

Towards the development of a contextualised homelessness policy: A Durban case study

Summary

People living on the streets and in shelters in Durban and other major South African cities face numerous challenges. The eThekweni Municipality currently does not have a comprehensive policy to prevent and mitigate homelessness in the city. Instead, the city has programmatic responses to subgroups of this population. In this policy brief, we reflect on policies implemented in other South African cities and draw on insights from a recent study on homelessness in Durban that was funded by the municipality. In light of these findings, we highlight how information on the local context, together with policies of other cities, could feed into a policy-making process in Durban. Finally, we make recommendations on how such a process could operate.

Introduction

Urban homelessness is a global phenomenon. It has been estimated that there are around 100 million homeless persons worldwide and roughly 200 000 in South Africa (City of Cape Town 2013). The numbers provide an indication of the scale of the problem, but they

mask the high levels of variation in the nature of homelessness. For example, there are those who experience 'primary' homelessness (rooflessness), others who face 'secondary' homelessness (temporary or shelter living) and others still who are best thought of as experiencing tertiary homelessness (people who are at risk of becoming homeless) (Tipple & Speak 2005). Moreover, homelessness can be episodic or chronic (Lee et al. 2010).

Differences occur not only in how homelessness is experienced, but also in the pathways to homelessness and the consequences of living homeless. There is no single pathway to homelessness. Different combinations of issues shape a variety of pathways. These often include combinations of interpersonal violence and abuse, personal and filial substance abuse, prior experiences of living on the street, mental health issues, extreme poverty, joblessness and family violence (Cross & Seager 2010; Lehman et al. 2007). Of the possible consequences reported by the homeless, police violence and victimisation, discrimination and marginalisation, unsafe and unhygienic living environments (including shelters), and inadequate access to services are

among those most often mentioned – again, in different combinations (Desmond et al. 2016).

Homeless people are among the most destitute members of society. To begin to support this population requires understanding the varied pathways to homelessness, the different types of homelessness and the different consequences of homelessness. Without such an understanding, there is a risk that policy-makers will default to generic policy interventions which may work for a few but are inappropriate for many others.

Policies need to be evidence based and contextually sensitive to the diverse needs of the homeless. In this policy brief, we focus on a case study of the eThekweni Municipality and ask how a recently completed study on the homeless population can assist in developing policy.

Context

There is currently no national policy to address homelessness in South Africa. A number of municipalities have developed their own policies to respond to the needs of this population. In 2013, both the City of Tshwane and the City of Cape Town adopted policies to address adult homelessness in their respective areas.¹ In Tshwane, the homelessness policy is currently being revised to respond to more recent data on homelessness in the municipality. In both cities, these policies have been shaped by commitments outlined in the Constitution of South Africa (1996), the Social Assistance Act (1992), the Mental Health Act (2002) and the Skills Development Act (1998). Homelessness is mentioned in the 2016/2017 Integrated Development Plan (IDP) for the Cape Town Municipality, with a commitment to ‘increase

¹ See the *Tshwane homelessness policy* (2013) and Cape Town’s *Street people policy* (2013).

efforts to ensure social reintegration and a more direct social workers’ approach to the needs of this group’. Coverage in the IDPs of other main metropolitan municipalities is limited. In the 2012/13–2016/17 eThekweni IDP, ‘shelters for the homeless/orphanages’ are only identified as a community need in Ward 11. The 2011–2016 Tshwane IDP mentions the need for homeless shelters and attributes responsibility to the Department of Housing and Sustainable Human Settlements.

Policy-makers have also considered local bylaws and the strategic priorities of the municipalities. The policies of both Tshwane and Cape Town contain a range of strategies to address homelessness, including (i) the provision of sustainable, safe, hygienic and non-discriminatory access to temporary and longer-term accommodation, (ii) employment and skills development opportunities, (iii) ongoing advocacy and awareness campaigns and programmes, and (iv) reintegration. In Durban, bylaws tend to be punitive by criminalising sleeping and begging on the streets.

Although the City of Johannesburg currently does not have an adult homelessness policy, it has adopted the Department of Social Development’s *Strategy and guidelines for children living and working in the streets* (2010). Similar to the aforementioned policies, this strategy emphasises holistic services for homeless children that are easily accessible and facilitate entrepreneurial opportunities and family reunification.

The eThekweni Municipality does not yet have a policy. It has rather favoured a regulatory and programmatic response. The city implemented strict bylaws related to homelessness and established programmes addressing substance use by homeless people and supporting community-based organisations providing services to street children and temporary accommodation for

some street traders, to mention a few. There is, however, growing interest within the municipality and among other stakeholders in the city to develop a coordinated and comprehensive response to homelessness. To do so requires an understanding of the causes and consequences of homelessness in Durban, as this will assist in ensuring the policy covers all the relevant areas and prioritises the most urgent aspects.

Homelessness in Central Durban

The eThekweni Municipality recently funded a mixed-methods study on homelessness in the central business district and immediate surrounds (Desmond et al. 2016). The study, which was conducted in February 2016, was aimed at providing as accurate a picture as possible of the nature and scale of homelessness in the area. Designed as a multiphase collaborative study, homeless individuals, local government and community-based organisations working with the homeless were included in the study processes. This was done to strengthen relationships, draw on the wealth of community expertise, and facilitate engagement in the decision-making process in order to foster project ownership and promote long-term commitment.

The census results suggest that close to 4 000 people are living on the streets or in the formal shelters of Durban. The population is evenly distributed between these two spaces. People tend to spend all nights in unsheltered locations or in shelters. Only a small proportion (15%) moves between the two locations and very few have spent at least one day per week at home (1%).

People living on the street or in shelters in Durban are mostly originally from somewhere in KwaZulu-Natal (71%), and very often from Durban itself. This is contrary to the widely held belief that Durban is a haven for the homeless

from elsewhere in the country. Unsurprisingly, Durban's homeless population primarily comprises men (83%). Twenty five per cent of the population is younger than 25 years, 59% are between 25 and 44 years, and 16% are older than 44 years.

On becoming homeless

Indicative of the heterogeneity of the homeless community, a range of pathways to homelessness were reported. These included (in order of prevalence) seeking employment in the city, family trauma (including family disagreements and death of a close family member), individual substance abuse and lack of an alternative place to go. Reasons for ending up on the street differ by subgroup. For both children and those who reported that they engage in hard drug² use, the key pathways to homelessness were family disagreement and substance abuse.

Experiences of homelessness: Employment

Just over half of the people living on the street and in shelters (53%) had worked

2 Hard drugs excluding cannabis and alcohol.

at least one day for pay in the week preceding the census. Small-scale jobs (such as car guarding and gardening, begging and hustling) were the primary sources of income. The most common employment-related skills of this population were construction-related skills (36%) and sales experience (12%).

Experiences of homelessness: Violence

Living on the street or in a shelter exposes people to different types of violence. Those living on the street reported experiencing high rates of intimidation/violence from the police (68%), followed by intimidation/violence from other people living on the street (37%). Low levels of intimidation/violence from business, service providers and local residents were experienced. The shelter population experienced lower levels of intimidation/violence from the police (31%), but similar levels of intimidation/violence from other street/shelter people (32%).

Experiences of homelessness: Mental health

A quarter of the population experienced severe mental distress.³

3 Assessed using the Kessler Psychological Distress Scale.

This is unsurprising given the numerous psychosocial challenges the homeless face daily. In the qualitative data, mental wellbeing was reflected in the participants' narratives on hope/hopelessness, dignity and belonging.

Experiences of homelessness: Substance use

In addition to being one of the pathways to homelessness, substance use is seen as a coping mechanism and in some cases a factor that perpetuates homelessness. Self-reports of drug use indicate that over half of Durban's homeless population engaged in frequent drug use (daily or every second day). Most used cannabis and only slightly over a quarter consumed other substances. Alcohol use was reported by 35% of the population, with 20% reporting frequent use. The highest rates of substance use were noted for children (66%) and for those originating from eThekweni (65%).

Experiences of homelessness: Access to basic necessities

People who live on the street primarily used public facilities for bathing/ablution and washing of clothing. Public toilets in Durban are only open during office

Table 1: Pathways to homelessness by subgroups of the population

	Engaged daily in activities for pay	Originate from eThekweni	Foreign migrants	Unemployed frequent hard drug users	Females	Children
1	Seeking employment 42%	Family disagreement 27%	Seeking employment 66%	Family disagreement 23%	Seeking employment 30%	Family disagreement 29%
2	Family disagreement 19%	Seeking employment 20%	Nowhere else to go 12%	Substance abuse 22%	Family disagreement 23%	Substance abuse 12%
3	Nowhere else to go 10%	Substance abuse 13%	Refugee 5%	Seeking employment 18%	Nowhere else to go 15%	Abused at home 12%
4	Family death 8%	Family death 11%	Family disagreement 5%	Nowhere else to go 9%	Family death 8%	Nowhere else to go 12%
5	Substance abuse 6%	Nowhere else to go 11%	Family death 2%	Family death 9%	Substance abuse 4%	Want to live on the street 11%

Figure 1: Experiences of violence/intimidation

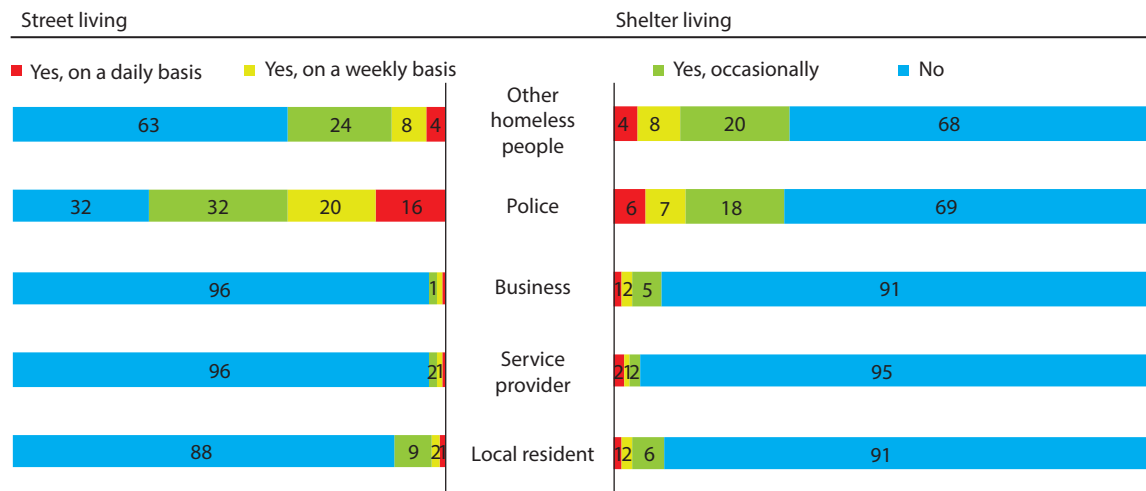
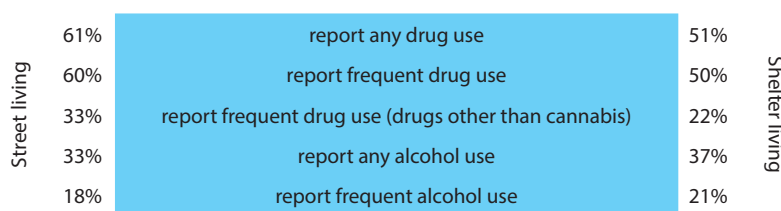


Figure 2: Substance use



hours, which posed a challenge for many people living on the street. Most people purchased their meals (62%), with a portion reporting accessing food at soup kitchens (28%). Personal items such as clothes, underwear, hygiene products and soap were either purchased (54%) or obtained via donations (28%).

Overcoming homelessness

The homeless identified employment as a key factor to overcoming homelessness. Similarly, skills development and employment support were the primary support services demanded. There was also high demand for other services, including support for rehabilitation, support for reunification/reintegration, psychosocial support and assistance in obtaining/replacing lost ID books.

Discussion

Homelessness and the experiences of living on the street and in shelters are

not standard across contexts. No single intervention or existing policy from another city can be adopted in Durban. Consideration must be given to (i) the size and make-up of the population of Durban, (ii) the nature and prevalence of experiences of those living on the streets and in the shelters of Durban, and (iii) environmental factors that encourage or deter homelessness.

Expanding access to shelters will mitigate the challenges for some people living on the street, but it is only one element of a comprehensive response. There are no free shelters for the homeless in Durban and the majority are run for profit – a glaring difference from other cities in South Africa. Improving access will require either improving the income of those living on the street or subsidising private businesses to assist. Subsidising shelters could be combined with efforts to improve conditions, but it should be kept in mind that currently some of the best shelters in terms of quality and management are empty

most nights. This is in part because they are more expensive, but also because they regulate access times and drug use – rules unacceptable to many. A comprehensive assessment of shelters, the needs of those living in shelters, and associated legislation such as housing and hospitality laws should be conducted before any policies are adopted.

The challenges for existing programmatic responses to homelessness currently undertaken by the eThekweni Municipality no doubt have to be addressed in a comprehensive policy. However, the research results confirm the importance of expanding the response. In addition to substance use, pathways associated with job search and family breakdown came through very strongly and require specialised responses. Although street children are a particularly vulnerable group, the high levels of violence experienced by those living on the street suggest that others are also at

risk of harm. Moreover, vulnerabilities associated with poor mental health are widespread.

Recommendations

Given the contextual scope of this policy review, we provide policy recommendations for the city of Durban. In developing a comprehensive policy that is contextually sensitive, the following must be considered:

1. In Tshwane, Cape Town and Johannesburg, homelessness policies have been developed within a common national context and they cover largely similar themes. Durban and other cities looking to develop policy responses should conduct in-depth analysis of current and draft policies.
2. A policy for Durban should be tailored to the needs of the local population and local environmental conditions, and take into consideration any gaps in existing policies.
3. Durban needs a homelessness policy that moves beyond current programmatic responses that exclude some groups of people living on the street or in shelters. Critically, it needs to consider expressly the situation created by the absence of publically funded shelters and consider the possibility of changing this.
4. The process of policy making should include inputs from local stakeholders such as the police, community-based organisations, municipal representatives, academia, and communities living on the street and in shelters.
5. Any efforts to develop policy or intervention responses require strong leadership and effective coordination in order to materialise – a requirement both for civil society and government (provincial and municipal).

6. Durban's homeless policy should be aimed at increasing the capacity of social service providers to accurately identify the service needs of homeless individuals and interventions that best serve different homeless groupings (e.g. drug users and job seekers).
7. Stakeholders working with homeless individuals should ensure that evidence-based psychosocial interventions accompany assistance for the homeless.
8. Based on our research findings, a homelessness policy for Durban should prioritise responses not only to support individuals who are currently homeless, but also to interrupt the pathways to homelessness. The policy should prioritise employment and skills development support for the homeless, psychosocial interventions for those who are victims of violence and/or suffer mental distress, formal support for those with substance abuse problems, and family and community reintegration strategies. These support initiatives should be implemented using a non-discriminatory framework that will prevent the re-victimisation of this vulnerable population.

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