“An exploratory study of the perceptions and experiences of homeless persons regarding service provision by Khulisa Solutions, a Non-Governmental Organisation in the Western Cape”.

MINI-DISSERTATION

By

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Compulsory Declaration

This work has not been submitted previously, in whole or in part, for the award of any degree. It is my own work. Each significant contribution to and quotation in, this dissertation from the work of works of other people has been attributed, and has been cited and referenced.

Signed

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ABSTRACT

This study explored the perceptions and experiences of homeless people regarding welfare service provision by Khulisa Solutions, an NGO that provides services to homeless people in the Western Cape. To this end, using primarily a social development perspective, the study focused on five objectives: assessing the available services for homeless people related to shelter, food, employment and health services in general; exploring the perceptions and experiences of homeless persons in accessing welfare services at Khulisa; identifying the strengths and weaknesses of available services for the homeless as provided by Khulisa; examining if homeless people were aware of the services available to them, and assessing the overall challenges in service provision for the homeless.

An exploratory qualitative methodology was used through the administration of 15 in depth face to face interviews using a semi-structured interview schedule. Purposive non-probability sampling selection was implemented focusing on homeless beneficiaries of Khulisa services and the Carpenters Shop an affiliate service provider to Khulisa. The findings of the study revealed that food services were the most accessible and reliable services to the homeless providing both stability and routine. Shelter services provided a physical and psychological haven as well as opportunities for employment and self-development. The access to shelter benefits was however, limited as the majority of participants found shelter services too expensive or that the shelters were structured to perpetuate the exclusion of homeless families. Participants showed extensive knowledge about where to access health care services which however did not translate into the frequent use of such services. Employment services were criticised for only providing temporary employment and not providing opportunities for skills development. Khulisa Solutions was highly commended for providing long term employment as well as involving beneficiaries in the growth of projects. Beneficiaries indicated a need for a similar emphasis and input on shelter service provision by Khulisa which was not their main focus of service delivery. Recommendations are made based on the findings of the study which are inclusive of solutions proposed by the participants.
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LIST OF ACRONYMS

CCID  Central City Improvement District

CCT   City of Cape Town

EPWP  Expanded Public Works Programme

HSRC  Human Science Research Council

IDP   Integrated Development Plan

NGO   Non- governmental organization

NHCHC National Health Care Homeless Council

SPP   Street People Policy

UN    United Nations
CHAPTER ONE

INTRODUCTION

Against a backdrop of a history of political and social exclusion and a present economic downturn, marked by unemployment for many, homelessness is an ineludible issue in South Africa (Roets, Botha, Greef, Hunman, Strydom, Chigeza, & Chigeza, 2016:614; Cross, Seager, Erasmus, Ward, & O'Donovon, 2015:41; Makiwane, Tsamasane & Schneider, 2010:40). Under these parlous conditions, government is a principal guardian for upholding a culture of human rights, and with the help of other stakeholders, is obligated to ensure the physical and social well-being of its citizens, especially vulnerable groups like the homeless. Non-Governmental Organisations (NGOs) are important stakeholders who, in partnership with government provide services in response to identified social needs. Khulisa, is one such organisation whose mandate is to provide solutions to an array of social problems faced, by vulnerable South Africans. One of its main areas of intervention is service provision to the homeless.

Homeless people face many challenges including poor health, violence, discrimination, crime, and social exclusion (Altena, Brilleslijper-Kater & Wolf, 2010:636; Sanchez, 2010:105). Literature on the homeless uncovers a myriad of programs, projects and research implemented in a bid to reduce and eliminate homelessness. However, a lot of this literature is based on theory and policy driven mandates and seldom provides information on the experiences of homeless persons (Naidoo, 2010:37). As a means to assess the impact of services to the homeless this research, through a qualitative exploratory study involving 15 homeless participants, investigated the perceptions and experiences of the homeless people concerning general service provision around shelter, food security, employment and health services. Qualitative exploratory research is used as the lens of the study because it captures the rich detail of experiences and exposes the researcher to the thoughts, beliefs and emotions of participants, which are integral to the research. The research was linked to the UCT knowledge co-op program and was conducted in conjunction with Khulisa, whose service provision to the homeless was the primary focus of the research within the framework of the larger context of service provision to homeless people in general.
This chapter provides a contextual understanding of the issue of homelessness and service provision as well as the rationale of the study. A clarification of key concepts is given followed by the methodological research process that is outlined. Further, elaboration of the ethical considerations and limitations of the study are specified.

1.1 Problem context and problem statement

In 2005, an estimated 1 billion people globally had inadequate housing; of these persons 100 million were homeless (United Nations [UN], 2001). In a research study conducted by the City of Cape Town (CCT) in 2015, it was found that 7,843 homeless people lived in the city (CCT, 2015). Out of the above total, 4,862 of these homeless people were living and sleeping on the street and only 2,521 were living in shelters (CCT, 2015). This study further found that, 63% of those sleeping on the streets slept in open spaces such as pavements and car parks in contrast to the common perception that homeless people sleep under bridges ‘which are assumed to be’ secluded areas.

The lack of shelter as a principle aspect of homelessness is a by-product of varying types of poverty such as poor health, poor education, unemployment, lack of food and social exclusion (du Toit, 2010:3). In order to deliver effective and sustainable programs and projects to eliminate homelessness, holistic solutions that focus on the aforementioned challenges are required.

The CCT research findings highlight the urgent need to priorities the issue of homelessness as well as to provide adequate shelter for homeless persons. The South African government’s mandate with the help of non-state agencies is to provide effective and efficient services to its people according to the Batho Pele principles which emphasise consultation with the beneficiaries of services (Department of Public Service and Administration, 2014). This research shed light on the effectiveness of services provided to the homeless and also provides information that can guide such consultation.

1.2 Description of Khulisa Solutions

Khulisa Solutions (Khulisa) is an NGO that focuses on dealing with an array of social problems including those experienced by the homeless. Established in 1997, Khulisa seeks to create a nexus
between investment and experiences of various stakeholders in order to “leverage their resources and creativity to solve complex social issues faced by South Africans” (Khulisa, 2015). Khulisa’s vision is to “ultimately have a safer, healthier, more prosperous and restored South Africa, where people, have access to the information, skills and opportunities they can use to contribute to equitable local and national development” and evade involvement in crime (Khulisa, 2015).

Khulisa, envisages to achieve their vision through the implementation of their mission which is “to address social vulnerabilities and inequalities by providing restorative processes and capacity building through key partnerships for initiatives at a community level that quantifiably demonstrate social impact” (Khulisa, 2015). To ensure the effective implementation of programs and initiatives Khulisa’s work is based on the systematic approach that focuses on five steps of intervention. The first step of the systematic approach is to focus on the system that contains the problem, secondly, activate partners, thirdly enable and grow on the ground capacity, fourthly, facilitate interventions and lastly evaluate constantly and correctly. This research focuses on the first and fifth step of Khulisa’s systematic approach as they highlight the insufficiencies that exist in the areas of homelessness. The research centers on Khulisa’s streetscape program which provides personal development programmes and employment opportunities for homeless persons.

1.3 Rationale of the study

Limited research has been done on the experiences and perceptions of homeless persons regarding the services rendered to them (Seager & Tamasane, 2010:63; Stanhope & Dunn, 2011:275; Mcbride, 2012:51; Tyler, Akinyemi & Kort-Butler, 2012:1344). Mcbride (2012:50) and Cross et al. (2015:4) emphasise the need for research on the homeless population by highlighting that the homeless many a time are inadequately served and are under researched which results in the limited knowledge of their needs.

The problem of homelessness is an important area of study especially in a country like South Africa, in which many people were dispossessed from their rural homes to the city to make a living (Naidoo, 2010:130). For this reason, service provision is mandatory for redressing historical, social, political and economic disenfranchisement. Barrow et al. (2007:3-5) states that the inclusion
of homeless experiences in decision making can lead to enhanced determination on the part of the homeless in improving their lives. Moreover, it may increase the quality and the satisfaction of the services provided to them. The authors add that the inclusion of experiences in decision making and planning is a form of empowerment for the homeless.

Plewis in Stanhope and Dunn (2011:275) supports this notion by affirming that the making of policies should be supported by research evidence and their implementation should be subject to thorough evaluation in order to effectively inform policy making procedures. This research study aligned to these aims of empowering homeless persons and in this respect explored the experiences of homeless persons regarding the service delivery challenges that they face. Khulisa and other organisations providing services to homeless persons may use the findings of the research to assess, develop and align their services to the needs of the homeless. Furthermore, they can make recommendations to other stakeholders with whom they engage.

1.4 Research Topic

“An exploratory study of the perceptions and experiences of homeless persons regarding service provision by Khulisa Solutions, a Non-Governmental Organisation in the Western Cape”.

1.5 Main research questions

1. What are the perceptions and experiences of homeless persons in accessing welfare services related to shelter, food, employment and health services?
2. What are the strengths and weakness of available services for the homeless related to shelter, food, employment and health services?
3. What are the perceptions and experiences of homeless persons in accessing welfare services at Khulisa?
4. What are the strengths and weakness of available services for the homeless as provided by Khulisa?
5. Are homeless people well informed about the services available to them?
6. What are the challenges in service provision for the homeless?
1.6 Main research assumptions

- Homeless people have difficulty accessing services intended for them.
- Service provision for the homeless does not holistically cater for the needs of the homeless.
- The perceptions and experiences of the homeless can influence the drafting of policies and the planning of programs to assist them.

1.7 Research objectives

- To investigate the perceptions and experiences of homeless persons in accessing welfare services.
- To determine the strengths and weakness of available services for the homeless related to shelter, food, employment and health services.
- To explore the perceptions and experiences of homeless persons in accessing welfare services at Khulisa.
- To identify the strengths and weakness of available services for the homeless as provided by Khulisa.
- To examine if homeless people are well informed about the services available to them.
- To assess the challenges in service provision for the homeless.

1.8 Clarification of concepts

Homeless

The term homeless appears unambiguous and straightforward, yet it is a multifaceted concept encapsulating aspects of physical, social and psychological contexts (du Toit, 2010:2). Caplow et al. (1968:494 as cited in Naidoo, 2010:131) defines homelessness as a concept that barely touches on the lack of physical living space. He argues that homelessness refers to ‘a condition of detachment from society characterised by the absence or weakening of the affiliative bonds that link settled persons to a network of interconnected social structures (Naidoo, 2010:131). Edgar et al. (2001) cited in Evangelista (2010:199) identifies the condition of detachment and absence of affiliative bonds as ‘social exclusion’ which is explained as a “structural, dynamic, multifactor and multidimensional phenomenon” (Gomà & Subirats, 2005 cited in Evangelista, 2010:199).
Poverty as an aspect linked to social exclusion gives basis to the understanding that homelessness is a process characterised by the amassing of problems relating to both poverty and social exclusion at micro, meso and macro systems of society as expressed by the ecological systems theory (Evangelista, 2010:198). Subsequently, Evangelista (2010:198) further explains homelessness as a “continuum of exclusion from adequate shelter” thus also representing a deprivation of relational capabilities (Evangelista, 2010:198).

In addition to the definitions expressed above an absolute definition also referred to as the literal definition of homelessness exists and is used by the United Nations (UN, 2001). The absolute definition by the UN (2001) groups homeless persons into two categories. The first category is *Primary Homelessness* (or rooflessness), which includes persons living on the streets without shelter that would fall within the scope of living quarters. The second category, is *Secondary Homelessness* which includes persons “with no place of usual residence who move frequently between various types of accommodations including (dwellings, shelters and institutions for the homeless or other living quarters). This category includes persons living in private dwellings but reporting ‘no usual address’ on their census form” (UN, 2001).

The National Health Care Homeless Council (NHCHC) of the United States provides a detailed inclusive definition of homelessness which encapsulates the UN’s definition given above. According to this council, the term homeless refers to a person who lacks housing, and whose primary residence may be “a supervised public or private facility that provides temporary shelter” (NHCHC, 2016). This is inclusive of individuals who live in transitional housing as well as those who stay on the streets and in abandoned buildings or vehicles. In light of the extensive and comprehensive view of homelessness provided by the NHCHC definition, it was fittingly adopted for this study. Other definitions of homelessness include individuals who live in tenuous housing or in informal settlements (Podlashuc, 2011:3; Shinn, 2007:657).

In South Africa, homeless people are also referred to as street people and this term is especially used in government policies such as the City of Cape Town’s Street People Policy (SSP). According to this policy, the term street people refers to “people, who for any reason use the outdoors as a place of abode for a lengthy period of time” (Street People Policy, 2013:2). This
definition is rather ambiguous as it does not specify a time period one qualifies to be identified or classified as a street person. Further, it leads to uncertainty about the rendering of services that are enlisted in the policy as it is unclear what period of time one has to be on the street in order access services intended for the homeless. Rule-Groenewald, Timol, Khalema and Desmond (2015) from the Human Science Research Council (HSRC) argue that, who we define as homeless and what we identify to be drivers and outcomes of homelessness will influence the type of interventions that are implemented in support of the homeless.

As highlighted under the definition of homelessness, researchers vary in their criterion of the type of living conditions that are considered to define an individual as homeless. One of these is the amount of time one spends homeless which ranges from 1 day within the past month to an extended period of six months. Kydra and Compton (2009:145) as well as DeSilva, Manworren and Targonski (2011:16) explicate that individuals who have been homeless for a year or longer and have a minimum of four episodes of homelessness in 3 years are categorised as chronically homeless, a definition taken from the United States Department of Housing and Urban Development.

The definition adopted for this study is however not limited to time or periods of homelessness and as such allows for the consideration of experiences and perceptions of homeless people who have been on the street for less than six months.

**Service provision**

Service provision refers to programs and projects provided by government and non-state entities for the benefit of people in need, including homeless persons. Patel (2015:129) from a social welfare perspective defines social services as those services that include integrated family centered and community based services, facilities, social investment programs and social protection. The aforementioned definition of service provision is consistent with Khulisa’s mandate which is to provide services in the form of community level social investment initiatives that produce quantifiable results. With specific reference to the streetscape program which is the focus of this study, Khulisa prioritises services to the homeless that facilitate long term economic and social benefits such as employment and skills development. The definition of service provision adopted
then also allows for the qualification of Khulisa’s services to the homeless as part of social welfare. In light of this analysis, the strengths and weaknesses of services provided to the homeless as highlighted by participants, will then also be an indirect assessment of how Khulisa’s services align to family centred and community based services, facilities, social investment programs and social protection which define service provision.

1.9 Ethical consideration

1.9.1 Informed consent, anonymity and confidentiality

Ritchie, Lewis, McNaughton and Ormston, (2014:77) state that there is general consensus regarding the principle aspects of ethical research. These principles of research include the following obligations; that the research should be worthwhile and avoid irrational demands on participants; the research should be founded on informed consent; participation should be voluntary without any coercion; all inimical harm to participants should be avoided; participants should be made aware of possible risks of injury, and confidentiality and anonymity should be upheld (Ritchie et al., 2014:77; Rubbin and Babbie, 2008:82; Nnebue, 2010). The researcher ensured that these principles were upheld by the study. The researcher ensured that no inimical harm befell the participants due to the study. However, the researcher was aware that some questions posed to the homeless had potential to cause emotional or psychological distress. For this reason, the researcher consulted with stakeholders regarding steps that could be taken towards debriefing the participants or limiting questions to ones that did not lead to distress.

All participants were made to sign consent forms which confirmed their voluntary participation in the research project. The form informed participants of the objectives of the study as well as the research procedure to be followed highlighting the length of the interview, the method of data collection and how the information would be used and stored. The form also explained to participants their right to decline or withdraw from the research project at any point. Further, participants were made aware that there were no incentives or direct personal benefits that would emanate from their participation in the research project; rather their input would aid in increasing the available knowledge on the experiences of homeless persons.
Anonymity and confidentiality were also highlighted in the form. Participants were informed that
the information they gave was strictly confidential and when presented would not be linked to them.
The researcher achieved the principles of confidentiality through the use of codes to replace the
names of the participants. All collected data was stored securely within a password protected
computer and backed up on a private server with single access by the researcher.

1.9.2 Reflexivity and competence of the researcher

Reflexivity

Reflexivity refers to the predispositions of the researcher that affect his/her objectivity in the
research (Malterud, 2013:484; Guillemin & Gillam, 2004:274; Mauther & Doucet, 2003:419). The
researcher had never interacted with the homeless at the level which was required by the research
project. The researcher remained strictly objective ensuring not to ask biased questions. The
objectivity of the study was further reinforced by the reviewing of questions by stakeholders
beforehand to challenge misconceptions and to rid any bias.

Competence of researcher

de Vos, Strydom, Fouche, & Delport (2011:30) emphasises that the competence of a researcher is
an ethical obligation for any research. They further explain that the success of a research study is
heavily reliant on the researcher’s ability to carry out the research (de Vos et al., 2011:30). To
ensure valid results and a successful research project it was required that the researcher was
equipped with skills for fieldwork from prior education as well as through briefings with her
supervisor. In additional, bid to ensure an effective study, the researcher had the constant oversight
of a supervisor who over saw all the processes of the research project. The competence of the
researcher was further validated by the availability of audio recordings of all fieldwork, which was
assessed by the supervisor for the purposes of confirming the accuracy of results.

1.10 Summary of chapter one

This chapter outlined the purpose of the study through the provision of the rationale, objectives, as
well as the main research questions. On elaborating on the technicality of the acquisition of data
and the use of terms, the chapter provided a reflection of the ethical considerations necessary for
the study as well as a clarification of concepts that were used by the researcher.
1.11 Outline of chapters

Chapter one of the study presents the background, rationale of the study, the research topic, questions, objectives, assumptions, clarification of concepts and an outline of ethical considerations that are vital for this study.

Chapter two offers an extensive literature review for the purposes of providing a contextual and in-depth understanding of the issue being researched. The chapter elaborates on the concept of homelessness as well as the cause of homelessness. It further provides a background of the varying programs and services that have been implemented in different countries to reduce and alleviate homelessness. Also presented in the chapter are findings from prior research on the experiences of homeless persons in different contexts.

Chapter three gives a methodology of the study, focusing on the discussion of data collection, data analysis methods as well limitations of the study.

Chapter four provides the presentation and discussion of findings.

Chapter five concludes the research report and gives relevant recommendations.

The following chapter gives focus to the discussion of consulted literature pertaining to the topic. Specific attention was paid to the underlying theories of service provision for the homeless. Further, a discussion of available literature on the objectives is provided.
CHAPTER TWO

LITERATURE REVIEW

2. Introduction

The previous chapter outlined the purpose of the study through the provision of the rationale, objectives, as well as the main research questions that guided this study. This chapter presents an array of knowledge on the issue of homelessness, focusing on relevant international and national legislation, principle theories and a presentation of findings from past research. The theoretical founding of this research is centred on the social development model, reflecting and on the principles of the human needs approach, the capabilities approach and the people centred development theory. In line with the discussion of prior research, attention is drawn to the experiences of homeless people with shelter, food, employment and health care services from varying contexts. The literature offered in this chapter is founded on the review of a number of sources which include books, online journals and websites.

2.1 Theoretical Models

The theoretical models presented in this section provide guidelines for the analysis of service provision to the homeless through the lens of social development. Figure 1 provides a visual illustration of the conceptual progression of theories in speaking into service provision as a social development tool.

Figure 1: Integration of theories
2.1.1 Social Development Model

Midgely (1995:250) cited in Patel (2015:124) defines social development as the progression of planned change to promote the well-being of individuals in tandem with the process of economic development. Patel (2015:124) has formulated a model for social development for the purposes of contextualizing social service provision to respond to the needs of the South African people. The model is based on the principles of human agency and the power of beneficiaries to be the champions of change and development in their own lives (Patel, 2015:123). The concept of planned change encapsulates empowerment through the promotion of social and economic participation of those socially excluded (Patel, 2015:124). Further, the model looks at principles of social and economic justice. It is informed by four major themes which are first; the rights based approach to human development, secondly, as highlighted above an interconnected relationship between social and economic development - this being carried out through the increasing of human capacities to participate in “the productive economy and society”. Thirdly, a pluralistic approach to social development evidenced by the partnership of the state with non-state actors. Lastly, closing the gap between micro and macro approaches of analysing social problems.

This research will focus on exploring service delivery to homeless persons through a social development lens in order to determine whether or not current services promote well-being towards development. The social development model serves as the foundation for the use of the following theories.

2.1.2 Human Needs Approach

Human needs is based on the strengthening of self-reliance and on the building of “organic articulations of people with nature and technology” as well as with the global and local activities for development to take place (Max-Neef, Elizade & Hopenhayn, 1992:197). He further highlights the importance of the relationship between a person and their social surrounding for personal and community development. Linking social relationships to homelessness is crucial, and as a means to propel development agendas, Max-Neef emphasises that the pillars of development can only be sustained in an environment or in conditions that allow persons to be “protagonists of their own development” (Max-Neef, Elizade & Hopenhayn, 1992:198). A fundamental question to this study
in respect of the human needs approach is whether services provided to the homeless create an environment for the homeless to be “protagonists of their own development”.

Max-Neef, Elizade and Hopenhayn (1992:198) argue that there are eight fundamental human needs that one needs to satisfy in order to attain holistic development. He classifies these needs into two groups which comprise existential and axiological needs. *Existential* needs are those that pertain to “being, having, doing and interacting” whereas *axiological* needs comprise of “subsistence, protection, affection, understanding, participation, creation, leisure, identity and freedom” (Max-Neef, Elizade & Hopenhayn, 1992:199). He explains that each need has a “satisfier” for instance the need for life subsistence would require satisfiers such as food and shelter and the need for understanding would have satisfiers such as education, study or investigation. In this theory, it is proposed that fundamental human needs are universally applicable.

In satisfying needs, Max-Neef further postulates that needs are satisfied in three contexts which are personal, social and environmental. It is without doubt that homelessness is an indication of poverty which could be a product of unmet needs within the three contexts. Not only is poverty exhibited through the lack of finances alone but through the absence of social inclusion. Mangayi (2014:217) expresses that poverty is not an isolated issue but rather one that is consistent with “physical weakness, isolation, vulnerability and powerlessness”. Max-Neef highlights the existence of different forms of poverty which are, absolute poverty, situational poverty and relative poverty. He asserts that each form of poverty breeds common indicators for example indicators of income poverty are hunger, lack of clothing and poor health. These indicators identify individuals into respective categories of poverty. The basic needs approach is guided by a matrix of needs and satisfiers identified by Max-Neef which is provided below:
### Table 1: Fundamental Human Needs (Max-Neef, Elizade & Hopenhayn, 1992)

2.1.3 Capabilities Approach

The capabilities approach is based on the work of Amartya Sen (1999) who emphasises freedom as a form of development. Sen explains that development is the expansion of real freedoms that people enjoy. Robeyns (2005:94) states that the capabilities approach “focuses on what people are effectively able to do and to be”. She expresses that the capabilities approach can be used to evaluate and assess individual well-being and social arrangements. In addition, the capabilities approach (Sen, 1999:9) identifies development as the removal of “unfrees” that prevent individuals from unlocking their potential, achieving their goals and leading a life they value. “Unfrees” may be in the form of unjust political, economic and social conditions which highlights the need for transformation of existing structures and widening of opportunities.

---

<table>
<thead>
<tr>
<th>Fundamental Human Needs</th>
<th>Being (qualities)</th>
<th>Having (things)</th>
<th>Doing (actions)</th>
<th>Interacting (settings)</th>
</tr>
</thead>
<tbody>
<tr>
<td>subsistence</td>
<td>physical and mental health</td>
<td>food, shelter work</td>
<td>feed, clothe, rest, work</td>
<td>living environment, social setting</td>
</tr>
<tr>
<td>protection</td>
<td>care, adaptability autonomy</td>
<td>social security, health systems, work</td>
<td>co-operate, plan, take care of, help</td>
<td>social environment, dwelling</td>
</tr>
<tr>
<td>affection</td>
<td>respect, sense of humour, generosity, sensuality</td>
<td>friendships, family, relationships with nature</td>
<td>share, take care of, make love, express emotions</td>
<td>privacy, intimate spaces of togetherness</td>
</tr>
<tr>
<td>understanding</td>
<td>critical capacity, curiosity, intuition</td>
<td>literature, teachers, policies educational</td>
<td>analyse, study, meditate, investigate</td>
<td>schools, families, universities, communities</td>
</tr>
<tr>
<td>participation</td>
<td>receptiveness, dedication, sense of humour</td>
<td>responsibilities, duties, work, rights</td>
<td>cooperate, dissent, express opinions</td>
<td>associations, parties, POW*, neighbourhoods</td>
</tr>
<tr>
<td>leisure</td>
<td>imagination, tranquility, spontaneity</td>
<td>games, parties, peace of mind</td>
<td>day-dream, remember, relax, have fun</td>
<td>landscapes, intimate spaces, places to be alone</td>
</tr>
<tr>
<td>creation</td>
<td>imagination, boldness, inventiveness, curiosity</td>
<td>abilities, skills, work, techniques</td>
<td>invent, build, design, work, compose, interpret</td>
<td>spaces for expression, workshops, audiences</td>
</tr>
<tr>
<td>identity</td>
<td>sense of belonging, self-esteem, consistency</td>
<td>language, religions, work, customs, values, norms</td>
<td>get to know oneself, grow, commit oneself</td>
<td>places one belongs to, everyday settings</td>
</tr>
<tr>
<td>freedom</td>
<td>autonomy, passion, self-esteem, open-mindedness</td>
<td>equal rights</td>
<td>dissent, choose, run risks, develop awareness</td>
<td>anywhere</td>
</tr>
</tbody>
</table>

*POW - Place of worship
Capabilities reflect a person’s real opportunity or freedom to choose the lifestyle they would like to lead. Homeless people without services are unable to achieve their functionings and therefore their capabilities are limited without the appropriate resources. From this, the research mandate was to understand the extent to which lack of poor services directly influences the capabilities of the homeless.

It should be noted that the capabilities approach originated from an economic perspective specifically welfare economics were well-being was measured by income. As means to counter the narrow understanding of well-being as opulence, Sen (1999) pinpointed a distinction between the restricted measure of wellbeing and overlooked variables of well-being such as commodities, utility and capabilities. In this instance utility represents happiness and “capabilities” as those things that a person is able to do. Clark (2006:3) illustrates the transitional process of attaining wellbeing through the lens of the capabilities approach.

| Commodity (resources) | capability (to function) | Function(ing) | Utility (e.g. happiness) |

**Figure 2:** Transitional process of well-being Clark (2006:3) *Commodities allow an individual to enhance their capabilities and functions which in turn lead to the attaining of utility happiness.*

Sen explains that commodities or income and the availability of services are necessary for development but it should be noted that these are purely a means to an end, and not an end in themselves. The central theme of the capabilities approach is that the quality of an individual’s life should be measured by what that person is able to achieve (Clark, 2006:3). Sen acknowledges that people’s capacity to convert commodities into achievements varies based on their physical or social standing i.e. a person with disabilities may require more resources to obtain the same achievements as an able bodied person (Sen, 1999). The same would be applicable for a homeless person who wants to open a bank account. The bank services are available to them but in order for them to open an account they have to produce a proof residence which they are not in
possession of. In addressing utility Sen (1999) points out that although utility (which is the level of a person's happiness) is an important aspect of a person's well-being, it can be swayed by “mental conditioning or adaptive conditioning”. The adaptive nature of utility can be illustrated in that a homeless person may have limited commodities, but they may condition themselves to have high utility.

In summary, Sen (1999) identified that the measurement of well-being using commodities and utility was insufficient. He coined the use of measuring functionings and capabilities to assess well-being. Functionings, are the achievements one is able to obtain through the commodities (resources) they have at their disposal and capabilities being an individual's ability to achieve these same functionings. In this regard, the study focuses on the assessment of how services provided expanded the homeless people’s capability sets.

**People Centered Development Approach**

People centered development is an approach that is founded on the principle of “people centeredness” which states that people should be the drivers of their own development (Schenck & Louw, 1995:81-91). Korten, a key scholar on the approach of people centred development defined development as the “process through which members of society increase their personal and institutional capacities to mobilise and manage resources” (Korten, 1990:67 cited in Myers, 2011:97). This enabling the production of sustainable improvements in the quality of life coherent with their set aspirations (Korten, 1990:67 cited in Myers, 2011:97). Korten, further indicates that the people centred development approach is one that is transformative in nature. In this regard, transformation would be geared towards transferring control and the pushing of development agendas to the people and their communities where they can exercise autonomy over the use of their resources and the ability to meet their own needs of “justice, sustainability and inclusiveness” (Korten, 1990:4 cited in Myers, 2011:97). As such the findings of this research provide a basis through which services for the homeless can be designed in manner that allows individuals to be the champions of their own development.
Myers (2011:96) explicates that Kortens’ key phrases are sustainability, justice and inclusiveness. The idea of inclusiveness brings to the fore the understanding that social disintegration and disenfranchisement are barriers to development. Social exclusion and poverty are part of the many contributing factors to homelessness, as such their identification as barriers to development should be addressed by services provided to the homeless. Myers’ (2011:96) concept of people centred development stresses the understanding that development will only occur when agencies provide services that empower beneficiaries to drive and determine their own development.

The fundamental principles of the theories adopted for this study emphasise the need for a development that is inclusive of the initiative of those being developed. Further, they highlight development as the ability to lead a life that is in tandem with personal aspirations and goals. As such services provided to the homeless are expected to meet these principles.

**Social Science theories of homelessness**

The social development model which is the selected model for this study is shaped by principles of human agency and empowerment in a pluralist approach that seeks to bring together micro and macro approaches. These principles are found in the Human Development, Capabilities and People Centred Development theories which provide the foundation for this research study. In addition to these theories, other social science theories exist to understand the issue of homeless. These include the functionalist approach, conflict theory, the feminist approach, structuralism and deviance theories.

The functionalist theory attributes homelessness to an individual's personal failings and it is also seen as a dysfunction and a deviation from the norm (Ravenhill, 2008:32). This theory is limited in that it fails to acknowledge the role of external influences in people becoming homeless. Ravenhill (2008:32) thus argues that the functionalist theory is a flawed and misleading ideology as homelessness sometimes is a natural response to circumstances. She argues that homelessness may be attributed to abusive homes or relationships and in cases like this the result of homelessness is not an act of deviation.
In the conflict theory social arrangements are viewed as a result of conflict between competing groups that could be in the form of social classes, cities and gender for example (Schaefer 2014:16). Homelessness in this view is linked to conflict within a person’s surroundings which leads them to the state of homelessness. Ravenhill (2008:49) argued that this approach is radical and activist. In light of the above the conflict theory would not necessarily contribute to the analysis of current services in a manner that brings empowerment and human agency which are the pillars of human development.

The Feminist Approach is of the argument that inequality or social disparities can be attributed to gender inequality. The approach primarily argues that men always have an advantage over women in social, cultural and economic settings (Ravenhill 2008:52). Homelessness is then analysed bearing these factors in mind. In structuralism society is seen as being made up of structures that are connected to bring order. This theory focuses on macro structures and their role in affecting social systems. Homelessness, in this theory, would be limited to housing structures and would not account for individuals’ ability to make critical, positive decisions that effect on their development. Finally, the deviance theory sees individuals as subgroups within social structures, who have negative responses to societal norms and values. Thus homeless persons would be considered as those who have chosen to be in a state of homelessness as a negative response to societal norms and values (Ravenhill 2008:52).

The social science theories overviewed above relate to the topic. However, they do not concentrate with the same intensity as the social development perspectives on individual development and the personal wellbeing of homeless persons, which are central to this study. Their emphasis is more on individual responses to social systems. As such these theories, although identified, are excluded from a critical assessment in relation to the collected data because of their restricted relevance. In consideration of the above the social development model has been identified as the main theoretical framework for analysis.

2.2 Legislative Framework
An array of international and national policy and legislation designed to uphold the rights of
homeless persons exist in varying capacities. These legislations are discussed in this section starting with those most applicable internationally.

**United Nations Universal Declaration of Human Rights**
The United Nations Universal Declaration of Human rights in article 25 outlines human rights that are most relevant to the plight of the homeless. The declaration states that each person is entitled to a standard of living that promotes good health and well-being for them and their families. Well-being should be inclusive of the provision of “food, clothing, housing and medical care, necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control” (UN, 1948:5).

**Constitution of the Republic of South Africa**
South African national legislation does not directly address homelessness in a single statute but rather responds to the underlying social and economic issues surrounding homelessness through a number statutes (Roets et al., 2016:621). The chief legislation that addresses issues closely related to homelessness is the Bill of Rights states that the government has the responsibility to ensure that these rights are upheld. As a pledge towards upholding the prescribed wellbeing of South Africans, with specific reference to shelter, the constitution states that everyone has the right to adequate housing (Constitution of the Republic of South Africa Act 108 of 1996). While the right to housing may be enshrined in the constitution as stated by Fitzpatrick, Pawson, Bramley, & Steve (2011:11) there are limited legal mechanisms provided to capacitate homeless individuals to enforce those rights. The state is obligated to take practical measures within the bounds of its resources to ensure the realisation of these rights. The rights mentioned above encapsulate the basic needs of every South African especially the homeless. In light of this, it is therefore imperative that services that are provided by the state secure the wellbeing of citizens.

**Street People Policy**
The CCT as a means to channel relevant services to the homeless drafted the Street People Policy (SPP) which was adopted in December 2013 following its first draft in 2004 (City of Cape Town, 2013:1). The purpose of the policy is to articulate the City of Cape Town’s initiative to identify and provide homeless persons with “the necessary developmental assistance to access accommodation,
health services, skill-development services, employment and social grants and aid in facilitating the reintegration or reunification of street people into families, community and society” (City of Cape Town, 2013:3). The Policy further provides for “the establishment and support of a local network of care to assist with the reunification of street people with their families and communities” (City of Cape Town, 2013:3). The Street People’s Policy states that it is informed and is in tandem with a number of overarching strategy documents that inform the city’s priorities which include the Integrated Development Plan (IDP), the City Development Strategy as well as the Social Development strategy.

The IDP is the city’s overarching framework strategy that shapes the policies, programs and budget priorities of the administration” for a period of five years. The SPP is aligned with IDP’s Strategic Focus Area aimed at creating a caring city. One of the objectives of the city is to provide social services for those in need especially vulnerable groups including the homeless people (City of Cape Town, 2013:3). Another overarching strategy document for the CCT is the City’s 30 year Development Strategy. It is informed by the six transitions identified in the One Cape 2040 Strategy. One of these is the ‘Settlement Transition’ which focuses on promoting ‘healthy, accessible, livable multi opportunity communities’ within Cape Town (City of Cape Town, 2013:3).

The last of these documents is the Social Development Strategy (SDS) which identifies street people as a vulnerable group that needs assistance in sourcing employment as well as reintegration into communities (City of Cape Town, 2013:4). One of the objectives of the SDS is to increase access to infrastructure and services as well as to mobilise resources for social development projects (City of Cape Town, 2013:3). Further the SDS seeks to use research and evidence to inform programs and partnerships as well as collaborations for social development to underpin the purpose of the Street People Policy City of Cape Town (City of Cape Town, 2013).

2.3 Homelessness contextualized

No official national statistics are available for the entire South African homeless population (Cross, et al., 2015:7). Rule-Groenewald et al. (2015) state that official statistics acquired by Statistics South Africa have proved unreliable and unsuitable to form absolute numbers and trends in homelessness. Albeit the lack of absolute numbers, estimates of some metropolitan cities are
available from a number of studies (du Toit, 2010:116; Cross & Seager, 2010:145; Kok, Cross, & Roux, 2011:25). Nationally in 2008 the estimate of the homeless population was between 100 000 to 200 000 inclusive of homeless people in rural areas (Rule-Groenewald et al., 2015). Regardless of the lack of statistics, the South African homeless demographics, according to consulted studies reveal that homelessness affects adults more than children and specifically men, than it does women (Roets et al., 2016:8). The lack of absolute national statistics can possibly be attributed to the challenges that come with accounting for the homeless as they are seldom stationary and seek to hide themselves from the elements as well as authorities (Busch-Geertsema, Culhane & Fitzpatrick, 2015:15).

Rule-Groenewald et al. (2015) further explains that the national census is based on household enquiry and does not focus on individuals outside that setting. This is an issue faced by many countries which has led to the difficulty in comparing statistics of homelessness internationally (Busch-Geertsema, Culhane & Fitzpatrick, 2015:15). The absence of national statistics of the homeless may also be an indication that homelessness is not a pressing national priority. However, regardless of the lack of national statistics on the homeless, studies of the homeless in South Africa support the necessity for urgency around increasing the services available to the homeless especially those around shelter (Cross & Seager, 2010:143; Kok, Cross & Roux, 2011:24).

2.3.1 Types of homelessness
Ravenhill (2008:11) argues that the definition of shelter is commonly associated with the simplicity of a lack of housing which consequently casts a blind eye to nuances of social and psychological issues. He further outlines the importance of definition by stating that the general public definition of homelessness influences the extent to which society is willing to help. Ravenhill (2008:11) in specifically identifying physical homelessness, groups the homeless into three main categories, which are those who are roofless, those who are houseless and those who are precariously housed. Rule-Groenewald et al. (2015) identify them as primary, secondary and tertiary homelessness. The term roofless refers to people who have no roofs over their heads sleeping on the street, benches and parks, under bridges and bushes. Houseless referring to those living in sheds, caravans or tents (Ravenhill, 2008:11; Quilgars, Fitzpatrick & Pleace, 2011:14). The precariously housed are defined as those living in squats, hostels, breakfast hotels and temporary accommodation. In further
categorising homelessness Meanwell (2012:73) provides three self-explanatory categories of homelessness which can fall under Ravenhill's (2008:11) three physical categories. These are transitional, episodic or chronic homelessness (Meanwell, 2012:73).

**Figure 3:** Homelessness categories according to Ravenhill (2008:73) and Rule-Groenewald et al. (2015). *The diagram provides an illustration of the types of homelessness specifically that of physical homelessness.*

Busch-Geertsema, Culhane and Fitzpatrick (2015:15) argue that homelessness can be divided into three domains which are security, physical and social. These domains encapsulate the different categories of human needs identified by Max-Neef. McNaughton (2008:7) highlighted that the concept of homelessness undoubtedly has emotional, psychological and subjective elements which can be identified through seven indicators outlined by Somerville. These include “lack of material shelter, lack of privacy, lack of comfort, lack of the citizenship rights, lack of ownership over space, and also merges into subjectivities: lacking a space to develop intimate relationships; lacking a sense of belonging, and with it a secure sense of identity” (McNaughton, 2008:7). Similarly, Whiteford (2010:12) postulates that street homelessness and social exclusion are intertwined based on the understanding that rough sleepers experience acute, deeply rooted dislocation and exclusion from mainstream social norms. This consequently affects their capacity to engage as “full and active citizens” (Whiteford, 2010:12). The definitions above provide a clear intertwining of physical, social and psychological needs which necessitate the structuring of services that cater to all elements that contribute to balanced human development.
2.3.2 Causes of homelessness

Structural Causes

du Toit (2010:3) argues that most empirical studies on the homeless focus on the causes and socio-economic conditions of homelessness. Within these conditions are structural causes including unaffordable housing, unemployment, poor access to health care and an increase in single headed households (du Toit, 2010:3). Structural causes are also explored by Ravenhill (2008:30) under the sociological structuralist school of thought. He explains that society functions because of different structures that make up the whole which orders people’s lives. In light of this, homelessness is seen as a result of failed structures rather than an individual's choices (Ravenhill, 2008:30). The focus thus becomes on structures such as government initiatives, the economic system and the family and the role they play in perpetuating homelessness (Ravenhill, 2008:30).

With specific reference to developing countries, homelessness is also said to be influenced by rural migration and the shortage of housing in urban areas as a result. The issue of rural migration is one that is embedded in South African political and socio-economic history (du Toit, 2010:3). The South African federation of the homeless highlight the historical context of urbanisation in South Africa, noting that the end of apartheid policies led to the rural masses pouring into urban areas in search of jobs (Podlashuc, 2011:11). A study conducted by Aliber, du Toit, Langa, Msibi, Parthab, Roberts, & Thaba (2004) as cited in Naidoo (2010:130) found that homeless people in Pretoria came to the city in search of work but could not afford transport back home and therefore settled on the streets.

In further explaining the impact of structural influences on homelessness Cross and Seager (2010:146) draw attention to the influence of spatial and urban development factors. They argue that these factors purposively displace the low income earning populace to the outer parts of the city, which are far from places of work. This is a reality experienced by low income earning South Africans with particular reference to Cape Town where the “shack population” live far away from the city and its activities. Subsequently, homelessness in addition to its affiliation to poverty is also regarded as an expression of social exclusion (Evangelista, 2010:199). Social exclusion is defined as a “structural, dynamic, multifactor and multidimensional phenomenon” (Evangelista,
The connection between social exclusion and poverty gives basis to the understanding that homelessness is a process characterised by the amassing of problems relating to both poverty and social exclusion at micro, meso and macro systems of society as expressed by the ecological systems theory (Evangelista, 2010:198).

**Personal Causes**

Under the functionalist theory homelessness is attributed to an individual's personal failings and it is also seen as a dysfunction and a deviation from the norm (Ravenhill, 2008:32). Further, this deviation is sometimes attributed to psychological and emotional disorders which, Piliavin et al. (1993:577); Altena, Brilleslijper-Kater and Wolf (2010:638) identify as possible barriers to participation in conventional society. The detachment from social structures creates substantial circumstances for estrangement and for persons to prefer to live on the street and later to become comfortable with this way of life (Piliavin et al., 1993:577; Raleigh-DuRoff, 2004:565). A sentiment expressed by Raleigh-DuRoff (2004:565) who explains that homelessness for some, provides a sense of freedom and a place of belonging. Raleigh-DuRoff (2004:565) further explains that estrangement if sustained leads to long term homelessness. Emotional and sexual abuse as well as conflict with friends and family are among many other factors that lead to persons opting to live on the street, circumstances that Piliavin et al. (1993:577), McNaughton (2008:8) argue are more prevalent amongst youth.

McNaughton (2008:8) and Fitzpatrick et al. (2011:13) pinpoint a link between structural and personal factors that cause homelessness. They express that structural factors create a foundation for homelessness and people with personal problems are more susceptible to social and economic trends that lead to homelessness. For this reason the large number of persons with personal problems in the homeless population can be attributed to vulnerability to economic and structural conditions rather solely to personal problems. Fitzpatrick et al. (2011:13) as well McBride (2012:49) add that the balance between structural and individual factors that influence homelessness vary from one country to another based on the strength of available structures such as housing, labour markets employment opportunities and availability of quality education. The higher the functionality of markets and macro structures the lower the population of homeless
people and the reverse has been found to be true (Fitzpatrick et al., 2011:13).

Ravenhill (2008:30) brings to the fore a rather unconventional argument on homelessness by stating that homelessness can be seen as a forming body of production affected by the open market. He argues that this is evidenced by the increase in investment in the form of literature and resources by government and the Non-profit sector. Ravenhill (2008:30) explains that this industry is self-perpetuating, constantly seeking new homeless issues that need to be addressed leading to the “hogging and cream skimming” clients by services in order to keep their organisations funded. He adds that little regulation happens with these organisations and they tend to be reactive rather than proactive due to the concentration of funding.

2.3.3 Experiences and perceptions of homeless people with service provision

In previous studies service usage by the homeless has been correlated with a number of attributes common to homeless persons. Among these were the level of education and age. Thompson, McManus, Lanty, Windsor & Flynn (2006:35) state that the findings of most studies show that young homeless people make very little use of available social and health services (Seager & Tamasane, 2010:76). In addition, when they do make use of services they opt for drop in centres and outreach services which act as a gateway toward other services. Findings from Thompson et al. (2006:35) suggest that the biggest barriers to service utilisation are lack of insurance, transportation and knowledge of the system. The findings above concur with Tyler, Akinyemi and Kort-Butler (2012:1345) who mention that homeless people tend to use services to meet immediate needs rather than long term needs.

The same study found that older age and higher education levels among the homeless correlated with the use of food programs, outreach services as well as STI testing and HIV testing (Tyler, Akinyemi & Kort-Butler, 2012:1345). The period of homelessness was also seen as a contributing factor to the use of services, showing that individuals who were on the street for longer periods of time were more prone to utilising services because of their knowledge of service locations as well as the advantage of having acquired networks (Tyler, Akinyemi & Kort-Butler, 2012:1345; Chambers, Chiu, Katic, Kiss, Redelmeier, Levinson, Hwang 2013:5306).
In addressing gender Meanwell (2012:73) expressed the opinion that homelessness is a gendered experience. He argues that women are more likely to have family in the form of children accompany them on the street and because of this women are prone to use shelters more than men. Similarly Tyler, Akinyemi and Kort-Butler (2012:1345) found that females were more likely to have used specifically health services more than their male counterparts. Complementary to this, Meanwell (2012:73) expresses that men have limited access to shelter, resources as well as social assistance. The gender of homelessness is attributed to the ideology of gender based dependency as well as higher rates of chronic homelessness among men (Meanwell, 2012:73). A notion supported by the studies presented above that show that there are more homeless men than women in South Africa.

**Food Security**

Food insecurity is inescapably linked to poverty which is characterised by the consistent lack of adequate resources to access food in a socially acceptable manner (Crawford, Yamazaki, Franke, Amanatidis, Steinbeck, Torvaldsen 2014:71). Services that provide food are said to be mostly run by non-state actors. Food services have been suggested to cover the gap in the system for those who do not qualify for state welfare. In stating the obvious, the provision of food by organisations prevents hunger and starvation hence their importance. In a study by Aliber et al. (2004:7) in Pretoria homeless people reported that they were sometimes only able to eat 3 to 4 times in a week when soup kitchens were available this highlighting the plight of the homeless without the provision of food services.

According to a study on homeless youth in Australia it was found that homeless youth struggle to find sufficient food to meet daily nutritional requirements and faced constant hunger, anxiety and embarrassment. (Crawford et al., 2014:71). Tyler, Akinyemi and Butler (2012:1345) in their study found that youth who were not in shelters and spent more time on the street were more likely to be savvy in ways to find food. In light of this Stablien (2011:4) explains that homeless street peers provided socio-emotional support to one another and one of the ways in which they did this was through helping each other find food. Food services are key to meeting the basic needs of the homeless and provide a foundation that allows them to focus on other pressing needs.
Shelter

Johnsen, Cloke and May (2005:290) argue that although day care spaces may not be considered shelter they provide a haven for the homeless where they received food and these places often help them stay away from survival crime. Regarding overnight shelter Wasserman and Clair (2011:76) point out that homeless services offer shelter to those without, in order to protect them from the elements. They explain that those who do not use these services, do not do so because there is a shortage of beds and in other instances because homeless individuals consciously resist offered shelter services (Wasserman & Clair, 2011:76). Johnsen, Cloke and May (2005:324) further express that the experiences of the homeless with shelter are determined by the extent to which homeless people are welcomed, able to interact with services provided as well as their interaction with staff and other members. Similarly stated by Wasserman and Clair (2011:76) rejection of shelters by the homeless is due to the authoritarian tendencies adopted by most institutions which forbid the use of substances within facilities.

DeSilva, Manworren and Targonski (2011:16) point out that chronically homeless individuals are harder to house than those individuals who are not. They attribute this difficulty to the high rates of substance abuse, poor employment history and limited social support amongst this group. Amongst those homeless individuals who did use shelter services Kydra and Compton's (2009:145) study found that participants highlighted violence, theft and drugs as prevalent in many of the shelters and drop in centres in the area their study was located. Further the study showed that regardless of the availability of shelter as the most prominent short term solution to rooflessness many of the participants did not consider shelters and drop in areas as viable short term solutions because of the negative encounters in those spaces. As a result majority of the participants opted to stay on the street despite the inconveniences of weather and potential danger. Kydra and Compton (2009:145) argue that the refusal to use services is rooted in mistrust, scepticism and negative experiences with service staff members which result in homeless individuals viewing services as conflicting with their needs (Tyler, Akinyemi & Kort-Butler, 2012:1344). Kydra and Compton (2009:145) suggest that one of the ways in which to improve services to the homeless is through the empowerment and expanding of services offered to the homeless. The availability of
services does not guarantee their use by the intended population as demonstrated above. It is therefore important to evaluate the quality of the services provided so as to ensure their effectiveness.

Seager and Tamasane, (2010:69) in their study of homeless people in South Africa, found that shelters were divided according to sex and for this reason many families either chose not to use these facilities or if they did they were split into different shelters, this more so for young people who were siblings a phenomenon also noted by (Mcbride, 2012:55). Altena, Brilleslijiper-Kater and Wolf (2010:642) suggest that interventions which provide independent living result in positive outcomes of employment and wellbeing. One of the possible reasons for the positive results is presented by DeSilva, Manworren and Targonski (2011:16) who propose that supportive housing should be paired with social services and case management. They add that these services in the past have proved to increase residential stability and advertently decrease costs associated with homelessness such as emergency department visits and correctional services. Social integration has also been considered as a contributor to sustained housing as Tsai, Mares and Rosenheck (2012:427) highlight. They argue that according to the social science theories wellbeing is influenced by an individual's ability to belong to and identify with “social political, religious and other groups as crucial for experiencing oneself as an accepted member of society” (Tsai, Mares & Rosenheck, 2012:427).

Reeve (2011:18) identifies that among the homeless is a group of individuals who may be categorised as the hidden homeless, invisible to care services as well as statistics. These individuals often stay with friends. However, it was found that staying with friends was a temporary solution and often led to feelings of embarrassment, shame and sometimes the souring of relationships (Reeve, 2011:18). The study further highlighted that some participants opted to squatting which often led to imprisonment. Sleeping rough amongst the participants interviewed was found to be the biggest struggle amidst the lack of basic needs such as food, shelter, warmth, safety of self and belongings. Reeve (2011:18) highlights that the hidden homeless are often at risk of structural decay, exposure to exploitation by friends and homeless people, the use of drugs as well as sex
work and imprisonment for crimes related to squatting. With the focus on shelter and housing as the key services identified to deal with the issue of homelessness, it should be highlighted that services to the homeless should not be limited to shelter. Meanwell (2012:78) presents a counter argument to the prioritisation of shelter services by stating that shelters lead to increased dependency and passivity that perpetuate the use of shelter service rather than the fostering of independence.

Cross and Seager (2010:143) pose a question as to whether homelessness is merely an issue of unaffordable housing, in other words, will the provision of housing be the panacea to homelessness? This research informed a possible answer to this question through the experiences of the homeless around shelter, employment, food security and health.

**Health**

Darbyshire, Muir-Cochrane, Fereday, Jureidini, and Drummond, (2006:554) highlight the importance of providing health care services that are accessible, acceptable and appropriate for homeless beneficiaries. Their emphasis on these principles was based on findings from a study on the experiences of homeless young people and shelter. The study echoed the influence of age in service utilisation as well as the period of homelessness stating that people who had been homeless for more than a year were more likely to make use of health services. Chambers et al. (2013:5302) assert that the homeless population experiences excessively high rates of chronic and severe health and traumatic conditions, injuries and assaults. Chambers et al. (2013:5302) adds that substance abuse and mental illness are equally prevalent.

Seager and Tamasane’s (2010:76) findings of a study on homeless people in South Africa suggested that health practitioners were hasty in their approach and did not take time to explain or engage with the homeless which caused anxiety as well as erratic behavior they felt unwelcome. The difference in service provision between public and private facilities was also identified as significantly dissimilar. Participants expressed that private facilities were more welcoming respectful and offered more services compared to public facilities (Darbyshire et al., 2006:556) a
The studies above also revealed that homeless people tend to visit emergency and accident departments rather than general health care services.

**Employment**

Homeless people tend to be less educated than the general population, has no work experience or has low quality employment records and a few if any job qualifications thus they are categorised as deskilled (Cross & Seager, 2010:155). Roets et al. (2016:10) expresses that this is more applicable to the roofless and houseless homeless population rather than those precariously housed.

Ferguson, Bender, Thompson, Maccio and Pollio (2012:387) and Mcbride (2012:53) suggested that homeless people were inclined to get low paying jobs such as grass cutting and waitressing and if they did get employment it was short lived, a sentiment also echoed by Whiteford (2010:17). Ferguson et al. (2012:386) in his findings concluded that the majority of young homeless people were unemployed for extended periods and as such they depended on panhandling and recycling material. Ferguson et al. (2012:386) explains the above by stating that homelessness is progressive in that young people tend to miss out on educational opportunities because of poor performance and attendance as well as dropping out of school. Further, Ferguson et al. (2012:387) also states that a street lifestyle results in lack of self-discipline, underdeveloped communication skills which are additional barriers to employment.

In a study by Kok, Cross and Roux (2011:28) of homeless people across three provinces in South Africa, it was found that homeless people did get some form of employment but the duration of the employment was unknown. It was further expressed with specific reference to Cape Town that business people benefited from hiring homeless persons as they provided casual labour on a need to need basis. The findings above suggest that there is a gap in long term and sustainable employment for the homeless. Ferguson et al. (2012:386) highlights that failure to equip homeless youth with skills combined with the lack of income as they transition into adulthood may lead to chronic homelessness which is harder to remedy.
Ferguson et al. (2012:386) suggested that discrimination was one of the biggest barriers to homeless individuals finding employment. In addition, Mcbride (2012:54) identified a lack of a means to acquire transportation as a hindrance to acquiring employment. Access to good hygiene and food were also amongst the identified barriers. Further, Mcbride (2012:54) expands on the issue of the lack of clothing expressing that if a homeless person found employment they would have the challenge of wearing the same clothes. Ferguson et al. (2012:387) explains that homeless people's experiences such as substance abuse, involvement in illegal activities, and extended exposure to the streets as well estrangement from educational settings create further isolation from formal employment. Ferguson et al. (2012:401) with specific reference to the youth, expressed that the lack of connection to supportive adults and institutions that would model skills, teach prosocial behaviours and discipline that help in employment etiquette were a contributing factor to the unemployment of homeless youth. As a remedy to the above, Whiteford (2010:13) suggests that platforms that provide purposeful activities for people should be put in place. The aim is to build their self-esteem through involvement in training, educational work as well as volunteering. Whiteford (2010:13) adds that employment initiatives should increasingly be founded on individually based training which often leads to the attainment of qualifications and subsequently to employment.

Although providing of employment is seemingly a noble and strategic service, Chambers (2013:5306) presents a contradictory view expressing that according to his study, higher monthly income was consistent with a greater likelihood of using emergency services based on the speculation that homeless individuals may have been engaging in risky behaviour such as alcohol and drug abuse after receiving income. Ferguson et al. (2012:386) on the other hand argues that the increased substance abuse is associated with unemployment as individuals who consume substance tend to lack the discipline to look for or maintain employment. The presentation of the contradicting views is an indication that services should be subjected to contextual research of the characteristics of the client base within a specific environment.

Whiteford (2010:13) submits a model for using employment as a pathway out of homelessness known as the *Work First Model*. This model priorities a shift from welfare to work through access
to sustainable employment paired with private rented housing thereafter followed by promotion of social enterprises. Whiteford (2010:13) further emphasises the need to shift the atmospheres of shelters from “ghettos” to institutions of excellence plus the personalisation of services. He states that personalisation of services allows for the provision of welfare on the premise of increasing homeless people’s control over available resources.

2.3.4 Effects of homelessness

As a result of the prolonged exposure to harsh living conditions, homeless persons are prone to “high levels of physical, emotional, and mental health problems, including depression, suicidal behaviour, post-traumatic stress disorders, and conduct disorders” (Altena, Brilleslijper-Kater, & Wolf, 2010:638). Shier, Jones and Graham (2014:40) in addition indicate that homeless people face stigma because of their social status. Attached to this stigma is the negative influence on their emotional wellbeing and their ability to reach out for assistance in the form of access to resources and services within their community. Consequently, as a means of survival and dealing with stigma homeless people engage in “high risk” activities such as substance abuse, petty crimes, drugs and prostitution (Altena, Brilleslijper-Kater & Wolf, 2010:638; Meanwell, 2012:73).

2.3.5 Initiatives for re-integrative service provision

Dykeman (2011:34) expresses that despite the numerous models towards explaining and eradicating homelessness, all models emphasise the need to cater for basic services that equip individuals to escape from homelessness in the future. In a study conducted with homeless youth in the United States on factors that influenced them to leave the streets, Raleigh-DuRoff (2004:565) highlights that the support of family and friends, compassion and support from organisations providing uplifting and skilling programs were central to their rehabilitation. In light of the above, Ravenhill (2008:11) in his study found that homeless youth define themselves through feelings and experiences of warmth, comfortability, love and family.

Thompson et al. (2006:35) postulate that agencies providing services to the homeless should adopt strategies that are proactive by offering assistance in initial stages of homelessness before the homeless culture is instilled.
Further, it is advised that services to the homeless should be adequately comprehensive in addressing the unique and priority which include “adequate shelter, food, clothing and health care services” (Thompson et al., 2006:35). This could be done through empowerment at both individual and institutional levels, long term focus on skill building (vocational training) and job readiness training to facilitate and foster independent living (Thompson et al., 2006:35; Altena, Brilleslijiper-Kater & Wolf, 2010:638). In essence, all homeless interventions should ensure that they take a holistic approach to dealing with homelessness which entails individual, social and institutional interaction.

Parsell (2011:334) expresses that charitable organisations have focused on providing clothing, blankets and food but seldom focus on relationship building. He further states that there are very limited examples of traditional outreach services that are run by the state in collaboration with other organisations that have led to exiting of the homeless cycle and moving into permanent accommodation (Parsell, 2011:335). He postulates that health and specialist services are government funded with paid employees carrying out services around substance abuse, mental health, legal advice and welfare services. NPOs face funding problems hence their limited ability to have innovative services (Parsell, 2011:335). It is suggested that ad-hoc bottom up services can sometimes reinforce and perpetuate homelessness thus reinforcing the importance of using the homeless as champions of their own development as supported by this study (Parsell, 2011:335).

A number of initiatives and programs have been implemented around the world to curb homelessness as it is an undesirable state of being. Parsell (2011:337) challenges that notion by stating that an individual is entitled to the right of being homeless further explaining that some homeless people refer to the streets as home and they associate the streets with a sense of belonging (Parsell, 2011:338). In line with the above, Parsell (2011:338) concludes that services should be rendered in a manner that understands the priorities of homeless persons and the context in which these priorities are made.

2.4 Summary

The chapter presented the United Nations Universal Declaration of Human Rights as the
underlying international legislation supporting the need for service provision for the homeless. Emanating from the declaration was the adoption of principles that guide the South African constitution which serves as the chief legislation that necessitates the provision of services for disadvantaged groups such as the homeless. It was established that South Africa does not have a legislation that directly speaks to the homeless. The adopted theoretical framework consisting of the social development model, and principles of the human needs approach, the capabilities approach and the people centred development were discussed all emphasising that central to human development was the need for people to be protagonists of their own development. Further the chapter provided a contextualisation of homelessness discussing the following, types of homelessness that have been identified by previous studies, the cause of homelessness, the experiences of homeless persons regarding food, shelter, health care services and employment as presented in other studies and in conclusion recommendations for re-integrative service provision.
CHAPTER THREE

METHODOLOGY

3. Introduction
This chapter focuses on the research methodology used for this study. It provides a presentation of the research design, population sample, data collection tool, data analysis method, data verification and limitations of the study.

3.1 Research Design
This research study adopted a qualitative exploratory methodology to explore accounts of participants’ perceptions and experiences of homelessness. In-depth interviews with a semi structured interview schedule were conducted to ensure that the research provides an extensive presentation of the perceptions and experiences of participants (Marshall & Rossman, 1999:60; Babbie & Mouton, 2001:270). Creswell (2013:4) describes qualitative research as an approach that seeks to explore the meaning people ascribe to social problems. A qualitative exploratory design was chosen for this study as it allowed for the exploration of the social reality of participants in a manner that allowed participants to give rich detail of their experiences in their own words. This added value to the data collected. In adopting qualitative research for purposes of exploring experiences, Marshall and Rossman (2011:91) state that an exploratory research design allows for the capturing of multiple realities. The authors add that meaning cannot be understood unless one is exposed to the emotions, thoughts and beliefs of participants. To obtain these objective inputs, it also needs to be a natural setting and a face to face interaction for deeper perspectives to be identified (Marshall and Rossman, 2011:91). Further, the face to face interactions within participants’ natural surrounding allow them to freely express themselves. In line with the above, qualitative research allows for the flexibility of data collection in real time in an instance where new information emerges. The collection of data is not limited to the available questions and
participants can be guided and redirected by the researcher which is not possible with other research designs. Exploratory research also allows for the capturing of multiple perspectives which may not be accurately accounted for in quantitative methods which tend to include preset variables. These principles of qualitative research were all integrated into this study.

3.2 Population and Sampling

3.2.1 Population
The identified population for the study was homeless people who were beneficiaries of Khulisa services streetscape intervention programme as well as beneficiaries of the Carpenter’s Shop an affiliate service provider.

3.2.2 Sampling Strategy
A purposive non-probability selection of participants was implemented. de Vos et al. (2011:392) describe this type of sampling as judgement sampling based on the understanding that the sampling is dependent on the discretion of the researcher. The selection was informed by what the researcher determined as “elements that contained the most characteristic, representative or typical attributes of the population that served the purpose of the study best” (de Vos et al., 2011:392). The research included nine beneficiaries of Khulisa services who were current and past beneficiaries of their programmes and six beneficiaries of the Carpenter's shop which is an affiliate to Khulisa through referrals. The nine homeless participants from Khulisa were chosen based on their affiliation to Khulisa through their participation in their streetscape program. The beneficiaries from Khulisa were interviewed according to their availability at one of Khulisa’s garden projects site in the city centre where the interviews for the study were conducted. The engaging of beneficiaries from the Carpenter's shop was through the referral of Khulisa as the sample size from Khulisa was insufficient. The expansion of this sample size led to six participants being added from the Carpenter’s shop, and they were selected as they are recipients of services from the Carpenter's shop as referred by Khulisa and more importantly their willingness to participate in the study.
The Carpenters Shop

The Carpenter’s shop is a registered NGO based in Cape Town whose mandate is to serve homeless and vulnerable people. The majority of their beneficiaries are homeless people based in Cape Town’s city centre. Their services include social care which is inclusive of counselling, screening tests and advisory services, limited medical care, temporary residential accommodation, skills development training and enterprise development (The Carpenter’s Shop, 2017). The temporary residence provided is for men who have recently acquired employment and are able to leave the streets and pay a nominal fee for accommodation. Their skills development initiatives include training on job readiness, life skills, computer literacy, financial literacy, and intensive social care (The Carpenter’s Shop, 2017). The Carpenters shop also aims to reunify clients with their families where these possibilities exist.

Khulisa’s Streetscape Program

Khulisa’s streetscape program seeks to create employment opportunities for chronically homeless persons by engaging their abilities to work rather than giving them handouts (Khulisa Solutions, 2016). The initiative further seeks to demonstrate that homeless people are highly motivated to work. The project focuses on skilling beneficiaries with gardening skills, as well as soap making and sandwich making skills which are part of the organisation’s basic skills development activities. When possible self-defense and computer classes are also provided. At its inception, the streetscape programme provided employment in partnership with the Expanded Public Works Programme (EPWP) run by government but moved to long-term employment through gardening projects. A limited number of homeless beneficiaries were chosen to participate in the gardening projects and some of these persons made up the participants for this research.

3.2.3 Data collection Approach

In depth face to face interviews were conducted based on the premise that face to face interviews in comparison to other methods provide a platform to engage in rich detail on the knowledge and experiences acquired by the participants in their day to day living. Face to face interviews provide a platform for immediate clarification and probing into participant responses which forms the core
of qualitative inquiry (Marshall & Rossman, 1999:105; Brewerton & Millward, 2001:70). Further, face to face interviews allowed the researcher to explore how participants reached the opinions and assumptions they held, thus giving the researcher a better understanding of the information acquired.

3.3 Data collection tool
A semi-structured interview schedule with thematic open ended questions was used for the study. The structure of the interview served as a tool for setting a uniform blueprint for acquiring information (Ritchie et al., 2014:149). The researcher made the questions clear and easily understandable and provided clarification where it was necessary.

3.4 Data collection apparatus
With the consent of participants a digital audio recorder was used to record the interview. The apparatus allowed the researcher to accurately capture information as well as engage in the interview fully without reservation.

3.5 Data analysis
Mouton (1996:161) defines analysis as the “resolution of a complex whole into its parts”. In this regard data analysis can be understood as the scrutiny of an array of information so as to bring about a comprehendible arrangement of specific variables. An 8 step data analysis method as adopted from Tesch (1990) cited in (Creswell, 2009:186) was implemented. The steps are as follows

**Step one:** The researcher went through all the gathered data so as to get an in-depth understanding of the scripts. The researcher had structured the questions using the data collection tool that was mentioned earlier in a manner that would allow for data analysis to be guided. The analysis was centered around the different sections of the questions on shelter, food, healthcare and employment as per the purpose of the study.
**Step two:** Moving from one script at a time, the researcher listed topics that came to mind in the margins as the script was being read. With these guided sections, the identification of the emerging themes became easier.

**Step three:** After going through several scripts, the researcher made a list of all identified topics using one column for each script on a single sheet. All columns were then compared to each other and thereafter, similar topics were grouped together. They were divided into columns with headings that represented major topics, unique topics and additional topics.

**Step four:** In this step, the identified topics were abbreviated into codes. Thereafter the researcher went through each script and placed the abbreviations next to each appropriate section for example *SH*-Shelter, *HT*-health, *EM*- employment, *FD*-food. In addition, the researcher was also looking for new emerging topics that were not necessarily within the scope of the identified topics under investigation. These emerging topics were issues of race and police brutality and were areas that the researcher had not anticipated but relayed by the participants. The emerging of such new topics called for noting down of ideas that were needed; which are referred to as analytic memos which Tesch (1992:142-145) highlights as necessary.

**Step five:** The researcher then found the most descriptive words to use as topics for categories and grouping those that were related. In the same process, the researcher looked for sub-categories as guided by Tesch (1992:142-145) who states that the group should be between 20 -50 categories.

**Step six:** Final decisions on abbreviations were made for each category and were placed in alphabetical order to avoid duplication and to identify any repetition of abbreviations.
Step seven: All data falling into each category were placed together and a preliminary assessment was done through looking at all data under each category separately. Research questions were be used as guidelines to help discard irrelevant information.

Step eight: Where the researcher saw fit, data was recorded so as to ensure clear analysis of the same dataset.

Data verification

Data verification as stated in de Vos et al. (2011:419) is based on establishing the “truth” which according to Lincoln and Guba’s (1985) is based on the constructs of credibility, dependability, transferability and confirmability.

Credibility

Credibility is ensuring that the research measures what it was meant to measure (Shenton, 2004:63). de Vos et al. (2011:419) describe credibility as the process of ensuring that the results of the research give an accurate reflection of the views and experiences of the participants. Shenton (2004) suggests the use of triangulation, frequent debriefing and peer scrutiny can be used to ensure credibility. To warrant the credibility of the study the researcher used an audio recorder as a means to ensure the accuracy of the data gathering process. The frequent debriefing and peer scrutiny as advised by Shenton (2004) was implemented through regular consultation with the researcher’s supervisor whose mandate was to provide academic guidance and insight into the research project (Shenton, 2004:63).

Transferability

Transferability refers to the extent to which findings of the research can be transferred from one case to another (de Vos et al., 2011:420). In principle transferability is the extent to which findings of a research project can be generalised. Transferability of this research is not possible. However, the nature of the research sample encapsulated an assortment of experiences which provided an in-depth reflection of the sample of people studied.
Dependability

Shenton (2004:71) describes dependability as the processes through which a study is accurately recorded so as to allow future research to obtain the same results. Babbie and Mouton (2001:278) explain dependability as the ability of the study carried out to produce the same results if carried out with the “same or similar” participants within the same environment or context. Babbie and Mouton (2001:278) state that dependability and credibility are intertwined. As a means to account for the two concepts, they argue that an inquiry audit can be carried out. The enquiry audit investigates the data collecting procedure and the process that was followed in interpreting the findings in order to attest that the findings were indeed authentic. The dependability of the study was assured through the recording of the research’s research process as well as the availability of transcripts and recordings of the data collected.

Confirmability

Confirmability is defined as the ability of a researcher to be objective (de Vos et al., 2011:421). The researcher in this regard was obligated to ensure that her experiences, perceptions and opinions were not presented in the findings of the research. Instrumental to the warranting of the confirmability of the research findings is the availability of transcripts as means to give detail to the process used to conclude the findings of the research. Jansen cited in Given (2008:113) expresses that confirmability simply put is the extent to which the results of a study are based on authentic expressions of the participants and not the researcher's bias. Jansen cited in Given (2008:113) further states that to guarantee confirmability of the study, the researcher is required to report his or her biases in order for them to be accounted for. Furthermore, to counter the expressed biases the researcher is to apply the “appropriate qualitative methodological practices to respond to those biases” (Jansen cited in Given, 2008:113). Based on the above proposed measures for confirmability the researcher expressed any identified biases on the subject and in addition applied the methodological practices required to counter those biases. These included supervisor consultation and cross checking of all research tools used as well as deliberate objective analysis of data gathered.
3.6 Limitations of the study

Limitations in research refer to those concerns that have been identified as possible shortcomings of the research undertaken (Marshall & Rossman 1999:60; Babbie & Mouton, 2001; de Vos et al., 2011:422; Silverman, 2006:43)

Population and sample: The sample size of this research was nine participants who were homeless and current and past beneficiaries of Khulisa’s programs and 6 homeless who were beneficiaries of the carpenter shop. The size of the sample is limited especially as indicated earlier, that an estimated 7 483 homeless people live in Cape Town. However, the diversity of the participants and their periods of homelessness within different contexts coupled with the use of qualitative approach to the study allowed for an extensive exploration of the subject of homelessness. No language barriers were experienced during the data collection process as all participants were able to express themselves in English. Participants would occasionally express some terms in Afrikaans and then translate it to English themselves.

Data collection Apparatus: Silverman (2006:47) challenges the reliability of using transcripts from video or audio recorded interviews expressing that transcriptions do not convey participant’s facial expressions or body language. In consideration of the above, the researcher ensured that she took notes when interviewing participants, further the researcher looked out for conflicting body language or facial expressions and probed into statements that contradicted with the body language exhibited. The researcher paid close attention to the intonation and vocabulary used by the participants when analysing the data collected.

3.7 Summary

This chapter presented the methodology adopted by this research to ensure objective and quality research results. An elaboration of the population sample, data collection process, data analysis and limitations of the study was given. The study was based on the use of a qualitative exploratory research approach. The sample used consisted of 15 homeless persons who were beneficiaries of
Khulisa services as well as the carpenters shop an affiliate to Khulisa services through referrals. A semi structured interview schedule was used in the administering of 15 face to face interviews. Tesch’s data analysis model was adopted for the study as described by Cresswell (2009:186). Further the chapter presented discussions on the surety of “truthfulness” of the study focusing mainly on the principles of, credibility, transferability, dependability and confirmability. This followed by a presentation of the limitations of the study. The following chapter will discuss the data gathered from the application of the methodology outlined above.
CHAPTER FOUR

PRESENTATION AND DISCUSSION OF FINDINGS

4. Introduction
The aim of the study was to explore the perceptions and experiences of homeless persons in Cape Town regarding service provision around four main themes which were shelter, health care, employment and food security in general, and in relation to the services provided by Khulisa. Chapters one, two and three provided the background as well as road map for gathering data in line with the above. This chapter focuses on the presentation of the findings and discussions emanating from the analysis of the 15 qualitative interviews that were conducted with the homeless persons.

Preceding the study were a number of assumptions regarding the interaction of the homeless with available services. The researcher assumed that homeless persons had difficulty accessing services intended for them. She also assumed that service provision for the homeless did not holistically cater for the needs of the homeless. The researcher also assumed that the perceptions and experiences of the homeless could influence the drafting of policies and the planning of programs to assist them. The findings presented in this chapter dispel and confirm some of the assumptions outlined.

4.1 Participant Profile
The study sample consisted of 15 homeless persons in Cape Town with a gender distribution of 14 men and two women. The ratio displayed by the participants in this study was a lesser reflection and indicator of the general South African homeless population that consists of more men than women (Roets et al., 2016:8; Meanwell, 2012:73; Cross et al., 2015:8). This skewed distribution of gender was evident during the data collection process and was exacerbated by the reluctance of potential female participants to be interviewed.

For purposes of providing a comprehensive picture of the diversity of the sample used for this study, participants were requested to provide biographical details which included age,
qualifications, period of time on the street as well as their current living arrangements. The participant’s periods of homelessness varied from 11 months to 27 years, with the average period of homelessness being 13 years. In identifying the current living arrangements of the participants 4 were living in shelters, 6 were living on the street, 2 were living with family, 2 lived in informal settlements and 1 lived where he worked. The table below provides a summarised profile of each participant.

Table 2: Participant profile

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Sex</th>
<th>Qualifications</th>
<th>Years on the street</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Interviewee A</td>
<td>46</td>
<td>Male</td>
<td>Matric Qualified HIV &amp; TB counsellor</td>
<td>3.5 years</td>
<td>Living in a shelter</td>
</tr>
<tr>
<td>2</td>
<td>53</td>
<td>Female</td>
<td>Standard/Grade 5</td>
<td>9 years</td>
<td>Living with family</td>
</tr>
<tr>
<td>3</td>
<td>34</td>
<td>Male</td>
<td>Grade 8/9</td>
<td>24 years</td>
<td>Living at place of work</td>
</tr>
<tr>
<td>4</td>
<td>25</td>
<td>Male</td>
<td>Grade 10</td>
<td>25 years</td>
<td>Living on the street</td>
</tr>
<tr>
<td>5</td>
<td>44</td>
<td>Female</td>
<td>Standard 6</td>
<td>25 years</td>
<td>Living with family</td>
</tr>
<tr>
<td>6</td>
<td>55</td>
<td>Male</td>
<td>Unknown</td>
<td>42 years</td>
<td>Living in a shelter</td>
</tr>
<tr>
<td>7</td>
<td>44</td>
<td>Male</td>
<td>Grade 8 -12</td>
<td>18 years</td>
<td>Living in informal settlement</td>
</tr>
<tr>
<td>8</td>
<td>29</td>
<td>Male</td>
<td>Grade 8</td>
<td>10 years</td>
<td>Living in shelter</td>
</tr>
<tr>
<td></td>
<td>Interviewee</td>
<td>Age</td>
<td>Gender</td>
<td>Highest Education</td>
<td>Duration</td>
</tr>
<tr>
<td>---</td>
<td>-------------</td>
<td>-----</td>
<td>--------</td>
<td>-------------------</td>
<td>----------</td>
</tr>
<tr>
<td>9</td>
<td>Interviewee I</td>
<td>54</td>
<td>Male</td>
<td>Unknown</td>
<td>27 years</td>
</tr>
<tr>
<td>10</td>
<td>Interviewee J</td>
<td>31</td>
<td>Male</td>
<td>Matric</td>
<td>6-7 months</td>
</tr>
<tr>
<td>11</td>
<td>Interviewee K</td>
<td>21</td>
<td>Male</td>
<td>Computer literacy course</td>
<td>11 months</td>
</tr>
<tr>
<td>12</td>
<td>Interviewee L</td>
<td>45</td>
<td>Male</td>
<td>Standard 8</td>
<td>4 years</td>
</tr>
<tr>
<td>13</td>
<td>Interviewee M</td>
<td>34</td>
<td>Male</td>
<td>Standard four</td>
<td>27 years</td>
</tr>
<tr>
<td>14</td>
<td>Interviewee N</td>
<td>34</td>
<td>Male</td>
<td>Matric</td>
<td>3 years</td>
</tr>
<tr>
<td>15</td>
<td>Interviewee O</td>
<td>30</td>
<td>Male</td>
<td>Matric</td>
<td>8/9 years</td>
</tr>
</tbody>
</table>

The journey to homelessness expressed by each participant revealed the power of economic wellbeing in influencing a person’s engagement with family and external social structures. Mcbride (2012:58) in her study found that homeless people identified unemployment as the biggest barrier to meeting needs. The findings of this study correlated with Mcbride (2012:58) showing that amongst a plethora of reasons for ending up on the street, the majority of the participants voiced that their inability to contribute to their families financially led to them being asked to leave their homes or them voluntarily leaving as a means to ease the financial burden on their families. With rampant unemployment the participants were still unable to go home with the exception of those who joined Khulisa in work activities and have a guaranteed monthly salary. Those participants who had been on the street all their life had as children grown up in the foster care system and when they came of age were required to leave the homes that had sheltered them. With no family and very limited economic prospects they turned to the streets some engaging in crime to survive a
phenomenon highlighted by Ferguson et al., 2012:387 who states that unemployment amongst homeless youth is associated with increased substance abuse and criminal activity.

4.1.2 Data presentation and discussion structure

The framework adopted for the discussion of the information gathered captures the researcher’s reflections and analysis of the main questions and objectives of the study as outlined in chapter one. The presentation of data is structured according to themes and categories identified in the analysis of the interview scripts. Below is a table that outlines the identified themes and categories to be discussed as constructed from the Tesch (1990 in Creswell, 2009:198) data analysis model.

Table 3: Data presentation and discussion structure

<table>
<thead>
<tr>
<th>Themes</th>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Experiences and perceptions of shelter</td>
<td>Defining homelessness</td>
</tr>
<tr>
<td></td>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td></td>
<td>● Knowledge about shelter and collaboration of services with social workers</td>
</tr>
<tr>
<td></td>
<td>● Shelters provide a haven</td>
</tr>
<tr>
<td></td>
<td>● Provision of employment and skills in shelters</td>
</tr>
<tr>
<td></td>
<td><strong>Weaknesses</strong></td>
</tr>
<tr>
<td></td>
<td>● Expensive shelter services</td>
</tr>
<tr>
<td></td>
<td>● Unequal Treatment</td>
</tr>
<tr>
<td></td>
<td>● Lack of support for upward mobility</td>
</tr>
<tr>
<td></td>
<td>● Poor treatment of shelter residents</td>
</tr>
<tr>
<td></td>
<td>● Failure to cater for families</td>
</tr>
</tbody>
</table>
2. Experiences and perceptions of food services

<table>
<thead>
<tr>
<th>Strengths</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Abundance of food</td>
</tr>
<tr>
<td>● Provision of stability and routine</td>
</tr>
<tr>
<td>● Friendly staff and nutritional food</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Poor shelter food services</td>
</tr>
<tr>
<td>● Provision of food services reinforces homelessness</td>
</tr>
</tbody>
</table>

3. Experiences and perceptions of health care services

<table>
<thead>
<tr>
<th>Strengths</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Free services and provision of medication</td>
</tr>
<tr>
<td>● Equal treatment</td>
</tr>
<tr>
<td>● Relationships with staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Need for identity documents</td>
</tr>
<tr>
<td>● Long wait for services and limited eye and dental care</td>
</tr>
</tbody>
</table>

4. Experiences and perceptions of employment services

<table>
<thead>
<tr>
<th>Importance of employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment history</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Strengths</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Opportunities for occasional employment</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Lack of services that help with employment</td>
</tr>
<tr>
<td>● Unequal work opportunities</td>
</tr>
<tr>
<td>● Discrimination</td>
</tr>
</tbody>
</table>
5. Experiences and perceptions concerning Khulisa

<table>
<thead>
<tr>
<th>Strengths</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Provides skill and a sense of partnership</td>
</tr>
<tr>
<td>● Provides avenues to employment</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Poor salaries</td>
</tr>
<tr>
<td>● Not well known</td>
</tr>
<tr>
<td>● Does not provide shelter.</td>
</tr>
</tbody>
</table>

Additional findings

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>● Race</td>
</tr>
<tr>
<td>● Equal treatment</td>
</tr>
<tr>
<td>● Upward Mobility</td>
</tr>
</tbody>
</table>

### 4.2 Discussions of findings

The presentation of the findings incorporates direct quotations which serve to retain the authenticity and originality of the participants’ views. The structure of the presentation of findings follows that of the table presented above.

#### 4.2.1 Defining homeless

The in-depth interviews conducted for this research project provided a platform to explore participant’s opinions and assumptions about being homeless and the challenges they face as a result. In this regard participants were asked to express what homelessness meant to them. Most participants described homelessness as hardship, survival, endurance, lack of support from family and friends as well as hustling.

“*Uhh see from my angle it’s like uh you are alone out there and you are trying to survive*“ (Interviewee F).

“*Homelessness for me it's like this, it's like most of the people call it like hustling*” (Interviewee H).

“*Struggling, it's all about struggling, umm not to be able to have the stuff that other people have*” (Interviewee J).
“...it's like trying to break free from a chain that's just keeping you back I tried to climb up the ladder but you keep falling down no matter how hard you try ...” (Interviewee K).

“...to have nothing, cause you can't have nothing when you stay on the street” (Interviewee N).

All of the above experiences can be associated with economic and social exclusion. The lack of supporting socio-economic structures leaves homeless individuals to their own means of survival, which seldom provide a pathway out of the state of homelessness (Makiwane, Tamasane & Schneider, 2010:42). The expression of isolation described by participants concurs with Ravenhill’s (2008:5) identification of alienation from social and structural bonds as a psychological indicator of homelessness. An analysis of the above perceptions through the lens of the human needs approach would suggest that the state of homelessness is indeed a display of unmet physical and social needs that affect the mere existence of any individual as well as the ability to relate to the environment in a manner that allows liberty and growth (Max-Neef, Elizade & Hopenhayn, 1992:199). In describing their experiences of homelessness further, one of the participants said:

“What does it mean to be homeless, for me is you don't have a roof over your head that is the only thing but not sleeping on the street you cover yourself and whatever, whatever, that's not homeless because you still have a cover you still have a roof over your head” (Interviewee O).

The idea that homelessness is simply the lack of covering or roofing highlights how some homeless persons may not identify themselves as homeless in contrast to the definition adopted for this study which viewed homelessness as the lack of housing encapsulating those individuals whose primary residence may be supervised facilities, transitional housing and those staying on the street in abandoned buildings (NHCHC, 2016). McNaughton (2008:7) explains that subjective definitions of homelessness contribute to the way in which homeless persons relate to services regardless of how their physical and social status may or may not distinctly fit into definitive categories of homelessness. The subjective perceptions of homelessness influence how homeless persons feel
services or individuals should relate to them (McNaughton 2008:7). For instance the expression of the interviewee above that explains that those homeless people who have some form of covering should not be considered as homeless suggests that services should prioritise individuals that sleep in the open air rather than those who have made some form of temporary covering.

4.2.2 Experiences and perceptions of shelter

The very embodiment of the issue of homelessness on the surface is around the lack of shelter. Some scholars have argued that homelessness is best tackled when the issue of shelter is addressed first. This has seen the adoption of the housing first approach also referred to as the housing first model by countries such as Canada and America (Gaetz, Scott & Gulliver, 2013:1). The provision of shelter is seen as a pathway to dealing with ailments that are associated with homelessness such as mental illness as well as substance abuse. In contrast there exists a staircase model (linear residential treatment) that focuses on a linear progressive model to housing with the aim of social reintegration (Houard, 2011:66). These two models are described to an extent in the nuances of the participant’s experiences with shelter services and influence how participants identified what they thought to be the strengths and weaknesses of shelter services.

Strengths of shelter services

Knowledge about shelters and Collaboration of Services

The main source of information on shelter services was said to be word of mouth by majority of the participants with the exception of a few who stated that they were approached by social workers or Cape Town Central Improvement District (CCID) officers who offered to refer them to shelters.

“I did stay with my son on the street and one of the social workers that found me with my kid and they asked me if, a lot of questions and they ask me if I want to stay in the shelter I said yes I think about my kid” (Interviewee F).

“yeah a lot of council people told me about the shelter, but I wasn't like taking note of it” (Interviewee K).

When participants discussed their knowledge of shelters they also touched on the collaboration of
services between social workers and shelters. It was expressed that collaboration between shelters and social workers was advantageous as it made finding a place within shelters easier. In addition it exempted those referred by social workers from paying shelter rates for a specified period of up to 3 months. The suggested limited dissemination of information on shelter availability by formal service structures coupled with inadequate shelter spaces as alluded to by the statistics presented by the CCT, arguably creates a scenario where those not informed by formal services are at a disadvantage because they are required to pay shelter rates from the first day, a requirement that majority of participants cannot afford.

“without pay it depends on who brings the person in, or you’ve got a referral letter from some where, Social development” (Interviewee F).

“yeah but it's better if you get referred to by a social worker” (Interviewee A).

Participants who had been on the street for more than a year were well versed with available shelters within the city of Cape Town. Their knowledge of shelters however did not reflect their use of shelter services. A majority of the participants as evidenced by the participant profile, did not use shelter services for various reasons which will be discussed under the weaknesses of shelter services.

**Shelters provide a safe haven**

Shelter services are designed to provide safety and be conduits for meeting basic needs such as food, hygiene and social integration (Wasserman & Clair, 2011:76). In expressing their experiences with shelters in line with the above participants described shelters as physical and mental havens where they could momentarily escape the reality of being destitute. Beyond the physical Wasmer (2005:2) describes shelters as a type of a home that can create an environment where the homeless can regain their dignity and identity.

“It provides temporary shelter it keeps people out of the cold it keeps people to be away from negative influences 24/7 and dangerous situations you can actually have moments when you can be quiet and still and focus on yourself and because you know that you are
going to have a bed you know that you going to be safe you know that is going to be a hot meals you know that there's showers you know that there is washing facilities so all that stress is now gone you can focus on something else” (Interviewee A).

“My experience there. It's more comfortable ...I can shower I have my privacy, so I feel more comfortable there I feel more I have more time to think and more time to have peace because on the street you don't have much peace so I have peace at least now and I have warm bed a warm meal I get full. I have a place where I can put my clothes ...So the shelter is an opportunity for me to get myself back together and see what God has for me” (Interviewee H).

The feelings expressed by the participants emphasise the significance of the elements of Max-Neef’s Matrix of fundamental needs. They bring to the fore the progressiveness of meeting basic needs. When one meets the physical needs of shelter, food and hygiene they are then able to move on to the satisfaction of other needs such as creation and leisure all of which contribute to the fulfilment for physical and mental wellbeing. According to Max-Neef, Elizade & Hopenhayn (1992:199) a setting which allows for the engagement in creation and leisure is one that allows for expression. The shelter according to these standards thus becomes an intimate space where one can be alone, an element valued by the homeless as evidenced by the quotes above. Further Max-Neef’s Matrix shows that a person’s identity is influenced by consistency, sense of belonging and everyday settings. The availability of shelters helps in the formation of identities which in turn influence their how they relate with social inclusion and exclusion.

**Provision of employment and skills in shelters**

Over and above providing safety and meals shelters were described as propelling individual development through skill enhancing programs and employment which sometimes could be used to subsidise shelter charges.

“..you might get in a couple of nights and sometimes if you’re lucky they will give you odd jobs at the shelter which means you would work to cover your bill” (Interviewee A).

“..a shelter it’s one of those places that actually you can grow yourself to a better level,
“you know what I mean” (Interviewee B).

“And you must clean the garden and there you get washing powder to do your washing and your kid’s washing, I learn a lot. I was also, I did learn about how you can do, how you can go and learn on a computer” (Interviewee E).

“There is also engineering courses that I have, there's also an engineering course coming up now so shelters is good” (Interviewee H).

The employment opportunities and skills offered by some shelters are aligned to the principles of the social development model which emphasise the promotion of wellbeing of individuals in tandem with economic development (Midgely, 1995:250) cited in Patel (2015:124). Economic development is one of the most effective ways through which individuals can be empowered out of the state of homelessness this more so with skills which they can use outside the cocoon of shelters. Smith (2015:10) expresses that individuals who live in shelters are less likely to commit survival crime presumably because of the support provided by shelters. The provision of skills development within shelters may contribute to the lowering of possible involvement in criminal activities after leaving shelters as individuals can use these skills to secure employment. As expressed in Mangayi (2014:215) the need for “development is synonymous with human aspirations for a better life”.

The advantage of working within shelters was expressed by one participant who explained that one of the shelters she had lived in would allow for participants to pay rent in arrears, on condition that they worked in the shelter and that their income contributed to the shelter rates.

“umm if you can pay off, then you can pay off, but the time of I'm off umm by my own work {work outside the shelter} and then I'm umm If I must go there five o'clock to go and work there by the other place, then I give...half of this money {salary from external work} and the others I give the end of the month if I get my real salary {salary from the shelter}” (Interviewee E).

The arrangement described by this participant shows shelters create employment within their premises and also create a channel through which individuals may be skilled in particular tasks.
The participant went further to describe the structure of this kind of shelter as one that provided linear progression towards financial independence and self-development. The following is a classic description of the staircase model as described by (Houard, 2011:66).

“If you want to go to your family you can go. But if you have your work then you can stay there and go to step 2....: step two is the other house where you there by that house you must cook yourself, must buy your own things and then they Step 3 and then they stepped four..the same like step two but step if your wages if your salary is good you go through all the steps then you can stand on your own two feet” (Interviewee E).

**Shelter service weaknesses**

In addressing the shortcomings of shelter services it was highlighted that expensive rates, poor treatment of residents, theft and the unbecoming behaviour of fellow residents were the major deterrents of shelter usage amongst the homeless.

**Expensive shelter services**

Participants argued that shelter rates were unaffordable especially because majority of the participants did not have full time or guaranteed employment. Participants argued that they could barely afford to pay R1 for meals. Hence paying R25 a day or an equivalent of R900 per month was virtually impossible and as a result they have no option but to remain on the streets. The prices of shelter services led to perceptions that shelter services were exploitative and were money making structures rather than entities that prioritised the needs of the homeless.

“For a local guy he just pay R25 a day and if you do not have the money everyday, where are you going to sleep? So they told me, it's not my own experience” (Interviewee G).

“... now the shelter here charge a thousand rand a month, and I don't even have one rand. If it wasn't for that dining service I couldn't have something to eat per day where will I get a thousand rand a month” (Interviewee J).

“uhhh You must pay for the shelter 10 rand a day so, I don't work it's not easy to have a ten rand” (Interviewee N).

The notion that shelter is based on one’s capacity to acquire a form of income recreates the socio-
economic circumstances that lead to homelessness. The need for capital further alienates homeless individuals from society as it reinforces the idea that they are not of use and cannot contribute to any society or their own personal well-being. The lack of financial wellbeing and its effects on social integration especially with family brings to the fore Sen’s ideology that the quality of an individual’s life tends to be measured by what they are able to achieve (Sen, 1999). This is reflected in the following descriptions of relationships based on income.

“If you are already battling in the township or wherever you live now you're coming home but you cannot contribute what are you going to do? I mean you as a person would you be able to take a sister in right now without her being able to contribute?” (Interviewee A).

“because if you don’t pay your parents or your family money they tell you, you don’t give them money, they don’t provide you for anything, because you don’t have money you can’t pay them so why would they sit up with you when you’re a big woman and you can sit up for yourself?” (Interviewee B).

“uhhohh you see when I lose my job as a security guard, my step father didn’t like me so much. So I think it's better to go out of the way of him. So I ended up in the street I was in a children’s home there” (Interviewee G).

Unequal Treatment

In light of what participants considered to be exorbitant shelter rates, a few expressed that the system was exploitative. They argued that shelters were not meant to be money making institutions. This observation is one that was also highlighted by Ravenhill (2008:30) who argues that service provision to the homeless may sometimes not bring about development as some stakeholders consider it a profit making venture and are in constant search for new ways to exploit the system. To elaborate on the manner in which shelters focused on money more than the provision of services they pointed out that shelters were more inclined to serving individuals who were pensioners, grant receivers or had disabilities, because of the funding provided by the state.

“if you are on a grant or disability grant or pension people tend to stay for years. Can you already see the imbalance?”(Interviewee A)
“They will take really a lot of people that can be getting disability just because they know that they gonna get some money you know what I mean the fees you know it’s not that you are going to struggle to get fee’s out of them” (Interviewee B).

“They should just change their attitude, they take people with grants” (Interviewee D).

“You see people are coming from the shelter and people are coming from the street they make more from these people here that stay in the shelter and then the people who come from the street he make loss from these people, that’s why I don’t want to stay in a shelter, but in the meaning you must pay the same money... what say.. what to say that for you? What to say that for you?” (Interviewee H)

“The shelter neh, if you ain’t got no work the people chase you away. If you gotta work, a nice work then they keep you” (Interviewee D).

Participants also added that shelters had food sponsors so they did not need to charge that much money.

“Remember that those people are not buying food with all that money that they are getting from the residents, there is a food that is coming from a social development in terms of assisting and helping to feed those people. On top of that as I said those people they actually apply to business Pick and Pay, you know what I mean so that they can get a donor and the donor does that, he does give them” (Interviewee C)

The perceptions expressed above illustrate that participants felt that services were simply there for financial gain rather than the interests of those that they are meant to serve. Cross et al. (2015:18) expresses that homeless individuals seldom have access to government grants as they are mostly limited to persons with disabilities, the elderly as well as child grants. In addition to the above participants alleged that shelter services as a means to retain funds kept the paperwork of old residents who had left the shelter, for the application of annual funding. They further alleged that shelter managers took donated resources for their own use at the expense of shelter residents. The financial funnel created by shelter rates brings about feelings of frustration and scepticism towards services and for some an element of hostility as they feel that services intended for them discriminate against them instead. The felt hostility toward service providers in this regard create
barriers in building fruitful relations with social surroundings and institutions, which is
counteractive to the fundamentals of human development that prioritises the need to nurture
relationships between a person and their surroundings (Max-Neef, Elizade & Hopenhayn,
1992:197). The negative emotions expressed by participants lead to negative perceptions of shelter
services which contribute to some homeless participants voluntarily not using shelter services.
Those individuals who do use shelter services build a consciousness around their financial standing
within the shelter and possibly a focus on comparing themselves to fellow residents with financial
support.

“…the files that are there the, those files can be printed over and over each and every
year you know what I mean, and because of government funds the shelter sometimes this
much money that comes from government and those kids are no longer there in the shelter
but then the files” (Interviewee B).

“A lot can be improved because here by District Six I'm going to tell you one thing the
people there the managers I said they're the one there I saw how they take bags and bags
of right food they take it home but if a guy on the street comes and I ask for something they
just say no we cannot” (Interviewee O).

The comments above illustrate the issue of inequality in service provision based on access to
income. One could argue that unequal treatment amongst the homeless exacerbates the cycle of
homelessness as those who have no access to income will consistently have less chances of
acquiring shelter. This inevitably diminishes the likelihoods of the realisation of holistic wellbeing
or the satisfying of needs influenced by access to shelter such as privacy and protection.

“If those people decide okay we give you three months’ time, you can stay for three months
and then after three months you are out what you going to do, you are coming back to the
street you see. So you must always be prepared for the next step, where to now or where
are you going to live” (Interviewee F).

The views expressed similarly demonstrate the root of the perception that homelessness is a
perpetual cycle, with seasonal moments of meeting basic needs.
Lack of support for upward mobility in shelters

The staircase model of homeless reintegration emphasises the equipping of residents for economic responsibility and independence through various stages (Löfstrand & Juhlia, 2012:48). Participants pinpointed the limited adoption of the staircase model by stating that they were not supported by the system to exit homelessness. These perceptions were expressed by majority of the participants, with the exception of two participants who had in the past resided in shelters that adopted the staircase housing model. The perceptions of participants expressed depict services as lacking in basis of the social development model which are to promote progression of planned change towards well-being especially economically (Patel, 2015:124). It was expressed that shelters that did not provide developmental programs did so deliberately so as to ensure the continuous use of shelter services by the homeless. This inevitably contributing to the systematic orchestration of the homeless cycle. This view on the exploitative nature of services is in tandem with the Parsell’s (2011:337) arguments that services can at times reinforce and perpetuate homelessness for funding purposes. The lack of programs to aid the homeless presents cases in which the homeless are perpetually dependent on the services for survival and never engaging in any form of self-development. This picture is depicted by the lifestyle adopted and expressed by some the participants who stated that they were asked to leave shelters during the day which resulted in them being idle in parks to pass time. Understandably this may be a way of encouraging residents to look for employment however this is not the case for some homeless people.

“In district six. In wood stock. It’s where by you can stay inside the premises, like inside the premises but can’t enter the rooms until a certain time. Like actually you can be feeded all your meals per day ... you just has to get out even if you are working or not, even like when you paying your shelter fee. They only feed you twice a day but they still want their money fully at the end of the month....., like six o’clock in the morning then at six o’clock in the evening what do you expect what is that person eating during the day. (Interviewee C).

Those participants who had experiences of staying in a shelter described that shelters only provided the bare minimum which was accommodation and food for the evening and early morning with exception of some shelters that provided lunch. When asked what activities participants engaged in
on a daily basis during the period they were asked to leave the shelter, these were their responses.

“The idea is to get people off the street, so now 8 o'clock you must be out, so where are you going to go? back where you come from. So now you go back to the bad elements and the influences and the drugs and the what what and then tonight you come back. Now tonight to come back to the shelter because you went to the bad stuff you might come back home drunk or high so what happens? You get thrown out” (Interviewee A).

“During the day we sit in the gardens we’re like squirrels” (Interviewee B).

“..You have to be there at 4 or at 4:30 and then the evening and then you get out say about 9 o'clock in the morning to go to find something to do. They don't give you something to do you have to go and find by yourself. You can go and lay in the park the whole day or you could try and find actually something that's going to be official to you” (Interviewee C).

“I need to leave in the morning at the shelter and I need to be back at 5 o'clock and then I can come out until 10 o'clock again so during the week what I'm doing I'm just actually just hustling just you now meet up with friends and going to people where I can get money” (Interviewee H).

The participant’s responses clearly illustrate a gap within service provision in line with the ethos of social development or people centred development which to empower people to be protagonists of their own development (Max-Neef, Elizade & Hopenhayn, 1992). Evidently the homeless are not empowered with skills to make decisions or take steps towards self-dependence. The lack of day spaces or programs within shelters allows for an environment that easily breeds engagement in crime and further leaves the homeless vulnerable to the elements as well as abuse from the public during the day. Johnsen, Cloke and May (2005:290), Wasserman and Clair (2011:76) state the above consequences of a lack of day centres are also issues associated with unemployment. Participants expressed the need for day activities that would increase their potential for employment as well as expand their employment options. The notion of homelessness as a structurally orchestrated phenomenon is a recurrent issue under themes of food and employment.

Poor treatment of shelter residents
Wasserman and Clair (2011:76) and Johnsen, Cloke and May (2005:324) explain that homeless people’s use of services is influenced by the extent to which they feel welcome and are at liberty to interact with services as well as staff. This observation was reflected by the views of participants who revealed that because they felt disrespected and undermined by shelter curators they were unwilling to use shelter services.

“umm but sometimes they still treat people that are homeless like people that doesn’t have any brain power like they behind, sometimes they treat people who are mature and old like children ... you know the tone of your voice the way that they would give instruction so the way they would handle situations is almost like a parent talking to his child” (Interviewer A).

“Shelter, the people don't want to stay in a shelter because the people that is employed by the shelter treat them like dogs I'm honest with you” (Interviewee O).

“..and the people there don’t have respect for another people” (Interviewee D).

In expanding the issue of poor treatment of residents, participants explained that shelters were sometimes inflexible in their approach of dealing with residents. One participant stated that his job required that he work night shifts and as a result he arrived at the shelter in the early hours of morning but was still required to leave the shelter at the assigned exit time. The lack of flexibility on the part the shelter coincides with what Wasmer (2005:324) described as the authoritarian approach adopted by service providers which lead to the resistance of services by the homeless.

“How to make it better the people must respect the other people, I don’t know. If a man sleep they must respect, If a man work night shift they must respect. I was working night shift. If I come in the night there, in the morning there they don’t let me sleep that’s why I leave the shelter” (Interviewee D).

The notion that most shelters are not structured in a way that responds to employment needs is expressed by Shier, Jones and Graham (2014:40) who explain that challenges arise in shelters for persons trying to maintain employment. One of these challenges was the failure for shelters to cater for people who work night shifts. These persons are eventually faced with dilemma of choosing
between maintaining a job or staying in the shelter. The experiences expressed by participants above show the lack of prioritisation of the development by some services providers. This analysis is based on the principles of the overall model of social development which defines development as planned change toward social and economic participation of those socially excluded (Patel, 2015:124) With specific reference to the capabilities approach (Sen, 1999) which highlights freedom as a form of development the inability of participants to engage in employment without having repercussions of being unable to have a place to rest is contrary to the expectation that services aid in capacity building towards personal development.

**Failure to cater for families**

Shelter services in South Africa are predominantly characterised by gender separation. This structure contributes to the estrangement of homeless families as they are unable to live together (Seager & Tamasane, 2010:69). The issue of gender divided shelters was also highlighted by participants as one of the weaknesses of the system. One of the participants adequately describes the hardships that come with the separation of families. It was also mentioned that most shelters lacked facilities to cater for persons with disabilities.

“…they don't take people that's got disabilities because it’s problematic because most shelters don't have facilities for people with wheelchairs” (Interviewee A).

“... If you are married and have a child there is no way that you can go and live in the shelter together, most shelters do not take children. so we are now sitting with the situation where families stay on the street together with the baby. Having a baby on the street is illegal so because of the fact that nobody creates a safe space for them they are now violating and breaking the law. And that child can be taken away by social services. Now what options have they? If you are married with a husband and something goes wrong and you've got a child can you imagine it would be like during apartheid years the woman stays in the homeland and the men go and work in the mines so my husband is going to live in Cape Town and I'm going to be in Observatory with my child” (Interviewee A).

The views expressed above sufficiently present the perpetuation of social exclusion of homeless persons. The current structure of shelter services also depicts a lack of investment in spaces that
provide a conducive environment for family integration. Tsai, Mares and Rosenheck (2012:427) make the point that holistic well-being is greatly influenced by one’s ability to belong and identify as an accepted member of society. The separation of one from society and family as the closest reflection of it, counteracts the existence of shelters as institutions that aid in safeguarding the well-being of homeless persons. The capabilities theory (Sen, 1999) identifies development as the removal of “unfreedoms” that prevent individuals from leading a life they value. In this case “unfreedom” is in the form of confining social conditions which inhibit individuals from living a life that they value.

**Rehabilitation as counter active development**

Rehabilitation sets the foundation for homeless persons to engage in their communities and society at large. It is a means of capacitating them to contribute to decisions that affect their personal and external development. This is a hypothesis reflected by the street people’s policy which through its programs seeks to rehabilitate homeless persons into their communities and families or alternatively to a new community structure (Street People Policy, 2013:13). The concept of rehabilitation however is not seen in the same light by some homeless people.

“they have this things where they try to take people back home ask yourself why have they left home? Did they do disturbing things at home or did the family... You know it's easy anybody can say you can go back home. What are you going back for?” (Interviewee A).

Some participants although not asked about their emotional or relationship state with family were keen to express their feelings. These experiences included feelings of abandonment and rejection. The readiness to share these feelings without being asked suggested a yearning to be heard. One of the participants expressed in their story the possible reasons for resistance of rehabilitative initiatives.

“... It’s not like the street people want to be on the streets, it’s how they the family treats them it’s very badly sometimes, throw you away out of their homes they tell you you’re useless and that hurts the most” (Interviewee B).

“I’d ask them to go home because they some of them got parents that they can live with,
but they don’t want because of the parents that treated them badly” (Interviewee B).

The statements above highlight the human need of affection which encapsulates the need for family and relationship as identified by the human development approach (Sen, 1999). Raleigh-DuRoff (2004:565) state that central to rehabilitation of the homeless is the support of family members which echoes the sentiments of the human development approach captured in the human development matrix (Max-Neef, Elizade & Hopenhayn, 1992).

**Lack of sufficient monitoring of shelter residents**

The poor behaviour of fellow shelter residents was also identified as a cause of concern when using shelter services. Most of the participants argued that they preferred to sleep on the street rather than in a shelter because of theft and lack of respect amongst residents. Kydra and Compton's (2009:145); Tyler, Akinyemi and Kort-Butler (2012:1344) similarly highlight negative experiences faced by the homeless in their studies, stating that some homeless people described shelters as spaces characterised by violence, theft and drugs. The prevalence of these negative experience breed feelings of scepticism, mistrust and fear.

“According to the people they tell me... sometimes the other guys are drunk and smell, smoking...,” (Interviewee G).

“... sometimes they are stealing and they don’t wear the clothing inside they taking it outside. Dirty or not dry, some they go sell it just like that, why? If I know I can’t afford this jacket then why must I steal it from you? I can rather ask...” (Interviewee F).

“They broke my closet I think twice, I had a brand new pair of good shoes they stole that also” (Interviewee L).

“. I was staying in a shelter for four months that was last year and my stuff is run, my locker is open there is very they stole in the shelter then prefer not to stay anymore in the shelter” (Interviewee D).

The lack of security creates wariness towards the use of shelter services as shelters are considered
to do more harm than good for some homeless persons. It should also be considered that homeless people do not own many belongings and that which they own, is of high value to them. Consequently, if going to a shelter threatens the security of the little they own, they justifiably would rather sleep on the street as evidenced by the statements above. The reaction of participants to the lack of security and ability to be at ease in their residence highlights the importance of the meeting of fundamentals of leisure and protection. The meeting of these needs is thus vital to the integration of the homeless in a social system that can aid them in their development (Max-Neef, Elizade & Hopenhayn, 1992).

Consequences of lack of shelter
In light of the strengths and weaknesses of shelters discussed the absence of shelter or the choice to sleep on the street has dire consequences such as vulnerability to disease, discrimination and police brutality. Those participants who slept on the street or loitered during the day expressed that they were targets of security guards, police and city authorities.

“PK {charge laid by police for trespassing} is not sleep on the street on the pavement they catch you (slaps hands) they clap you and take all your stuff...In the night last year, last year neh 2014, I was sleeping neh, then I just see the cuffs” (Interviewee D).

“you see that guy standing there {CCID officer} you see that guy he stands there and he watches us the whole time down there if a car that is breaking into now they want to come and it is all of us that's in the road you see they wake up those people put a clap on your face why? four o'clock 2 o'clock where you supposed to go in the time in the time of the night...They arrest you and then you have to go to community Court then they charge you. You have to clean the road for 4 hours, Why? I did nothing at all, we slept” (Interviewee O).

“Go away but where to? you don't know maybe it's raining we must move from there so it's bad” (Interviewee N).

Cross et al. (2015:8) explain that city authorities are faced with the dilemma of prioritising economic and business interests versus the agenda of the homeless. They argue that based on their
study of South African cities, city authorities were more inclined to adopting a hostile and
disaffectionate approach to dealing with the homeless. This approach mainly executed through the
criminalisation of homelessness and the use of police. Speak and Tipple (2006:172) suggest that
homeless people are confined to the borders of public consciousness because they are perceived as
violators of social norms and their presence offends public sensibilities. Interestingly this approach
taken by authorities resonates with the previously mentioned deviance theory which considers
homeless persons as conscious and deliberate actors against social norms and is reflected in this
particular response (Reeve, 2008:52). The above perception translates into the homeless being
excluded in policy making and the implementation of effective solutions that cater to their needs
(Speak & Tipple, 2006:172). The approach taken by the city reinforces the experiences of social
exclusion and discrimination faced by the homeless as it does not address the needs of the homeless
or the causes. In addition to the discrimination and brutality participants explained that they were
faced with the constant loss of valuables such as identity documents as well as medication during
the raids carried out by authorities.

“now here comes the problem people that’s got diabetes or whose HIV positive or must
take medication on a regular basis where do you put your medication. And if your bag gets
taken the trauma you have to go through, because now you have to go to the police station
and you are HIV positive or you've got TB you have to now disclose this because you now
have to make an affidavit so you lose your privacy you now have to disclose and you might
be positive and you have never told your family so you have to stand in front of a stranger
and explain to him you know” (Interviewee A).

The failure to address homelessness in a more sustainable manner leads to the recurring issue of
homeless people returning to the places they were evicted from. After the raids and brutality
homeless people are still faced with the reality of being roofless and not having a place they can
go to.

“yes and the law enforcement there, destroy our stuff, take our stuff, but the sooner they
go the people make a plan two” (Interviewee G).

“was sleeping from bookaap sometimes a sleeping in Kloof Nek because there sometimes
the law enforcement they banned us from some places not to sleep. you cannot sleep long
at certain places you have to go from here to there here to there you know maybe you are 4 months here...you cannot stay in one property you have to move that is how you live your life you have to live your life here outside on the street you cannot be in one place for 10 years after a certain time” (Interviewee H).

The above are fitting examples of unfreedoms identified by Sen (1999) that come in the form of injustices in social arrangements which highlight the need for transformation of the approach of existing structures. The findings in this regard may assist in addressing the first step of Khulisa’s (2016) five step approach which is to focus on the system that contains the problem.

4.2.3 Experiences and perceptions concerning food services

Strengths of food service provision

Abundance of Food

Findings revealed that there were numerous options for obtaining food through formal services, citizen benevolence and “skuraling” a term used by participants to describe hustling (begging, looking through bins, and exchanging crap material for money for food). In a previous study of the homeless carried out in Pretoria it was expressed that food was a scarce resource, with the homeless eating only 3-4 times a week (Aliber et al., 2004:7). Those findings contradict that of the experiences of the homeless in Cape Town who expressed that there was an abundance of food on the street. Some went as far as stating that it was almost impossible to go hungry on the street.

“It’s a rand a day, good food, here we get fruits, we get food, we get bread. It makes you full you can over a 2nd time again if you got another rand and they give you...” (Interviewee B).

“for soup. I normally go to there {service dining room}, I just come here, because we collect papers my friends collect papers and plastic and skurrel, there is food there, everyday there is, too much food there is now there” (Interviewee G).

“umm look, there is a few soup kitchens, where you get food for free so you don't have got no reason to go hungry” (Interviewee L).

“When I don't have a token for food it's bad ... I don't have other hopes where can I get
The availability of food services reduces the need for engagement in criminal and sexual activities for daily sustenance, a correlation pinpointed by Vogenthaler, Kushel, Hadley, Frongillo, Bangsberg and Weiser (2013:1687). They explain that the limited access to food by the homeless leads to involvement in crime or sexual activities as means of securing income.

Participants displayed a wealth of knowledge regarding the different places to get food on different days. The main food service provider mentioned by all participants was the service dining room where participants could pay R1 for a meal. Alternatively, they could get a coupon from the Carpenters Shop after taking a shower there in the morning. When asked how they obtained this information about the whereabouts of food, they highlighted that homeless people shared information with each other as the norm. The value of sharing information exhibited the social dynamics of relational street culture (Stablien, 2011:293). Stablien (2011:293) explains that homeless people are more inclined to rely on each other for basic survival needs. Their relationships further help in the replacement of emotional, structural and family support that they have rejected or do not have access to. The sharing of information highlights the need to form an identity with the social settings of homelessness. This helps in the creation of relationships that allow one to belong and operate within the norms and values upheld by those in the same social circles; a need for development as identified by Max-Neef (Max-Neef, Elizade & Hopenhayn, 1992). The relationships amongst the homeless are crucial to service delivery as they can either increase confidence in them or vice-versa as the response of one participant suggested.

“Friends I started making friends, and that's how I know about them because I used to skurell for food” (Interviewee J).

An official channel for acquiring the whereabouts of food was said to be a food map supplied by the dining room service that gave locations of the different serving points, which the participants found helpful seeing that the dining hall only provided meals once a day.

“...the dining hall gives you a map that put stickers there where you get food by 4:30. You
see when you finished by the dining hall there will be no food after 11:30 but they give you a place where I can go where every Monday someone is at the gardens and every Thursday someone as at Saint Georges Mall but they give us bread” (Interviewee J).

“Like I like I said I've got lots of friends', sisters brothers and sisters that sleep on the street” (Interviewee M).

Another option for acquiring food that was mentioned was approaching shelters regardless of not being a resident. The participants however expressed that they were not received well when they approached shelters and hence had stopped approaching them.

“no we can go also there by the shelters also and ask them for food they give us food...umm No they do not treat us well, there is a lot of questions when we asking for food, they give us a lot of questions they are full of its nice today but tomorrow there isn't nice” (Interviewee F).

Participants expressed that although there was an abundance of food for the homeless these services were mostly available during the week and the weekends were met with a scarcity of services.

“Saturday is a problem because on Saturdays there's only one place where you can get a little bowl of food then there's nothing for the rest of the day (Interviewee A).

The closing of the service dining hall during the weekend results in a food service gap for the homeless especially those living outside shelters.

**Provision of stability and routine**

In further expressing the strengths of food services participants mentioned that the consistency of meal availability provided a form of stability and routine to their daily lives.

“What's the good thing? That they give out food every day” (Interviewee O).

“...you must give your money and you can get food so there's no problem there by the diner if you give your money you will get your plate of food there's no problem about the diner, the diner is good” (Interviewee H).

Although participants expressed gratitude for the services provided, they suggested that the service dining hall was meant to serve meals twice a day. A suggestion made in consideration of persons with disabilities or the elderly who face challenges of moving from one place to another to acquire
meals.

“Food services they supposed to eat twice a day because there is a lot of old people neh who cannot walk around every person that give us food now this place give at 11:30” (Interviewee O).

Friendly Service staff and nutritional Food

An additional strength identified by the participants was the friendliness of food service staff as well as the nutritional value of the meals served. According to a study by Ravenhill (2008:11) homeless persons defined themselves in terms of feelings of warmth and comfortability and as such welcoming spaces for the homeless should be prioritised. As previously highlighted by Wasserman and Clair (2011:76); Johnsen, Cloke and May (2005:324) the treatment of homeless persons when accessing services influences their proclivity towards using services. Sparke, Russell and Barker (2014:242) argue that amidst the abundance of food from numerous sources the diets of homeless people tend to be nutritionally inadequate. The importance of nutritional food is one that should be highlighted as food contributes to the health of the homeless. The limited control over the choice of food that the homeless consume should be an impelling factor in ensuring that food services cater to the nutritional needs of the homeless.

“The people are friendly” (Interviewee J).

“...the people that work there they are nice man, they also come from the streets like the small lady inside she also come from the street” (Interviewee O).

“The fact that it is nutritional it is Fresh, It is very well presented umm it gives you that, especially if you have it. It’s something that you look forward to, it’s something that you really appreciate and it’s just it’s a happy space” (Interviewee A).

Weaknesses of Food Services Poor shelter food services

The findings on general food services surprisingly did not correlate with those of food served in shelters. In comparing the two service options participants voiced that food in shelters was not well cooked and some felt that there was little hygiene practice in serving the food.

“Even the way that the people that are preparing food there. They prepare food in a way that they don’t really care about, you know what I mean because they aren’t eating that food” (Interviewee B).
“People who are living on the street are getting better than people who living on the shelter” (Interviewee C).

“I don’t like the people give food. I don’t like the food there” (Interviewee D).

“They throw everything in one pot and cook it up, …They should have gloves or something but they are working with their bare hands” (Interviewee L).

The experiences expressed above bring to the fore the need for the evaluation of services. One of the participants argued that the general perception about the homeless relates to the statement that “beggars can’t be choosers” which is a possible approach adopted by shelter service providers that results in the poor quality of food. Some participants attributed the unpleasant food to the withholding of fresh food by staff members for their own use.

“A lot of people have this attitude that if you are homeless you desperate so you take whatever you get and somebody said to me the one day homeless people they are beggars, so beggars shouldn’t be choosers so I said yeah that’s perfectly true but remember like you I have taste buds I can tell you when something is nice or not nice or something is off or it’s still fresh” (Interviewee A).

“The food services as you can see by the food I know there is a lot nonsense going around hey man they get a lot of donations but little stuff is given to the people they take the real stuff home what about the people” (Interviewee O).

Provision of food reinforces homelessness

While all participants appreciated the availability of food services some were of the opinion that food services created dependency and perpetuated the cycle of homelessness. In further elaboration it was argued that because homeless people did not need to “pay” for the food it cushioned their homeless lifestyle and it resulted in them not having any ambition to look for employment.

“.because of people are going to give you food they keep you on the street man, that's what I see, it's a blessing of God because the word of God says if a guy doesn't work he can't eat, now they give the people food to keep them on the street so that they can make a face for themselves” (Interviewee O)
“..I'm not, ever comfortable with this life but they have get use to it actually the way people is treating us it makes you to get used to it...Dining room maybe the Carpenters give us a free shower and the morning yeah you need to stand up early but yeah you get used to this it's almost like I know tomorrow morning I need to go and buy my one rand coffee at right, whatever I need to do to get one or two rand so I can buy my coffee in the morning I come here I shower and I got there at lunchtime to buy it then I go to sleep a little bit in the garden then I go skurral at night again for tomorrow morning, I see you get used to it it's like a yeah” (Interviewee J).

“.what makes us don't want to go work it's because we don't have such a valid reasons like other people yeah you stay and it's a house your house needs you to pay rent you need to pay the rent you need to pay the water electricity and we don't have to pay all these things we need something to motivate us to ,if you have a child that's one thing you need to go and work you see people like me I don't have anything I tell you so I don't have any reason that drives me to go work maybe if I have a valid reason to drive me to where am I actually forced to go work and I would have worked and long time ago” (Interviewee J).

The perspective of the participants above paint a picture of service provision as a double edged sword. The findings reveal that service provis ion sustains the homeless yet it does not capacitate them to be protagonists of their own development as proposed by the social development theories adopted for this study. Participants highlight that a possible contributing factor to ineffectiveness of services in equipping the homeless to be self-sufficient is that service provision in itself has become a profit making industry (Ravenhill, 2008:30).

**Lack of security system**

Participants described violence and intimidation during the serving of food as one of the challenges they faced when accessing services. One could argue that the violence described by participants is a reflection of the life that the homeless are susceptible to in trying to survive. The severity of violence is described by one of the participants

“they kill people there, yah there was killing. They stab guys here” (Interviewee G).

“it's just eh, it's not the people, the people outside you see like I come to you and your first and you come from outside and you want to stand in front of me, you see some people get...You just let them do that. If they come just keep calm you know you are going to get, you know you are going to get there but don't come twice, three times, you don't have respect for other guys you see” (Interviewee G).
The participant suggested getting a security system as a means to create a safe space when accessing food services.

“Uhh I think if there is a proper security system you see there if we get a number like, this your number 1 up to 200 up then you got your number then you know you are in the line or you make just like a mark and when you see the mark then you can say you already got food moos. Something like that” (Interviewee G).

“If they can be more organisations that give us food that would be good try to help like, like in a dining room there's not a lot. If they can be more like these guys who can give food like this because there is not a lot everybody is coming here it's about” (Interviewee G).

The lack of a safety and security in a accessing services maybe a barrier toward interaction with services which will result in the effectiveness of the mandate of services for the homeless.

4.2.4 Experiences and perceptions concerning health services

Health service strengths

Free health services
Access to health services is essential to the homeless population due to their exposure to bad weather as well as violence and abuse. When asked about the strengths of health services participants expressed that services were free, which was beneficial to them as they could barely afford a meal a day. Most participants were knowledgeable of the different hospitals and clinics they could access. Chambers et al. (2013:5302) argue that amongst the determinants of health care service usage are predisposing factors as well as enabling factors. The availability of services such as those provided by the Carpenter’s shop which is located within the surrounding area of the participants falls under predisposing factors. The location of the Carpenter’s Shop gives easy access to services as a significant number of homeless persons shower there every morning. Regarding enabling factors, the absence of charges for health care services eliminates economic barriers that would limit both access and use of health care services (Chambers et al., 2013:5302).

The capabilities approach identifies the removal of barriers such as inability to access health care services as a fundamental step towards development as individuals through available services are given an opportunity to lead the life they value (Robeyns, 2005:94).

“At the Carpenter shop every Wednesday there is a clinic they check your blood pressure
and they refer you if there is anything else that is wrong, blood sugar umm... umm blood pressure and all those things and then Robbie Nurock hospital they are also available Somerset hospital. In Woodstock there is the health and male clinic where you can go there” (Interviewee A).

"because I sleep outside, if out in the winter it’s very cold and you can get TB anywhere. People spit here you can get TB. In the cold in the coldness. That’s why every year I go there... “You know uhhh, carpenter shop? They, today is hospital and people is test for sugar, your blood” (Interviewee D).

“If you think to yourself okay my teeth is bad, there is the dentist for free. Just go and get rid of the bad teeth” (Interviewee F).

Equal treatment
All participants expressed that they were treated well when they accessed health care services and they had already formed a good rapport with nurses from the local clinics. This was contrary to Seager and Tamasane (2010:76); Darbyshire et al. (2006:556) who argued that homeless people tend to avoid the use of health services due to poor interaction with healthcare practitioners.

“There’s a time that I actually, I had to lay in hospital for a few weeks. Then the services man it was super, man. You get washed if you can’t move yourself” (Interviewee C).

“I'm happy there I like the sisters they greet us and they know us, there was here in the garden last week also all of our people come there by Robbie Nurock... They treat me very well and if they told me and I musn’t do use that tablet and I must take tablet I use it like they told me” (Interviewee F).

“Oh they treat me very nice...I like there because there is nice people now I see they install a TV also, now if you are on the waiting you can just relax and then the time flow ... they know me and I know them, they tell me cause I, if you have tablets you can leave it there. My stuff I can leave there” (Interviewee G).

Health Service Weaknesses Need for identity documents
When asked about the challenges faced in accessing available services participants mentioned that they were unable to use services if they did not possess identity documents. Based on the findings of the study homeless people especially those outside shelter services are faced with the challenge
of protecting their belongings as they often move from one place to another and have no secure storage place. Their possessions are vulnerable to theft as well as confiscation during police raids.

“uhh to go to hospital you must have an ID me on the street I don't have an ID by me yeah”(Interviewee N).

Long wait for services and limited eye care and dental services
The long wait for attendance at health clinics was also mentioned as a challenge. However, despite the long waits participants displayed a willingness to wait to be served. Some participants seemed to be understanding of the dynamics of health care services, one of which is the shortage of doctors as described by News 24 (2016) that stated that South Africa had 60 doctors per 100 000 people a figure way lower than the world average 152. Participants also expressed that although health care services were free, dental services were hard to access.

“In all fairness the amount of people that go to the doctors and nurses in a day office here. In all fairness we have a service. People and you know these doctors and nurses are overworked. Sleep deprivation probably not eating, you know what I mean. Human beings is like doing something at a cost we are quick to say this and this and this and this....The problem we have is dental and eye care” (Interviewee A).

“Somerset is treat people well they must just have patience and the doctor will help you. You must have patience” (Interviewee D).

A few of the participants recommended that more health care field workers should be deployed to the street as some homeless people did not go to clinics and hospitals. Chambers et al. (2013:5302) explains that sometimes regardless of the predisposing factors such as demography as well as the absence of charges individuals may still choose not to make use of health care services. He explains that symptoms of health conditions maybe the final driving factor towards people using health care services. The perceptions voiced below show that the limited use of shelter services goes beyond the determinant factors (predisposing, enabling factors and symptoms of health) identified by (Chambers et al., 2013:5302). This is evidenced by some homeless people not making use of services despite them being easily accessible and them possibly having severe health problems.

“myself at a clinic but if I look in my community people die on the street, if they could be more field workers who can help people on the street as you can see those many people
that are sick we couldn't manage to go to a clinic” (Interviewee B).

“Just get more students into, into the ground you know what I mean, so that they can visit, those trainee students and stuff like that there are in colleges and stuff that they got the access of health you know what I mean they should be on the street...” (Interviewee C)

“See some of them drink a lot and they're just sick and they're just do you know they're just on the street and but if they can be field workers of clinics maybe Nurses on stuff just system and help them I think that will be one of the way people can get help” (Interviewee G).

The limited use of health care services by some of the homeless population as displayed above may be attributed to demographic factors. It may be assumed that some homeless people find that health care services are far from their usual aboard and possibly that their symptoms do not require medical attention (Chambers et al., 2013:5302).

**Discrimination**

Although most participants expressed that they were treated well, there were some who felt that they were discriminated against because of the state of being homeless. Hudson, Nyamathi, Greengold, Slagle, Koniak, Khalilifard, and Getzoff, (2010:213) explain that stigmatisation was one of the reasons homeless people did not use health care services. They further discuss that in health care systems, service delivery to the homeless tends to be less respectful compared to that of non-homeless people. These sentiments are expressed by one of the participants.

“Yeah some people who works at (hospital) don't treat you with respect...they think that they are better than other people” (Interviewee L).

One participant justified the stigmatisation of some homeless people by stating that if an individual lacked personal hygiene it is inevitable that they would not be treated the same as non-homeless persons. He further explained that some homeless people did make an effort to prepare for health care service check-ups.

“You know why some people they know for a fact that tomorrow that they got to be at the day hospital. What they do is they don't go and take a shower, they just come in there, sit there bad smells, bad breathe and all that, coughing and not covering their mouths, sneezing man huh uh” (Interviewee F).
The views expressed above are in light of the availability of free showers for the homeless. The statement further suggests that homeless people should work towards meeting the societal norms of appearance and hygiene so as to avoid stigmatisation when accessing services. This however becomes difficult for those individuals who are not aware of the different supportive services. It further highlights the need for structured dissemination of information of services in this case the hospital could be a conduit for providing information on different services. Discrimination is suggested to be driven by appearance rather than the verbal or written confirmation of homelessness.

4.2.5 Experiences and perceptions concerning employment

Employment Background

Importance of employment

Employment was identified as the most urgent need by a majority of participants. They explained that acquiring employment would enable them to meet other pressing needs such as shelter and food. These sentiments correlate with Cross and Seager’s (2010:146) analysis that homelessness specifically rooflessness is mainly due to unemployment. They further highlighted that the securing of employment would reduce engagement in survival crime as receiving an income allows for the meeting of varying basic needs. Shaheen and Rio, (2007:242) state that long term unemployment can lead to people being isolated and being disengaged. One participant stated that finding employment built self-confidence and also increased the desire to engage with others highlighting the social and psychological benefits of employment. The capabilities approach highlights that income as a commodity is a necessity for development although it is not an end in itself but only a means (Sen, 1999).

“When you do get a job you rebuild yourself with your confidence. You interact more with people ... I mean you can identify yourself with another person because of the work that you do. Like when you put people together like two complete strangers then you talk about soccer there've got that connection (clicks finger)” (Interviewee A).

“Something easy like cleaning the streets, even paintings, you see painting companies, just
helping, construction companies because you start from the bottom moos mixing daka it gives you income and it keeps you busy during the day now you can't go into breaking into house cause you are tired moss, so what's next (if you do not have a job). Now you sit the whole day, you look at that car the whole day you say look at that car look at this car this car is got a phone, ohh go for the phone my brew let's go” (Interviewee G).

“I tried to find out where must I do and where must I start now the only choice now is to find a job and maybe my life can change” (Interviewee M).

“no I.I.I as a homeless person there's only one thing I need it's to find a job. If I have a job I would go back home I'm look for a place for myself” (Interviewee N).

Employment History
The majority of participants when asked about their work history expressed they had worked in the following fields, cleaning, construction, docks, carpentry, lorry packing all of which were blue collar jobs also known as manual labour. Out of the fifteen only two participants had worked white collar jobs one as a bank teller and the other as a shop manager. The trend of blue collar work history amongst homeless people is a possible indicator of the influence that economic class plays in the susceptibility to the loss of jobs which then leads to homelessness. These findings coincide with earlier studies that reported that homeless persons are inclined to low education and inevitably low quality employment, which has higher chances of cutbacks when employment markets change (Cross & Seager, 2010:155; Roets et al., 2016:10).

“I work in the shop I was the floor manager, floor manager, I work for Home Choice as the production manager, for coke I was a sales rep” (Interviewee O).

“Yes I'm a merchandiser at first then they promote me to Salesman yeah so I left that job. I was working at IPL International travels and labels printing, I was a manager there as well, erected various places, Capitec, yeah I worked at Pick n Pay as a cashier I'm good at working at the till” (Interviewee J).

“And Epping carpentry job the Crawl Timbers and I work and Felipe all the carpentry work” (Interviewee I).

“When I leave the security I just go homeless and I, maybe it was about 5 years” (Interviewee G).
Strength of employment services Opportunities for occasional employment

When asked about employment services most participants mentioned the city’s Expanded Public Works Programme (EPWP) and the Jesus Saves Project as the main sources of employment all of which provide street cleaning jobs. Outside these two main sources it was expressed that jobs were hard to come by. Jobs supplied by both services are short term with daily hour specific contracts or lasting a period of three to six months. These findings are similar to that of Ferguson et al. (2012:387), Whiteford (2010:17) and McBride’s (2012:53) whose study results revealed that employment for homeless persons is normally short term and is seldom permanent. The short lived jobs are considered to contribute to the cycle of homelessness as the money is not enough to sustain one after the period of work. Some participants expressed that the dues acquired from employment are used to pay for accommodation after which at the end of their employment contract they return to rooflessness.

“it never gives you more than 6 months. And the problem with that is..... It's chaotic because now you have money that you never had you are not going to be in the shelter for 6 months by the fifth month you know that there is not going to be an extension on work which means the income that you have is going to fall away which means your security living in a shelter going to fall away umm and it's a vicious circle” (Interviewee A).

“..yeah but two jobs it's always security” (Interviewee G).

“Mostly I work for a EPW contracts are the six months 4 months 6 months about 3 contracts I had with about 3 contracts I had with EPW” (Interviewee H).

“I can't get a decent job, so they will say yeah let him clean this yard you can do this job because you are a criminal” (Interviewee M).

In light of the main employment service providers entering their employment opportunities on manual labour the employment services are considered as inconsiderate of those individuals who have soft skills. Individuals like the two participants who have worked in white collar jobs expose the limitedness of the scope of available employment services. Although appreciative of the job opportunities presented by employment services one of the participants expressed that the working conditions were not favourable. As a result some participants pursued their own initiatives.

“You see by Jesus saves?, there’s uhhem some what’s that’s, they call it school of life, you
uhh are allow to work... but there are strict rules for four hours there are strict rules, no eating, no drinking water, no going to toilet, no smoking, no speaking, like somebody would come up “Excuse me do you know where is wha’ wha’, ey you can’t talk to me. Go talk to the supervisor talk to the foreman, I mean it’s unfair, maybe you want to go the loo, what must you do? You must ask the foreman. He will tell you listen here but it says here that you can’t go to the toilet. Yeah but I’m going to wet my pants or what?” (Interviewee F).

Participants in further expanding on the issue of informal employment highlighted that they looked for informal employment in neighbourhoods near the city centre. Participants further stated that they sometimes focused their energy on finding recyclable material to exchange for income. Alternative forms of employment were said to be opportunities provided by citizens who offered temporary employment by asking those homeless people who came to their door step to maintain their yards (Kok, Cross & Roux, 2011:28). In light of the above Shaheen and Rio (2007:342) state that although homeless people do not work within office hours they do have their own business territory, and their own schedule as well as the skill to survive that territory and for this they should be acknowledged.

“It's to scratch in the bins that is to skurral. Sometimes the guys tell you, the owner of the house tell you please make the yard clean or wash the bins then you got the job every time” (Interviewee G).

“from parking cars... I make R300a day” (Interviewee L).

“Part time job just by this guy here stand removals here by sea point so he come and pick us up, but not not for a job every day and sometimes it's just for two hours, he takes two guys” (Interviewee G).

“like here and the white area there are certain time in the morning at 6 o'clock very early like 5 o'clock and we go to recycle buy the distance and is also an option the white people throw away valuable stuff sometimes, sometimes. sometimes it's broken sometimes and the stuff is in good condition you can fix it you can sell it but early in the morning you wake up before the council trucks come you will be there in the white area and recycling, that is also a good option I used to recycle a lot” (Interviewee G).

**Challenges to employment**

In exploring the difficulties faced by homeless people in finding employment it was expressed that the lack of suitable work clothing was a great challenge. Also some participants stated that the lack
of capital limited their job options to the city centre as they did not have transport money to look for jobs elsewhere, let alone work outside the city centre. Participants also mentioned the lack of CVs as an underlying factor stating that they had no CVs and as such could not apply for jobs.

• **Lack of clothing**

> “If a person with a degree and qualifications can’t get a job how is homeless people going to get a job? First of all we don't look the part um and if you don't look the part you normally can’t act the part and yourself confidence is very low so if you go out and the state of going out to go and look for a job competing to people that are professional wearing suits..come on” (Interviewee A).

> “We are not really presentable and when we do get a job it's difficult because you don't have the right outfits and you don't have places to store your stuff you have challenges a washing and keeping yourself clean” (Interviewee A)

> “yes yes, because like today I met a guy I was asking him something because it's Mandela Day he gave me two rand and then he told me you are a good guy, you must look for a job but I am asking one thing from you you must clean up before, you will get a job so, he gave me how can I put it something is of how to look for a job” (Interviewee N).

• **Lack of Curriculum Vitae’s (CV’s)**

> No not yet because I don't really know how it works to get a job here but I need to get my ID at home first, my ID my niece or something to bring my ID, and I need to get my CV you like I always that's how things work, I don't know how things work here, but there’s job” (Interviewee J).

• **Inadequate qualifications**

> “If you don't have for qualifications you cannot find a decent job, so if they give you any s*** jobs you want you have to take it you cannot refuse it because it’s money you can earn a bit small money you can do anything with it you can even provide for your parents and your children no matter how much is it” (Interviewee M).

Criminal records were also mentioned as part of the hindrances to securing employment as persons with criminal convictions were discriminated against and were deemed untrustworthy and undesirable. Ferguson et al. (2012:398) in a similar study also identified criminal records and the lack of identity documents among the youth as sources of frustration in the job seeking process. Homeless persons who have criminal records face immense challenges as they are faced with
severe stigmatisation as homeless persons and ex criminals. Development initiatives in this regard would be critical in aiding in the reintegration of such persons into society as supported by the human development model (Patel, 2015:124).

“I worked there for 18 months I got paid 6 and a half thousand Rands a month so there found out I'm a criminal so..{he was fired}” (Interviewee M).

Need for opportunities
Participants voiced that searching for employment was made difficult because of their social status. This discrimination went beyond their appearance and access to enabling resources such as clothing. Participants expressed feelings of frustration but maintained that despite the discrimination they encountered they believed that homeless people were as equally equipped as non-homeless persons to hold permanent jobs. They argued that all they required were equal platforms to showcase their skills. The social development model according to Patel (2015:124) describes development as centered on human agency as well social and economic justice, which appear missing for homeless persons as they seemed to lack opportunities to participate socially and economically based on their social standing.

“umm If they know that you're homeless neh they think that you are nothing, They don't want to. most places neh if you tell them you're homeless they don't want to give you a job” (Interviewee L).

“A space where you show us what you can do. Not show you are homeless and we will give your job. You must be able to stand next to someone who leaves in Clifton who has a talent like you prove a point and get it! May the best man win” (Interviewee A).

“I think we have to give towards the homeless people some jobs, there are some homeless people that are really educated, that can use work on computers, they can any job that they want ... ” (Interviewee B).

“uhh you know there is a lot of a skill on the street, there is a lot of potential you know what I mean but people they just don’t want to show it, you know” (Interviewee C).

Willingness to work
Perceptions of the homeless are associated with drugs, laziness and irresponsibility (Ferguson et
Interaction with participants however revealed that they are willing to work and understand the importance of self-initiative. This finding correlates with a study by Shaheen and Rio (2007:342) who also found that homeless people contrary to general perceptions were willing to work and often wanted to work as soon as possible. The willingness of homeless participants to work shows that people-centred development, as expressed by the social development model and its theories and approaches, attests to the fact that human agency is integral for development and the hypotheses that support the social development model remain relevant.

“People must just stand up early go out and look for a job. Not to say the boss said I should come tomorrow. Okay go tomorrow but what time are you going to stand up. You must check about transport. You must check you must be on time. Don’t come there ten minutes after the time. The boss will say sorry, come back tomorrow because you are not on time. You come every day you not on time, come back tomorrow, come back tomorrow, you see” (Interviewee F).

4.2.6 Experiences and perceptions on Khulisa Services

**Khulisa service strengths**

Khulisa Solutions provides a range of services to disadvantaged South African citizens ranging from early childhood development programmes, women empowerment programmes, entrepreneurial training, offender rehabilitation and parenting programmes. This research however specifically focused on the streetscape homeless intervention programme whose mandate was to create employment opportunities and provide self-development training to the homeless (Khulisa, 2016). At its inception the streetscape programme provided employment in partnership with the EPWP but moved to long-term employment through gardening projects. A limited number of homeless beneficiaries were chosen to participate in the gardening projects and these made up some of the participants for this research.

The perceptions and experiences of the participants with general services (food, shelter, health care) formed the backdrop of the analysis of the streetscape program. The acquiring of employment by participants through the streetscape program saw the increase in the capacity of participants to make choices about the food they consumed. The freedom to choose not to use food services served as the basis for a feeling of personal growth. This was evidenced by participants
withdrawing from the use of food services when they felt financially capable to do so as continuation of the use of food services seemed as a selfish act towards those who truly needed them. The use of shelter services was heavily influenced by financial capacity as employment correlated with the use of shelter services. The more financially stable participants were the higher their willingness to use shelter services. The American national coalition for the homeless (2014) argues that job training and employment better equip individuals for long term stability. Regarding health care services financial stability increases access to an array of health care services as homeless persons are often limited to services within their reach due to financial constraints.

When participants who were beneficiaries of streetscape program were asked about Khulisa and its strengths they described it as empowering. They explained that Khulisa equipped them with skills, employment, acquiring of identity documents as well as toiletries. Khulisa was identified as going beyond job provision by facilitating in the forming of foundations for personal elevation.

Some participants expressed that Khulisa’s premises provided a safe haven and shelter from bad weather when necessary. The streetscape interventions program feeds into the ethos of the staircase model of the rehabilitation of homeless persons. The acquisition of identity documentation and the availing of long-term job opportunities aids individuals by increasing the mastery of skills and their ability to apply for employment outside the scope of the streetscape program. The provision of technological skills as expressed by some participants increases the capacity of the homeless to be compete in the job market.

“And we’re still working knowing that we’re gonna get more, that’s what Khulisa, Khulisa do for us, they don’t ask age, they just give us work. That’s what I like about Khulisa” (Interviewee B).

“Khulisa is the better place to help you, they help you with ID, when I was lose my ID they help me with the ID. Get up in my feet and respect another people” (Interviewee D).

“Khulisa ummlearn ... us most,most of the things and we didn't know about planning we didn't know about compost we didn't know how to make a worm a worm place we don't know and all the skills what we are doing here, we’re doing also karate where do karate we learn now how to... How to to talk with the next person” (Interviewee F).
“Khulisa they give you toiletries and whenever you need something you can go there” (Interviewee D).

“Khulisa gave me a good opportunity now. Now I can save some money because I sign a contract till October month” (Interviewee F).

“yes because I'm out of trouble I was standing and the corners the cops were busy with me why are you standing at the corners come here. so I think it's better that I stay and the gardens...” (Interviewee H).

Based on the experiences of the participants Khulisa services was said to provide long term progressive development for their beneficiaries. Further, their development model was depicted as creating an inclusive environment that allowed for social integration. Khulisa is one of the only organisations in Cape Town that helps in the provision of extended employment for the homeless. Participants expressed their confidence in Khulisa’s capacity to help homeless persons to find permanent employment outside Khulisa’s projects. These services unfortunately were not known to participants who were not beneficiaries of Khulisa’s programmes. Participants sourced outside Khulisa expressed that they had never heard of the Khulisa’s streetscape programme. The one participant who seemed to recognise Khulisa expressed that he was not aware of their office location. Another participant seemed to identify Khulisa with a lady who helped find jobs.

“I don't know where their main office is” (Interviewee M).

“there was a lady before I think 6 months ago she disappeared now we don't know where he is, she used to help get projects from the city council to sweep the roads” (Interviewee N).

**Khulisa’s service weaknesses**

When addressing Khulisa’s weaknesses participants mentioned that they felt salaries granted by Khulisa were insufficient. Further participants were of the opinion that employment opportunities provided by Khulisa would work better if paired with the provision of shelter services. Findings reveal that the relationship between shelter and employment is one that is crucial for the retaining of employment in consideration of clothing, safety and bathing. The use of shelter also determines the type of job that one can acquire as shelters have curfews.
“And the things that they can do better for us, accommodate us place so that we can sleep in them, you know?” (Interviewee B).

“But Khulisa ha a, I don’t want to do it. I don’t know how much they get paid. The money is too little I mean for a person like me, at my age 55, no” (Interviewee F).

4.2.7 Additional Findings

Race

The issue of race was brought to the fore as one of the hurdles to employment as well as a source of discrimination. The race based discrimination described by participants was evident in service provision and in interaction with public authorities. Although not directly linked to employment through a specific service it is a concern to be addressed as homeless people are at exposed to external parameters of service providers. Participants expressed that they were sometimes candidly told they were unemployable because of the colour of their skin.

“I went to look for a job and they told me that your skin is not the right colour (is not black)...they say your skin colour is the wrong colour neh I don’t have a job for you... they are discriminating on colour [skin] they said there is no more racism neh but what is a rainbow race” (Interviewee L).

“If there is maybe like a few Africans 5 or 6 Africans there will be a little judgmental because of their colour they talk about them in their language. Yeah they're just speak about once or so...yeah judge me so, maybe the phone maybe there and they say this time it is coming to take my phone or something like that” (Interviewee K).

“you see I come here 1989 and from the street there was a time when Nelson Mandela was in prison and white people they didn't treat us fairly they treat us like dogs so how can I work with a white man if he didn't treat me fairly, he treat me like a dog now the country has changed now they want to treat us like we equal, I don't know what will happen,... you can go there by that shop and sit there, there will come a security there that will tell you listen here my friend you cannot sit here, why can I not sit here? in South Africa why must I move do I look dirty for you? Do I look like a skolly, what...they look like maybe I'm going to do something here no” (Interviewee M).

Participants expressed frustration as well as an aggression towards the issue of exclusion and
discrimination which they perceived to be based on the colour of their skin. The issue of race amongst the homeless is one that is not commonly addressed in the literature. The emotions experienced by the homeless due to this challenge also influence the interaction of the homeless with services and authorities.

**Equal treatment**

When asked about what can be improved for homeless people in general participants raised equality as a point to be addressed. They expressed that they were discriminated against because of their social status and as a result were not paid attention to. This to an extent that corpses of homeless people were left unattended for extended periods even after reports had been made.

“because if there some people today they die neh they take their own time to take that body up and take him to the mortuary because he is a dirty person they won't even touch him” (Interviewee M).

“What is missing is people they must try to treat the people on the streets like them because they don't treat us nice even the security you see that security there they don't treat you just nice I can't stand there for 2 hours. They chase me away” (Interviewee N).

The issue of discrimination based on existing stereotypes against homeless people is one that homeless people experience on a daily basis. This the researcher observed first hand. During the data collection period while running across the street with one of the participants, an unknown woman in whose direction we were approaching began to shout profanities as we drew closer accusing the participant of wanting to take her phone. This encounter was followed with an exchange of words between the woman and the infuriated participant who then expressed that this is what he encountered daily. The need to change the perceptions that citizens have of homeless people should be prioritised by public authorities and relevant stakeholders.

“how dare you say I'm not going to give him money because they going to use drugs. That's a very wrong assumption. They are very quick to judge” (Interviewee A).

**Upward Mobility**

Participants who were able to purchase their own food felt that continuing to use food services was a form of selfishness. They also viewed an individual’s ability to purchase their own food as a
measurement of growth towards self-dependence.

“umm, We did get food here from the service Diner but now as a woman I don't go and fetch food and if I have money I buy my own food” (Interviewee F).

“Because I can buy my food but the next person but he maybe can't buy food whatever, so now I'm going to take that plate of food and then he's going to go without food” (Interviewee O).

The willingness to discontinue the use of food services by some participants when financially capacititated counters the argument that the provision of food services creates dependency. The use of the term “as a woman” suggests that economic wellbeing is tied to identity in this case a form of maturity and taking up of responsibility. Participant’s opinions further express that their economic development provides a freedom of choice, a principle that is central to the Amartya Sen’s theory of freedom as development Sen (1999). Sen explains that functionings which are the achievements one is able to obtain from available resources are critical to one’s development. Further it reinforces the need to perceive or measure development based on what a person is able to achieve rather than what they possess (Clark, 2006:3). The empowerment to make choices about what food to eat and to give up services for those who do not have this option all highlights the ethos of the people centred development, those who have been empowered leave services for those who are in need of them.

4.3 Summary
This chapter presented the findings of the study and provided a brief discussion in line with theories and literature gathered from previous studies as introduced in chapter 3. Unveiled through the findings were the unique experiences and perceptions regarding the use of shelter, food, healthcare and employment services. Of all services food and health care services had the most positive aspects in comparison to shelter and employment. Outside the scope of service provision were the discussions on the issues of race and discrimination as identified by participants which were flagged and integrated here as important additional issues to consider in the lives of homeless people. The following chapter will provide the conclusions and recommendations of the study.
CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5. Introduction
With the understanding that development is an unending journey, the experiences and perceptions of those engaged in the process as partakers and orchestrators are invaluable. This study purposed to explore the experiences and perceptions of 15 homeless persons in Cape Town regarding service provision with the aim of investigating the strengths and weaknesses of services provided to them in line with shelter, food, healthcare and employment in general, and specifically in relation to the service provision by Khulisa an NGO that provides services to homeless people in the Western Cape. This chapter will open with a summary of the overall thesis which will include an overview of each chapter in section 5.1. The following section 5.2 will present conclusions drawn from each theme (see chapter 4, Section 4.3). Conclusively, section 5.3 will outline recommendations as emanating from the study.

5.1 Overview of Thesis
Chapter one of the study provided a contextual understanding of homelessness as a social problem. In addition it presented the significance of the study by firstly emphasising the value that contributions by homeless persons as service recipients would make in tailoring services that are both efficient and effective for them. Secondly, by highlighting the need to add to the limited literature on the experiences and perceptions of homeless people around service provision specifically in South Africa. Thirdly by contributing to research that could possibly influence the evaluation of current services for the homeless in Cape Town and optimistically in South Africa as a whole. The chapter further provided the clarification of concepts, the research topic, and objectives of the study as well as the ethical considerations.

Chapter two presented a discussion of supporting social development theories that were adopted for this study under the focus of the social development model, the Human Needs Approach, Capabilities Approach and People Centred Development which are founded on the ethos that
people should be protagonists of their own development both for social and economic well-being. In addition the chapter provided an outline of the legislative frameworks that feeds into the necessitation of service delivery for homeless persons, all which are rooted in the values of the Bill of Rights (See section 2.2). In addressing the issue of homelessness a comparison of previous studies was presented focusing on five main areas (1) contextualisation of homelessness (2) Causes of homelessness (3) Experiences of homeless persons with food security, shelter, health and employment services (4) effects of homelessness and (5) services for rehabilitation.

Chapter three described the methodology used for the study. Section 3.2 outlined the research design, focusing on the population and sampling applied with section 3.3 and section 3.4 addressing the data collection tool and data collection apparatus. Section 3.5 and 3.6 described data analysis and data verification while section 3.7 addressed the foreseen limitations of the study.

Chapter four presented findings and discussions from the analysed data. To give context to the findings an introduction to participants was presented in the form of a profile table accompanied by a short discussion in section 4.1.2. The chapter also provided a framework for the discussion of findings in section 4.1.3. These findings were then discussed according to the objectives and themes used for the study which focused on the experiences and perceptions of participants regarding shelter, food, health services employment and the services provided by Khulisa. Additional findings on issues that did not fall under a specific theme were discussed in conclusion to chapter four in section 4.2.6. These issues included race, equal treatment and upward mobility.

5.2 Main conclusions
The objective of this study was to investigate the perceptions and experiences of homeless participants regarding the strengths and weaknesses of shelter, food, health care services and employment services in general and in relation to service provision by Khulisa. The conclusions of the findings are summarised below.

5.2.1 Experiences and perceptions on shelter services
As a means to give a background to the perceptions and experiences of participants regarding shelter they were asked to define homelessness which they associated with hardship, survival,
endurance, lack of support from family and friends as well as hustling (Section 4.2.1). On investigating the participants’ acquisition of knowledge on the availability of shelter services it was concluded that word of mouth among the homeless is the most prominent means of acquiring information, followed by the dissemination of information by social workers (Section 4.2.2). Findings also revealed that the majority of participants were aware of the whereabouts of shelters as well as their prices, with a few exceptions of those participants who had been homeless for less than a year. The period of homelessness seemed to correlate with the knowledge of the type of services participants knew of. In uncovering what participants deemed to be the strengths of shelter services the following were highlighted, firstly that shelters provided a haven which gave physical and psychological security for the period in which homeless people were enlisted in a shelter. In addition this security allowed participants to focus on other needs such as recreation and leisure as well as self-development. Secondly, shelters were described as providing employment which contributed to the payment of shelter fee’s as well as skills development.

The first and most eminent shelter service weakness identified by all participants was that shelter service charges were too expensive for homeless people especially those without any form of aid. The second weakness was inequality within the shelter systems. Participants highlighted that homeless people with grants or persons who had some form of employment were preferred to persons who had no financial aid of any sort or income. Participants also expressed that outside the financially motivated unequal treatment of some homeless people, the general population of homeless people were not treated with respect in shelters by service custodians. The third weakness was that shelters were identified as perpetuating homelessness as they did not equip individuals to be economically independent.

The fourth weakness highlighted was the lack of shelters that cater for homeless families. The gender divided structure of shelters lead to the splitting of homeless families which resulted in those families opting to live on the street. In addition the fifth weakness pinpointed by participants was the lack of employment or skills development programs within shelters. It was argued that the lack of such opportunities contributed to the perpetuation of homelessness as shelter residents were not equipped to be economically independent. The seventh weakness addressed was rehabilitation of the homeless to their families as part of the shelter development process which was said to be
counterproductive for some participants. Lastly, it was expressed that shelters were not secure places as belongings were often stolen. In conclusion to the experiences and perceptions on shelter services the vulnerabilities of not using shelter services were outlined these including police brutality in the form raids, disease and loss of valuables.

5.2.2 Experiences and perceptions on shelter food services
Food services were identified as the most accessible services for homeless people (section 4.2.3). Participants went as far as expressing the near impossibility of starving while living on the street. In addition to the above mentioned strengths it was concluded that food services were both reliable and consistent. Nutritional value and friendly stuff were also emphasised as commendable attributes of the food services. However, when comparing general food services to that of shelters it’s expressed that food served in shelters was of a lower standard. It was also mentioned that despite the consistency of the availability of food, some participants were of the opinion that food services exploited the plight of the homeless. It was argued that the delivery of services was used as a facade for service providers to benefit from funding.

One of the weakness of food services was said to be the poor availability of services during the weekends. In addition food services although helpful were said to create a culture of dependency that cushioned the homeless lifestyle. Another weakness identified was the lack of security when accessing food services this being of great concern as it was revealed that violence and intimidation were used by some homeless people to get food first.

5.2.3 Experiences and perceptions on Health Services
Findings revealed that the majority of participants were aware that health care services were free. The use of health care services however was limited despite this knowledge. The main use of services seemed to be limited to Carpenters Shop and the Robbie Nurock health clinic with a few participants who had visited hospitals due to severe illness or injuries. Contrary to the findings in prior studies the majority of homeless people in this study felt that they were not discriminated against when being served with the exception of those who felt discriminated against because of race rather than the status of being homeless.
The need for identity documents was seen as one of the shortcomings of health care services as some participants expressed that they were not in possession of such documents for various reasons. It was also said that health services were not efficient as people had to wait for extended periods to be served. Participants expressed the need for health care field workers for those homeless people who did not visit health care services.

5.2.4 Experiences and perceptions on employment
Low paying jobs, minimal skills and poor education were the common attributes of the majority of participants. As a result it was found that the line of employment inevitably was limited to manual labour or blue collar employment. The type of employment provided by employment services was that of occasional employment which contributed to what was determined as the homelessness cycle. It was found that due to the limited periods of employment the homeless were unable to reach any form of economic emancipation forcing homeless people to start over once a job was completed. Regardless of the type of employment it was stated that employment brought about social and psychological benefits such as building of one’s confidence and willingness to interact. Contrary to the perception that homeless people are lazy all participants expressed a willingness to work and outlined employment and shelter as their priority needs, When discussing the barriers to acquiring employment the lack of suitable clothing, curriculum vitae and basic qualifications were identified.

5.2.5 Experiences and Perceptions on Khulisa services
Khulisa’s services were highly commended by those participants who had used them. Findings revealed that employment especially by Khulisa services brought about freedom of choice regarding the use or none use of food services. Further financial stability resulted in some participants feeling that they were now able to leave services for those who were in desperate need of them. Those participants who were employed had better access to health specialist services outside their geographical locations as they were able to move around to seek services elsewhere. Persons who were employed were more likely to use shelter services or move back with their families for this reason Khulisa is considered as contributing to the staircase model of the rehabilitation of homeless persons. It further brought about a feeling of progressive development as it was voiced that Khulisa’s employment services were empowering and brought about long
term employment. The only weaknesses identified were that some participants felt that Khulisa’s salary was too low and that they needed to work on helping with shelter. Those who did not use Khulisa expressed that they were not sure where they were located and some only knew Khulisa through one employee who would visit the food services offering employment from time to time.

5.3 Recommendations
Emanating from the findings of the study are recommendations for further research as well as recommendations for the improving of current services for the homeless.

5.3.1 Recommendation for further Research
Having investigated the strengths and weaknesses of available services around shelter, food, healthcare and employment services on a small scale, the results of this study may be step towards a wider scale research on homeless services outside the city centre of Cape Town. The research could also include the input of service providers and the challenges they face in providing services so as to find comprehensive solutions toward efficient and effective service delivery on a bigger scale.

Further research may also be carried out on homeless people who do not use services, to explore what alternative means of living exist for those outside the comfort of service provision. This more so for those who do not utilise shelter services specifically looking at their experiences of discrimination and police brutality. This research could further sharpen the tailoring of services to cover loopholes that make services unappealing or inaccessible to the homeless.

5.3.2 Recommendations for improving shelter services
- Information access points
The majority of the participants expressed that their knowledge on shelters was highly dependent on word of mouth. This attributed to a lack of a central place from which homeless people could obtain information on shelters and other services. Setting up a central place that is visible and accessible to the homeless maybe a better means of catering to the diverse needs of the homeless as well as a means of accounting for homeless persons. A central station would also allow for easier recommendation and collaboration of services for service providers.
• **Day shelters and afternoon programs**

Most shelters required that residents leave the shelter during the day which left most homeless people with no specific places to go. The establishing of day houses or programs during the day could help with channelling this time towards personal development. These structures would also aid with reducing of engagement in criminal activities as well as unlawful loitering. Further, it would shield the homeless from exposure to discrimination and negative encounters with the public and authorities.

• **Strengthening Security within shelters**

The reluctant use of shelters by some participants was attributed to theft within the shelters. The improving of shelter security possibly through the upgrading of the locker systems would be helpful in creating spaces in which residents feel that their belongings are safe.

5.3.3 **Recommendations for improving food services**

• **Improving weekend services and second meals for older persons and the disabled**

In acknowledgment that food services were highlighted as the most accessible services there were shortcomings in the availability of these services during the weekend. In addition services that took into consideration older persons and the disabled were found wanting. A second serving of food for older persons and the disabled who are unable to move from one area to another should be considered seeing that the main food services only provide one meal a day. Collaboration between various food points should be formalised for provision of services during weekends. This will allow for the continuity of services in a manner that is accountable and consistent.

5.3.4 **Recommendations for improving health care services**

• **Health care field workers and dissemination of information**

Regarding health care services some of the participants expressed the need to have more health care field workers as some homeless people were not prone to visiting health care centres for various reasons. Dissemination of information on the various health care options is imperative as some homeless people are not informed on where to find different services such as dentistry and eye care.

5.3.5 **Recommendations for improving employment services**
• **Employment information structure and apprenticeship**

All participants from the study were not aware of any services that help individuals find employment except for Jesus Saves and the occasional Expanded Public Works Programme (EPWP) as well as Khulisa for those that had worked with them. It is therefore suggested that the information structure mentioned above be inclusive of job referrals as well as job placing. One of the participants suggested apprenticeship as one of the ways in which homeless persons could be skilled for employment. They argued that the current jobs that homeless people obtained were too short lived to allow them to master any skill if they provided any skill at all. Khulisa should also consider working with shelters to aid in the stair case model of rehabilitation as this provides a systematic way to move persons out of the state of homelessness as they will have shelter and employment which provides a form of stability. Khulisa should also consider having job readiness programs for those homeless persons who are qualified for employment outside the manual labour provided. At a more individual level, personal goal setting and goal management should be considered as this will aid in the provision of tailored services to aid in the development of homeless persons.

### 5.4 Concluding Statement

This chapter provided highlights of chapters one to four. It further gave conclusions of the findings in chapter four based on identified themes. The study in its entity brought to the fore the need to evaluate services based on the voices of those receiving them. The experiences and perceptions of the homeless captured in the findings reinforce the ethos of the social development model that emphasises the principle of people being protagonists of their own development. It is with great hope that the views of the homeless will be included in the tailoring of services that best meet their needs.
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APPENDIX I

INTERVIEW SCHEDULE

Biographical Details
1. Name:
2. D.O.B/Age:
3. Gender:
4. Period of homelessness
5. Qualifications:

Main Objectives

Objective two
To investigate if homeless people are well informed about the services available to them.

a. What services do you know that are provided to homeless people? (shelter, food, health, employment).

b. How did you hear about these services about?

SHELTER

Objective One
To explore the perceptions and experiences of homeless persons on accessing services related to shelter, food, employment and health.

1. Describe your current living arrangements.
2. Have you ever used shelter services?
3. Do you have family on the street?
4. What were your experiences of using these services? Did they serve you well.

Objective two
To investigate if homeless people are well informed about the services available to them.

a. How did you hear about these shelter about?
Objective three
To determine if homeless people are well informed about the services available
   5. What do you think is good about the available shelter services?
   6. What do you think is missing?

Objective four
To uncover the gaps within the current services provided to the homeless.
   7. What do you think needs to be improved in shelter services for the homeless
   8. How do you think it can be improved?

FOOD
Objective One
To explore the perceptions and experiences of homeless persons on accessing services related to
shelter, food, employment and health.
   1. Describe your current meal arrangements
   2. How often do you use these services?
   3. What were your experiences of using these services?
   4. How many meals do you have a day?

Objective two
To investigate if homeless people are well informed about the services available to them.
   a. How did you hear about the food services about?
   b. How long did you take to find out about the food services?

Objective three
To determine if homeless people are well informed about the services available
   5. What do you think is good about the available food services?
   6. What do you think is missing?
**Objective four**
To uncover the gaps within the current services provided to the homeless.

7. What do you think needs to be improved in food services for the homeless
8. How do you think it can be improved?

**HEALTH CARE**

**Objective two**
To investigate if homeless people are well informed about the services available to them.

1. What services do you know that are provide healthcare to the homeless?
2. How did you hear about these services about?

**Objective One**
To explore the perceptions and experiences of homeless persons on accessing services related to shelter, food, employment and health.

3. How often do you use health care services in a year?
4. Do you think they are easily accessible
5. Which health services do you use?
6. When was the last time you used health services?
7. What were your experiences of using these services?

**Objective three**
To determine if homeless people are well informed about the services available

8. What do you think is good about the health services?
9. What do you think is missing?

**Objective four**
To uncover the gaps within the current services provided to the homeless.

10. What do you think needs to be improved in health services for the homeless
11. How do you think it can be improved?
EMPLOYMENT

Objective two
To investigate if homeless people are well informed about the services available to them.

1. What services do you know that are provided to homeless people with employment or train them for employment
2. How did you hear about these services about?

Objective One
To explore the perceptions and experiences of homeless persons on accessing services related to shelter, food, employment and health.

3. What qualifications do you have?
4. Are you currently employed?
5. Did you work before you were homeless?
6. How many jobs have you had since you became homeless?
7. How long did the jobs last?
8. What kind of jobs did you have?
9. What were your experiences of using these jobs you had?

Objective three
To determine if homeless people are well informed about the services available

10. What do you think is good about the health services?
11. What do you think is missing?

Objective four
To uncover the gaps within the current services provided to the homeless.

12. What do you think needs to be improved in employment services for the homeless
13. How do you think it can be improved?
KHULISA

1. What services do you get from khulisa?
2. What do you think are the strengths of khulisa services?
3. What do you think needs to change about the services?
4. How would you change it?
APPENDIX II

UNIVERSITY OF CAPE TOWN

FACULTY OF HUMANITIES
DEPARTMENT OF SOCIAL DEVELOPMENT

REQUEST FOR PARTICIPATION & CONSENT FORM

Name of Researcher: Nontsikelelo Nzula
Student number: NZLNON001

This research forms part of the qualification for a Masters in Social development degree in the Department of Social Development at the University of Cape Town

Title of Study: “An exploratory study of the perceptions and experiences of homeless persons regarding service provision by Khulisa Solutions, a Non-governmental Organisation in the Western Cape”.

Objectives of the Study:
● To explore the perceptions and experiences of homeless persons on accessing services related to shelter, food, employment and health.
● To investigate if homeless people are well informed about the services available to them.
● To determine the strengths and weaknesses of available services around shelter, food security, employment and health services.
● To uncover the gaps within the current services provided to the homeless.

Please read the following and sign if you agree to participate in this study.

Research Procedures: I understand that I will be participating in an interview process to explore the experiences and perceptions of homeless people regarding service delivery.

The interview will last approximately one hour and will be recorded with your permission using a digital recorder or by taking notes. The recording will be transcribed and the notes, the recorded information and the transcripts will be kept in a secure place. Once the research has been completed, this material will be only be used for academic purposes and the transcripts will be
destroyed.

**Risks and Harm:** There are no foreseen risks or harm in participating in this research. However, in the event of any emotional distress by a participant, the researcher will make a referral for appropriate assistance.

**Benefits/Incentives:** I understand that this research will not benefit me directly and that I will not be paid for agreeing to do this interview. However, through my participation, the information gathered will provide important information on the experiences and perceptions of homeless people regarding service provision.

**Participant’s Rights:** I understand that I am free to withdraw from participating in this study at any time, without giving any reason and that there are no consequences should I decide not to participate at any stage.

**Confidentiality:** I understand that the interview process will be kept strictly confidential and that information will be available to the researcher and the supervisor. Extracts from the interviews will be included in the final research report without anyone being able to link my quotes to my identity. The final report will be examined by an external examiner and the findings will be made available to participating agencies. Under no circumstances will my name be revealed in the report or any other publications related to this research.

I understand that if at any time I would like any additional information about this research, I can contact the research supervisor, Dr Somaya Abdullah telephonically at 021 650-4219 or by email at somaya.abdullah@uct.ac.za

I confirm that I have read this consent form or researcher has read it to me and that the study has been explained to me. I voluntarily participate in this study

**Signature of Participant**

**Date (dd/mm/yyyy)**

**Signature of Researcher**

**Date (dd/mm/yyyy)**