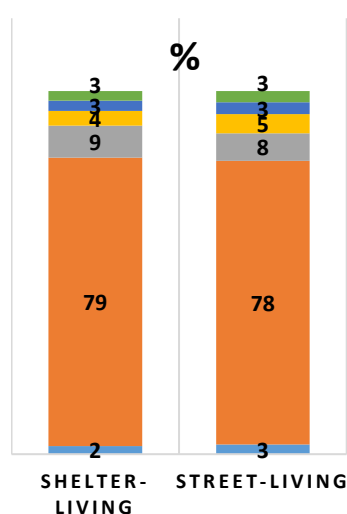


Figure 20

In order to better understand and unpack respondents' employment situation, survey questions asked what skills Street and Shelter respondents have. The most common skills reported were construction related skills (building, painting, welding etc.) 34% and 29% respectively. Some reports of computer literacy and experience in sales were also reported.

Shelter Living			Street Living		
33%		Worked for pay in the past 14 days	34 %		Worked for pay in the past 14 days

Average daily earnings



■ R1-49 ■ R50-99 ■ R100-149 ■ R150-199 ■ R200-249 ■ R250 and more

The earning level percentages of the street-living and that of the shelter-living population (see Figure 21) is almost the same. The largest proportion of street-living and Shelter living people that engage in activities for pay report earning between R50 and R99 per day worked followed by between two and three percent reporting earning less than R50. For the shelter population, 78% report earning R50 and R99 per day worked followed by 8% reporting earning between R100 and R149. The earnings between R200 and R249 per day was recorded number by the street population (41) was higher than the shelter population and a further 3% earning R250 or more a day.

Figure 21:

30. Nutrition

Most often, homeless individuals are preoccupied with where they're going to sleep and what they going to eat to sustain themselves. They often eat what they can, and what they can eat usually is not enough to fulfill their daily nutritional needs.

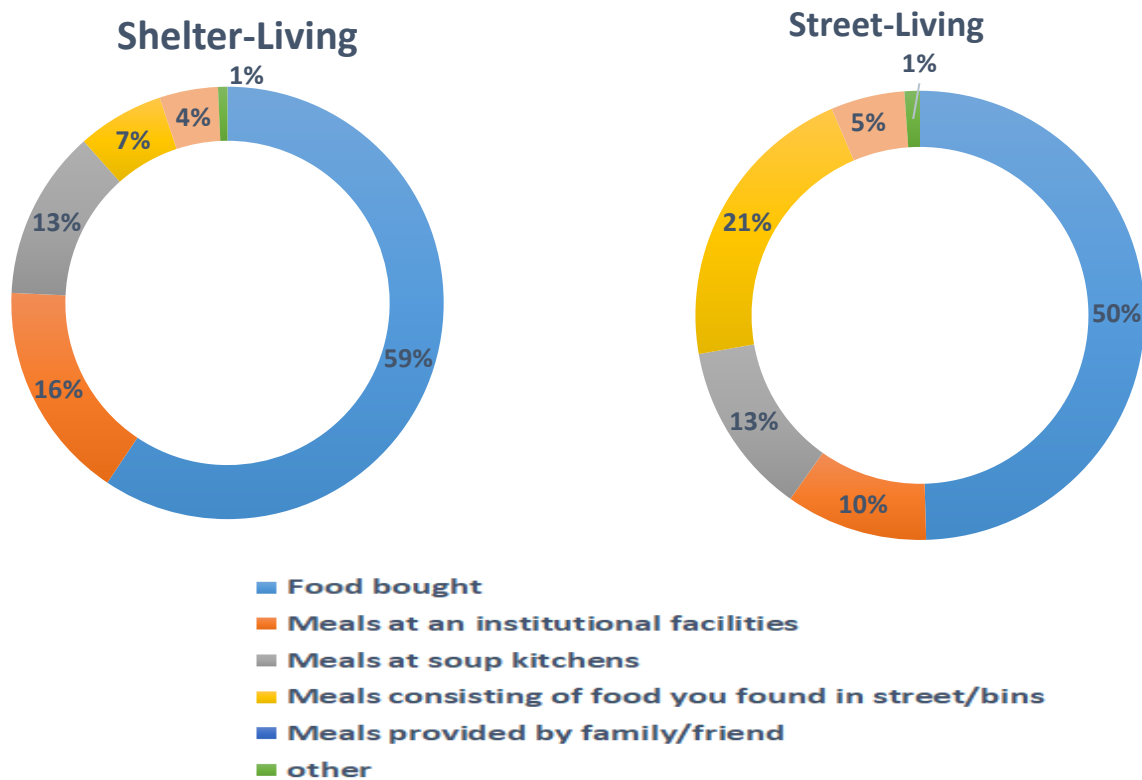


Figure 22

Within the disadvantaged population as the homeless community would seem particularly exposed to hunger. As the poorest of the poor, they are less likely to be able to afford food. Due to limited education, lack of finance, the homeless may be somewhat uninformed about nutritional matters, and a variety of personal problems (e.g., mental illness, substance abuse) could obstruct their efforts to get enough to eat.

The study shows that 59% of shelter respondents and half of the street respondents buy their own food (see figure 22) .Sixteen percent of the shelter respondents receive their meals at institutional facilities. 21% of the street living respondents meals are from the dustbins or street. Of the 1261 street respondents 157 receive their meals from soup kitchens.

31.Feedback sessions – Homeless workshop, feedback session

The eThekweni Municipality in collaboration with City People eThekweni hosted three workshops during June 2022 under the theme: “Road Towards eThekweni’s caring, integrated and insight-based homelessness policy” who visited seven shelters in the CBD. The purpose of the Workshop was to find ways to address Homelessness in the City of EThekweni. Reflecting on the existing Policies in the City and Introduction to the Psychosocial issues related to homelessness. These workshops were supported by Mr Jarrod Sanderson, subject matter expert whose visit was made possible by the Fulbright Scholarship Programme of the Government of the United States.

KEY DISCUSSIONS/ OUTCOMES

Background.

Action to address homelessness in the city started in 2013, the progress was slow until the advent of the covid 19 pandemic which forced the city into action. This was largely to comply to lockdown regulations and curb the spread of covid 19.

No direct funding received by the city to address homelessness; this made it difficult for the homeless community to receive the necessary resources which they required. City People eThekweni was established in 2019 as a special purpose vehicle which enabled the city to be more active in addressing homelessness. This would mean City People eThekweni can receive and channel funding towards undertaking social issues such as homelessness and being more effective in helping the homeless community.

Key issues:

- Working together and creating partnerships will be the key to find ways to deal with the issue of Homelessness. One of the ways as a starting point would be convincing the eThekweni Municipality Principals that Homelessness is the issue for all of us and all Municipal departments must take part in ending Homelessness.
- There should be public awareness on Homelessness, support shelters with everything they need, create employment opportunities for the people residing in the Shelters and provide targeted services such as Health and Social services.
- The issue of Homelessness is not only about Shelters but consists of other issues as well that need to be tackled. DBSA is one of the banks that is willing to support the initiative to end Homelessness in eThekweni.

32. Technical Debrief Workshop

Several goals were highlighted

- Homelessness Survey results
- Assessing how research insights can be applied to future programs and policies.
- Reflecting on the efficacy of current homelessness-reduction strategies.
- Introducing and integrating caring approaches to the City's approach to homelessness.

Highlights of the Homelessness Workshop

A task team needs to be established for various roles in the Homelessness Programme.

- Formulate the governance framework of the Policy.
- Have right conversations for Policy. Inclusion of the Private Sector.
- Institutionalise homelessness.
- Establish Innovation and design solutions.
- Role clarification.
- Create Homelessness programme
- Integrate successful interventions into the programme.
- Bring EMA to the next engagements.
- Address who accounts when it comes to the financial support.
- Monitor interventions around the implementation.
- Create a detailed database of people with qualifications or that have been trained.
- Have a plan on how to engage businesspeople on homelessness.
- Address the needs and not individual needs but all needs related to homelessness.
- Policy formulation and Policy implementation to be separated.
- Get a framework of the Policy before drafting it.
- Ensure to have an implementation Plan.

Identified Issues around Homelessness

Rehabilitation, job creation, rehabilitation centers, innovation around job creation, psychosocial mental issues, no deliberate and dedicated support, Department of Social Development participating at a lower level, emerging policies that might assist at National Level (Spatial Needs Housing Policy, matters address by Civil Society through NPOs), gaps in data, lack of governance around the issue of homelessness and no continuous engagements. Absence of all of government (make It an intergovernmental programme and include all three spheres of government)

Key Outcomes

- **Inclusivity (shared experiences, togetherness, promoting equity and equality).**

Inclusivity offers opportunities to participate with the community and form positive relationships. This would integrate people with lived experience of homelessness and provide support as role models and resources. This creates a sense of belonging for both the individual providing the service and those receiving the support.
- **Pledges (Commitments, mutual trust)**

Support and Pledge to end homelessness, committed to working towards ending homelessness by promoting actions that will end homelessness. Advocate for change and enlist the support of the municipality to join this important effort. Support each person to develop new skills, enabling them to manage their own lives, increasing their self-esteem, skill-base and wellbeing.
- **Partnerships (internal and external)**

This effectively using partnerships to serve the homelessness community and how other service providers can be encouraged to build relationships and start programs to assist the underprivileged. Supporting the well-being of the homeless community or their families who experience or are at-risk of experiencing homelessness is critical to meeting families' and/or individuals' immediate needs and as well as providing long-term educational outcomes for children in the homeless community. An important role in ending incidences of homelessness is through community coordination, collaboration, and long-term partnerships. These partnerships look different depending on the needs of the community or families.
- **Policy (Meaningful and Purposeful)**

The implementation of a homelessness policy that will support a more effective and innovative future is essential. The policy responses to better understand their intervention approach, short and long term goals, target groups and level of

success. There should be a need for homelessness policy-sharing practice that warrants supported development across governments as well as local government.

- Team members to ensure that the pleasures are met
- Bear in mind that there are still people that want to be in the street and that we cannot help everyone.
- Mobilise the Businesspeople to assist (Private and Public Business entities)

The study by Sanchez (2010) found that it is mostly faith-based organisations in Johannesburg and Pretoria which render a variety of services to the homeless, including providing shelter, assistance in finding jobs, food, health care and counselling. Sanchez (2010) further indicates that these organisations have a good understanding of the complexity of being homeless and their services are regarded as very valuable; however, these organisations do not offer sustainable structural solutions which provide opportunities to exit conditions of poverty and homelessness (Richter et al., 2012). In order to address homelessness there should be a move towards multifaceted, multidisciplinary, long-term structural changes (Richter et al., 2012; Sanchez, 2010). The UNCHS (2000) confirms the complexity of addressing homelessness and proposes holistic, policy-driven processes.

Identified Key Deliverables

- Skills development Programme
- Resource Mobilisation
- Psychosocial Support
- Care Portal
- Shelter Provision
- Economic empowerment
- Public awareness on feeding scheme
- Central database of homelessness people
- Rehabilitation (Partnerships)
- Point in time spin offs
- Online dashboard visualisations

Key recommendations

- Homelessness strategy

The vision of 'Ending Homelessness' echoes a continued need for the eThekweni to work across the various sector to address the varied and complex factors that lead to homelessness, many of which also extend beyond the provision of accommodation.
- Clear roles and responsibilities – strategic

COVID-19 brought to light many existing weaknesses of homelessness facilities, including the facts that even individuals living in shelters are often forced to live in confined spaces, sanitation facilities and hygiene materials are too often scarce, access to health care is very limited. With these kind of situations, it is essential for local government provide them with necessary services.
- Public/ private partnership

No anybody can prevent and end homelessness: it takes the devotion and commitment from Public/private partnerships across all sectors coming together with common goals. The power of public-private partnerships and its effects on preventing and ending homelessness and promoting this model of collaboration is a priority.
- Financial implication Continuity

Homelessness has severe adverse impacts, not just for the people who are homeless, but for cities where it occurs. In addition to the personal and human costs of homelessness, there are often economic costs to providing services, from emergency healthcare to outreach and law enforcement.
- M&E Longitudinal study

Monitoring Evaluation is carried out to ensure that a project remains on track and to guide continuous improvement. In this case, this evaluation provides the opportunity to look at the project asking questions such as how can we make a difference to this project to make a difference in the lives of the homeless community?
- Policy development

Working with national and local partners to engage them in policy activities that work toward the collective goal to end homelessness. Supporting unbiased approaches that cross ideologies and building upon the common commitment to a solution. Supporting approaches that work, based on research and practical knowledge from the field.

- Implementation Plan

The plan provides direction for elected officials as they make decisions about where to dedicate resources and offers a way to measure progress and success. Whether the plan is for a short or a longer period, it is likely to involve multiple individual actions or strategies that may or may not be related. This would include a series of questions the city should explore when deciding what strategies to include in its plan and a template to outline individual strategies.

- Advocacy Plan

Not only is advocacy an important part of a shared effort to stop and end homelessness, it also signifies an important part of the work to accomplish those goals. The overall goal of the advocacy intervention is to help those who are homeless improve their life situations by stabilising living conditions and promoting independence and skill sets and for these improvements to last.

- Monitoring and Evaluation Plan

Monitoring and Evaluation Strategy is the framework for measuring the effectiveness of homelessness system in meeting the needs of users. This strategy will inform ongoing improvements to the homelessness community, to ensure best practice and high-quality services will help end the cycle of homelessness.

Way Forward

- Ensure that the Homelessness Technical Team has documented the process via a report which will be used as a guide to monitor and evaluate progress.
- Establish a Task team for drafting the Policy for the Homelessness.
- In order to ensure that all shelters are represented there should be database of small shelters as well.
- Ensure that there are clear roles and responsibilities and clear timeframes
- Set out Timeframes with milestones for each Activity to be undertaken to guide us.
- Set out clear roles and responsibilities.
- There should be accountability to all involved stakeholders

From now onwards, the Homelessness will be reported to the DDM Hub Meetings because it also an integral part of what the DDM is trying to achieve.

33. Conclusion

Based on results of the study, it is reasonable to determine that homelessness among the respondents is largely fueled by socio-economic factors, whether from unemployment, loss of previous jobs or failure to find first employment due of lack of relevant qualifications. Family problems as well as individual characteristics make it difficult for some people to stick to family life and this also thrust people into homelessness.

There is a correlation with homelessness with physical and emotional distress as the majority of the participants indicated. Evidence has shown that respondents also consider their health needs just like any other person, even though their circumstances may sometimes give the impression that they are careless with their health.

The findings of this study also highlight the encounters of people who abuse substances and pay for their addiction through criminal activity. There are some individuals who have skills who could be employable if they tried but choose to consume alcohol and spend their days on park benches. There many young people who had come into the city in search of work. In defiance these stereotype of laziness, these respondents are desperate for employment but are unable to make a contribution or support themselves and their families and some are embarrassed to go home to their families due to lack of finances.

The study further highlights the important role the homeless shelters play in providing accommodation and safety to the homeless.

We hope that the results from this study will inform evidence based decision making as a key indicator as a significant response to the city's homeless community in improving their quality of life.

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