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The responses of the Gauteng Department of Social Development to homelessness during the COVID 19 lockdown: A case study of two Tshwane and Johannesburg homeless shelters

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FACULTY OF HUMANITIES

SCHOOL OF SOCIAL SCIENCE

ORGANISATIONAL AND INSTITUTIONAL STUDIES

RESEARCH REPORT

The responses of the Gauteng Department of Social Development to homelessness during the COVID 19 lockdown: A case study of two Tshwane and Johannesburg homeless shelters.

BY

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Plagiarism Declaration

I **NOLUTHANDO NGCOBO** (Student number: **1533607**) am a student registered for **ORGANISATIONAL AND INSTITUTIONAL STUDIES** in the year **2023**. I hereby declare the following:

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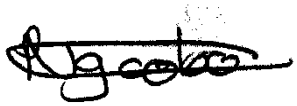

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Abstract

How homelessness presents itself in Gauteng is complex and to dissect this phenomenon, the study undertook to explore the responses and approaches to homelessness during the COVID 19 pandemic and from these, establish how the department conceptualizes homelessness, what policies informed the approaches, and lastly, explore whether these interventions were successful or not. Having used document analysis and semi-structured interviews with social workers, the study made key recommendations for the DSD to take into consideration for future interventions. Of great concern is the lack of policy and a legislative framework that guide strictly the DSD's interactions with homeless people. The study further found that factors including unemployment, migration and urbanisation, and substance abuse are structural factors that attribute to the persistent nature of homelessness in Gauteng. If the DSD seeks to truly eradicate homelessness, the study recommends that more resources need to be invested into sustainable interventions, improving intergovernmental relations as the problem is greater than the confines of the department, and developing solid policy and legislation.

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  What a journey!

Acronyms and Abbreviations

CNDC	Community Nutritional Development Centres
COGTA	Department of Cooperative Governance and Traditional Affairs
COJ	City of Johannesburg
COT	City of Tshwane
DHS	Department of Human Settlements
DoH	Department of Health
DSD	Department of Social Development
EPWP	Expanded Public Works Programme
GBV	Gender Based Violence
GDSD	Gauteng Department of Social Development
ICESCR	International Covenant on Economic, Social, and Cultural Rights
ID	Identity Document
IDP	Integrated Development Plan
IPPR	Integrated Social Development Policy, Planning and Research
LGBTIQI+	Lesbian, Gay, Bisexual, Transgender, Queer and Intersex Community
MEC	Member of the Executive Council
NDP	National Development Plan
NGO	Non-Governmental Organisation
NPO	Non-Profit Organisation
READ	Ready materials, Extract data, Analyse data, Distil
SADC	Southern African Development Community
SANCA	South African National Council in Alcoholism and Drug Dependence
SAPS	South African Police Service
SASSA	South African Social Security Agency
SERI	Socio-Economic Rights Institute

CHAPTER ONE: INTRODUCTION AND BACKGROUND

Introduction

Linda Lingle as cited in Dicus (2004) stated that:

> "We have come dangerously close to accepting the homeless situation as one that we just can't solve".

The quote above captures the unfortunate reality of homelessness that cuts across the globe. This persistent problem in South Africa and around the globe has been intensified even more by the complex pressures of the COVID 19 Pandemic. The Department of Social Development (DSD) based at the national level of government, in line with its policies, was at the forefront of ensuring that homeless people are transferred to a place of safety during the COVID 19 pandemic. DSD assumes this role primarily because this is the department's mandate, to provide social protection services and establish stakeholder relationships with institutions that have the goal to improve the lives of vulnerable individuals, groups, and communities (Government Communication Information System, 2020).

This intervention was directly carried out by social workers at various DSD Regional offices and had its successes and shortfalls, which this study intends to investigate by accessing the approaches of the department to homelessness and its future implications for the department. The findings reflect that the approach of the department has been two-fold, while they have expanded the services of existing shelters (Mitchley, 2020), they have also established new temporary shelters to ensure the constitutional right to housing, shelter, and human dignity of homeless people is protected.

Tshwane and Johannesburg are two geographical locations of interest for this study because both cities provided temporary shelter to homeless people (Mitchley, 2020). Both cities are in Gauteng, the province with the highest rate of in-migration, reporting that 1,462,553 million people migrated to Gauteng from other provinces and other countries from 2011 to 2016 (Alexander, 2020), and a projected in-migration rate of 1,595,106 million people from 2016-2021. This study finds that people continue to migrate to Gauteng for many reasons, primarily employment, and unfortunately, some find themselves homeless (Omar, 2012). The term 'Homeless' refers particularly to persons living on the streets; however, the study reveals the many ways that DSD and its officials understand and conceptualize the term "homelessness".

For this study, homeless people are conceptualized as those living on the streets, without a habitable space with the security of tenure, rights, and the ability to enjoy social relations, including safety, family, and a sense of belonging (Social Development Integrated Social Development Policy, Planning and Research (IPPR) Unit, City of Johannesburg, 2021).

The study is informed largely by a gap in the policy and legislation for homeless people and it is therefore expected that the outcome of the research will generate important lessons to inform future social welfare interventions and policymaking by the responsible government institutions. The data collected through qualitative interviews and analysed through the thematic data analysis method provides a detailed diagnosis of the current state of homelessness in Gauteng, revealing that despite the many shortfalls by the institution, such as the lack of policies for homeless interventions, budget constraints, inadequate monitoring and evaluation systems, the department has made effort to establish adequate interventions for homeless people, a group whose needs were solely supported by the city of Tshwane and Johannesburg before the pandemic.

Background

The focus of the study is on Gauteng, particularly Johannesburg and Tshwane. However, the lack of adequate shelter is a problem that the entire country battles with. It dates to the apartheid era and has persisted for several reasons including inadequate housing policies and housing backlogs resulting in informal settlements and land invasions (Olufemi, 1998). Currently, the country is faced with a problem of street homelessness whereby it is estimated that there are about 200 000 homeless people in South Africa (Cross et al, 2010). Although homelessness is often linked to poor housing reforms, over the years it has become increasingly aggravated by social factors such as unemployment, mental illness, and substance abuse, amongst many others (Nixon, 2016). In 2020, the acting MEC of the Gauteng DSD, Mr. Panyaza Lesufi, reported that Gauteng alone has +/- 50 000 homeless people of which 15 000 are located within Johannesburg and 10 000 in Tshwane (Mitchley, 2020). Against such figures, before COVID 19, the city of Johannesburg has accounted for housing only 1800 people and the city of Tshwane an additional 2500 people (Mitchley 2020), by placing them in either existing shelters or establishing temporary shelters. Although there are no exact statistics and demographics of homeless people in Gauteng, there is also no contestation that homelessness is a major problem in the province and for the general population of South Africa. The unavailability of direct statistics begs the question of how DSD decides on interventions, social welfare policies, and budget allocations.

In March 2020, homeless people were presented with new challenges when the president declared a national state of disaster in South Africa (Khan, 2020). The government implemented the Disaster Management Act, 2002 (Act No. 57 of 2002) and in response to the nature of COVID 19, declared strict restrictions on movement, where people were expected to stay within their confined spaces unless in need of essential services (COGTA, 2020). Subsequently, the national DSD instituted measures as per the declaration of the national state of disaster. The department, in its national, provincial, and local capacity committed to temporarily providing increased support to shelters for homeless people during the level 5 lockdown and, as at the time of writing, continue to re-prioritize, within their available budgets, the needs of people in shelters (Department of Social Development, 2020). The approach of the Gauteng DSD is twofold; firstly, the department aimed to increase the intake and services of already established shelters which are expected to expand their services to allow more homeless people to occupy the shelter. Secondly, DSD established temporary shelters, some in the form of tents villages, to provide shelter to homeless people during the pandemic (Mitchley,

2020). DSD may have responded to the situation promptly; however, the interventions were met with resistance, in some cases from people who are homeless (also known as ‘service users’). Therefore, the interest of the study is to understand the nature of these approaches, what they reveal about the department's understanding of homelessness, policy implications, and possibly generate lessons that can be taken into consideration when establishing future intervention by the Gauteng Department of Social Development.

Rationale

The COVID 19 pandemic has demanded that the issue of homelessness is given rapid attention by the DSD after years of neglect. The South African Constitution, 1996, affirms that everyone has several political, social, and economic rights that the state must respect and promote – key amongst them is the right to human dignity, housing, health care, food, water, and social security (Tenai & Mbewu, 2020). The constitution of South Africa aligns closely with international laws including the International Covenant on Economic, Social, and Cultural Rights (ICESCR), which highlights that people have the right to an adequate standard of living, including adequate food, clothing, housing, and the continuous improvement of living conditions. Various organizations and institutions are responsible for eradicating homelessness in South Africa and have made a wide range of attempts relating to both policy and interventions; but the problem of homelessness persists. As a researcher, I note that the existing literature shows a strong overlap in the duties of the local government and regional DSD, although this overlap could be beneficial to homeless people, it is difficult to differentiate who is responsible for which approach and hold them accountable for the progress made or lack thereof. The study fits in appropriately here, separating the responses of DSD and in cases where duties overlap with local institutions, the research should be able to reveal whether these relationships are favourable for homeless people.

Before COVID 19, in line with the Social Assistant Act, 1992, DSD provided shelter [1]to people through various local NGOs. Despite this, there has been an increase in people who are homeless due to reasons such as overcrowding and shortages of food and beds at the temporary shelters. The DSD also admits to having underestimated the numbers, providing the intervention on an estimate of about 15 000 homeless people in Gauteng (Mitchley, 2020). It was later established that there are over 50 000 homeless people in Gauteng, of which 15 000 are in Johannesburg and 10 000 in Tshwane (Mitchley, 2020). Waine (2021) argues that people opt to live on the streets for several reasons including undesirable experiences with shelters, shelter rules that infringe on people's rights, food shortages, and other factors that may have impeded the success of intervention programmes, resulting in people escaping back to the streets to continue making means for themselves. During COVID 19, the Minister of Social

[1] The term shelter in this regard is broad, inclusive of shelters providing social assistance to children, women, substance users and the elderly. Prior to the pandemic, DSD did not have a homeless programme however homeless people who reached out to the DSD, would receive assistance from other units within the department based on their nature of the problem they are experiencing.

Development, Ms. Lindiwe Zulu, announced that 163 shelters were established for the homeless during level 5 lockdown which accommodated over 14 000 people across the country (Department of Social Development, 2020). At these shelters, DSD attempted to provide personal protective equipment (PPEs), dignity packs, food, sanitizers, sleeping mattresses, and blankets. While at some temporary shelters, homeless people were provided with skills development, others were reunited with their families and because some people struggle with substance abuse, DSD provided residents with substance abuse assistance and psycho-social support services (Zulu, 2020). This is not necessarily the case at most shelters as Van Cutsem (2020) makes contradictory findings that the shelters had several violations of international humanitarian standards, exposing residents to conditions that further compromise their health and safety (Cutsem, 2020).

An observable problem, which informs the basis of this study, is the lack of rigorous evaluation of responses by the provincial department; such an evaluation of interventions would lead to the continuous improvement of responses by the department and the establishment of new policies. Proof of the lack of adequate monitoring and evaluation systems manifests itself in situations where DSD repeatedly uses the same approach to homelessness such as temporary shelters which alone, have not elevated the issue of homelessness in South Africa.

Another challenge is the resistance to homeless shelters by the service users. Following the level 5 lockdown in 2020, Mitchley (2020) reports that many homeless people returned to the streets despite the country still being in lockdown. The resistance of homeless people to these shelters also demonstrates that there is limited inclusion of them as active decision-makers. Public participation is important as it allows for a bottom-up approach in comparison to a top-down approach which may result in more substantive outcomes (Bryson & Carroll, 2007). Although DSD had consultative hearings and processes with the Commission for Gender Equality relating to shelters in general (Commission for Gender Equality, 2020), the failure to isolate the interventions and policies of homeless people from other forms of shelters leads to the prioritization of other groups such as old age shelters and GBV shelters (Commission for Gender Equality, 2020).

Research Question

What do the responses to homelessness undertaken by Gauteng DSD during the COVID 19 lockdown reveal about understandings of and approaches to homelessness?

This research question is to explore the responses and approaches to homelessness during the COVID 19 pandemic and from these, establish how the department conceptualizes homelessness, what policies informed the approaches, and lastly, explore whether these interventions were successful or not, whether they had any policy implications which Gauteng DSD can take into consideration for future interventions. This type of question is exploratory as it seeks to establish the relationship between the phenomenon (homelessness) and responses to it (interventions and policies by Gauteng DSD) to draw lessons for the future for the department (Alvesson & Sandberg, 2012).

Aims and Objectives

The overall aim of the study is to explore what the responses to homelessness undertaken by the Gauteng Department of Social Development during the COVID 19 lockdown reveal about their understandings and approaches to homelessness.

The objectives of the study are,

1. To broadly understand the nature of responses and approaches undertaken by Gauteng DSD.
2. To identify the interventions that were implemented to assist the homeless people from March 2020 to March 2021 in comparison to other years.
3. To establish which policies informed these interventions.
4. To identify the failures and successes of the interventions from the perspectives of both the shelter and government officials.
5. To establish the implications for future policies relating to the homeless.

Theoretical Framework

Structural functionalism as a school of thought emphasises that the institutions, relationships, roles, and norms that make up a society are all important for the existence of the others and society as a whole (William & Wilterdink, 2023). The theory further emphasis that social change is regarded as an adaptive response to the tension within the social system (William & Wilterdink, 2023).

Using this theory to guide this paper, all homeless people are born into and exist within a predetermined social system where they are expected to live up to certain roles and norms. The theory explains that their homelessness or choice to live on the streets comes therefore as an adaptive response to the tension within the social system. Such tensions as found in the study include unemployment, family conflict and the many other issues that lead people into homelessness. In this study, the DSD is an institution of interest and its responses to homelessness are interpreted as attempts by the department restore social systems that have been affected by various tensions.

Functional analysis and structural analysis can be traced in the work of many authors including Durkheim and Parsons. Durkheim who argued that parts of society are interdependent, and this imposes structure on the behaviour of institutions and their members (William & Wilterdink, 2023). Part of the objectives of this study are to establish the success and failures of the department. The findings of the study reveal a lot of critique towards the department however this stems largely from the fact that homelessness is not solely the role of the DSD. Having noted that parts of society are interdependent, homelessness also requires a holistic approach.

Durkheim further argues that there are two types of societies, characterized either by mechanical solidarity or organic solidarity (Pope, 1975). The former refers to communities where the is less economic advancement and social groups perform the same or similar functions (Pope, 1975). Organic solidarity is more relevant in cities like Johannesburg and Tshwane, where the societies interdependence is based on the differentiated functions that people and institutions perform. The inability to fit in economic activities and other societal functions is what causes homelessness in Gauteng.

Talcott Parsons further dissects the theory into functional prerequisites which social systems must meet to survive (Britannica, 2020). First, a social system is required to adapt as the environmental demands change. Second, a social system is required to define and accomplish its goals. third, the interrelationships within a social system must be integrated and lastly, a social system needs to preserve and enhance motivation among all that exist in it. Given this, homelessness is a result of a social system that is on the verge of collapse. Based on this theory, the study expands extensively on how various components of the social system have contributed to this collapse.

Structure of the Thesis

Following this section, the thesis will outline the literature review in Chapter two. The literature review looks at global literature as well as local literature, which mostly focuses defining homelessness. There literature shows a significant gap in theory that allows for constructive debates around homelessness and how various countries have been able to tackle the problem.

Chapter three outlines the methodology, elaborating on how the data is collected, analysed and any ethical and limitations of the study. The data was collected from semi structured interviews with social workers and public documents from the department's archives.

Chapter four is a presentation of the findings as per the data mainly from the perspectives and experiences of social workers. Chapter five analyses the findings of the study, bringing in document and theoretical perspectives to support the analysis. Based on the analysis of the departments responses, policy position, failures and successes, the study generated key recommendations for the department. The final chapter draws holistic findings of the thesis.

CHAPTER TWO: LITERATURE REVIEW

Introduction

This literature review begins by providing the context of homelessness in South Africa and how COVID-19 impacted this group of people. Part of the interventions by the DSD during the pandemic included establishing Non-Governmental Organizations (NGOs) that could expand their services and establish new sites in both Johannesburg and Tshwane where homeless people would be temporarily housed, thus sheltering them, and enabling them to access other forms of government assistance, such as social grants. This section takes on a concept-centric approach, which will unpack the important concepts of homelessness, shelters, and homeless policies in the existing literature. These concepts are unpacked concerning homelessness in Gauteng and how they may have been altered by the COVID 19 lockdown.

Conceptualization of homelessness

Given that the purpose of a literature review is to outline existing literature, this section is structured according to how various theories, government institutions and researchers have conceptualized homelessness, and in the process, identifies the existing gaps in the literature.

Homelessness is a global phenomenon. The Institute of Global Homelessness developed a framework to understand homelessness on a global scale and this framework understands homelessness as the inability to access adequate housing (Louise, 2023). This framework is broad as it incorporates people without accommodation, people temporary living on the streets or in crisis accommodation and people living in severely inadequate and insecure housing. The causes of homelessness are the same across the globe, homelessness is linked with housing deficits and affordability issues, unemployment, substance use and mental illness, family conflict and other social issues. The discussion of global literature should perhaps focus on the variations in how different countries respond to homelessness.

Finland, whose homeless statistics sit at 0,13% implemented a national plan which required that all stakeholders including national and city governments, private financers and NPOs to work together and execute a well-co-ordinated approach to homelessness. The plan focused mainly on permanent and long-term housing solutions as opposed temporary shelter. Canada contributed $70 billion toward safe and affordable housing. Japan's Tsukuroi Tokyo Fund has also been intentional about rehabilitating abandoned homes for homeless shelters (Thompson , 2021). Although for these countries, having adequate housing has eradicated the problem, very little global literature provides comparative solutions that incorporate the diversity of issues that homeless people are experiencing outside from the lack of adequate housing. Although the stats are significantly lower in countries like Finland, literature does not consider other debates such as that their economic landscape is doing well with an unemployment rate of 6.7%.

In South Africa, the Department of Human Settlements (DHS) looks at homelessness as the lack of adequate shelter. Their definition of homelessness incorporates three categories, which are primarily those living on the streets irrespective of the period, those living in overnight shelters as well as those living in informal settlements (Government Gazette, 2020). This definition of homelessness echoes the sentiments of the conflict theory which advances that capitalism causes homelessness as the competition for limited resources allows the bourgeois to maintain power and domination over the proletariat (Anderson, 2003). The DHS reports that irrespective of the 2.7 million houses that the department has provided over a period of 15 years, there is still a backlog of about 12 million people, who still need of adequate access to housing. Some of the factors that have led to such a large backlog include the increased urbanisation and demographic pressure in cities, unavailability of adequate and reasonable land, land costs and other pre-democratic legacies and inequalities (Marutlulle, 2021). The

backlog also reflects that there is conflict and competition over limited resources such as land, employment opportunities and limited government subsidy towards housing (Marutlulle, 2021). However, the conflict theory neglects structural factors that supersede an individual's shortcomings. The conflict theory also does not account entirely the objectives of the Gauteng DSD whose focus is street homelessness. The focus of this study is on the Gauteng Department of Social Development rather than the housing sector. The Homeless Summit (2015) defines homeless people as those people living physically on the streets and falling outside a viable social network of social assistance and, therefore, who are unable to shelter themselves. This category of people includes both temporary and chronically homeless people living on the streets, the homeless summit (2015) motivates that chronic homelessness normally starts with temporary homelessness. Further, to extend this working definition, homeless people include both South Africans and non-South Africans who despite the dynamics that they find themselves in, were also included in the intervention by the Gauteng DSD during the COVID pandemic.

Homelessness includes many intersecting issues including unemployment, poverty, and other social factors in South Africa. During the Homeless Summit (2015) it was concluded that homelessness cannot be dealt with by an approach that isolates it from these factors. To further break down homelessness, Hartshorn (1992) groups homeless people into the following categories: Chronic homelessness, Economic Homelessness, Situational Homelessness and Near Homelessness. Chronic homelessness refers to people who are homeless because of chronic illnesses and substance abuse; they may have been isolated from society for many reasons including the fact that they may be permanently unemployed (Hartshorn, 1992). Economic homelessness includes refugees, migrants from other provinces and countries that may have come into the country to seek employment, but they find themselves either unemployed or displaced because they are unable to afford decent housing (Hartshorn, 1992). Situational Homelessness includes people who are homeless because of conflict with family/ community, domestic violence, and abuse (Hartshorn, 1992). Lastly, near homelessness refers to vulnerable groups that are at risk of being homeless on any day (Hartshorn, 1992). Both The Homeless Summit Report (2015) and Hartshorn (1992) conceptualize homelessness well and identify the factors that cannot be isolated when trying to establish pathways out of homelessness. How they refine and conceptualize homelessness will be used as a reference in this study.

To further expand the analysis, it would be ideal to see more literature that locates homelessness within the structural-functionalist theory rather than the conflict theory. I argue that homelessness is a structural issue and therefore should be conceptualized as such. The structural-functionalist theory argues that social systems are in the form of a hierarchy that consists of subsystems, each of which is characterized by institutional norms and value systems (Vincent, 2001). To maintain social stability; socialization and social integration are essential even for homeless people who seem to deviate from the norms. For this study, the structural theory assists in understanding the responses of the DSD. Durkheim (1893) identifies homelessness as a deviation from society's attitudes, beliefs, and norms. Street homelessness is multidimensional and not simply limited to the lack of shelter. It includes physiological (shelter, comfort, and warmth), emotional and spiritual (hope and purpose) dimensions (Somerville, 2013). Taking note of numerous pieces of literature that seek to conceptualize homelessness, each definition requires specific responses. I.e., if homelessness is defined as a structural issue then the responses of the institution are expected to stem from that. Existing literature has not been able to identify how DSD conceptualizes homelessness particularly because a fully-fledged homeless programme is one that was only established at the onset of the pandemic. How DSD conceptualizes homelessness in theory versus in practice will emerge from the findings of this study. This research will also shed light on whether the complexities of COVID-19 have had any impact on how we conceptualize homelessness and whether these definitions would need to be incorporated for future interventions.

Briefly, in the context of the COVID 19 pandemic, homeless people according to Perri, Dosani, and Hwang (2020), have become a much more vulnerable group because of their high prevalence of chronic health conditions. This is exacerbated by the fact that recently, shelters had become an environment that allows for the transmission of COVID 19 because of the limited hygiene practices, shared living spaces, overcrowding, and the inability to maintain a safe physical distance. This context is particularly important for this study as the pandemic dictated that homelessness be treated with urgency.

In the South African context, homelessness affects all races; however, the majority are black people (De Beer & Vally, 2016). Moyo, Patel, and Ross (2015) link this racial disparity to South Africa's long history of colonialism and apartheid legacy which contributed greatly to issues such as migrant labour, unequal urbanization policies, racial segregation, and housing backlogs. It should also be noted that the homeless category includes both South African citizens as well as people who have migrated from other countries to escape their own countries'

socio-political issues (Moyo, Patel & Ross, 2015). Although most people living on the streets have generally tended to be men, there has been an increase in cases of women.

Homelessness and Shelters

Prior to the onset of COVID 19, the DSD has always provided shelter through funding and the regulation of various local NGOs that provide shelter to people based on their distinctive needs. Despite this, there has been an increase in people living on the streets. The Bowery Residents Committee, an NGO for homeless people located in New York, raise valid debates about what circumstances lead to homelessness. The committee acknowledges that living on the streets is extremely challenging; however, homeless people will opt for the freedom they get on the streets as compared to the structure (rules) provided by shelters (Salamon, 2021). Salamon (2021) further argues that most people have explored shelters in the past and it is through undesirable experiences within these institutional settings that they develop resistance and doubts. Damon (2002 as cited in Waine, 2021) adds that homelessness is an individual choice where the person would rather live on the streets than adhere to the living conditions offered by the shelter. All these arguments ignore the criticisms leveraged against shelters. A South African court case argued by Socio-Economic Rights Institute (SERI) between Dladla and City of Johannesburg ruled on how shelter policies are undesirable and unsustainable for homeless people. These policies include splitting families, lockout hours during the day and daily fees (Mogoeng, et al., 2017). Although the Constitutional Court found these rules to be an infringement of homeless people's rights, shelters continue to operate in line with rules such as lockout hours. It is only because COVID 19 lockdown level 5 demanded that people remain within confined spaces that these rules were relaxed. Shelters faced other challenges such as food shortages, which is one of the factors that may have impeded the success of the programme resulting in people escaping back to the streets to continue making means for themselves during and Post level 5 lockdown (Mitchley, 2020). At the time of this paper, there was still significant gap in literature reporting whether these level 5 arrangements are still in place, including the tent villages that were established across the country. Media reports reflect that some tent camps have been demolished, leaving homeless people without shelter (Damons, 2021). Further, Gauteng DSD has not provided a thorough evaluation of their interventions, nor have they gazetted their contingency plans to mitigate homelessness post-COVID 19.

Temporary Shelters

During COVID 19, the response of the national DSD was to provide temporary shelter to almost 14 000 people across the country (Department of Social Development, 2020). This is a relatively small number noting that there are an estimated number of between 100 000 -200 000 of homeless people in South Africa.

At these shelters, DSD made efforts to provide the service users with necessities which have been described above. The minister subsequently reports that there has been a drop in residents using drugs (Zulu, 2020). This is contrary to the findings of Van Cutsem (2020) who finds in a study that residents at the Strandfontein Shelter were only given paracetamol in response to the withdrawal symptoms that they were experiencing. The shelters did not have sufficient medication to reduce the issue of withdrawal symptoms, which led to homeless people leaving the shelters. The study further finds that the Strandfontein Shelter had several violations of international humanitarian standards, exposing residents to conditions that further compromise their health and safety (Cutsem, 2020). While the Shelters are a response to COVID regulations, the shelters are overcrowded exposing the residents to increased risk of infection with COVID-19. The above are merely some of the issues that arose from temporary shelters which have led Curtsem (2020) to conclude that there are more chances of infection at the shelters than when the residents were on the streets. Post level 5 Lockdown the Gauteng DSD has not provided sources of how they reached conclusions on shelter intervention, nor have they provided an evaluation of the outcomes brought by temporary shelters and the implications for future interventions or the possibility of policy changes.

Policy and legislation of homeless people

As mentioned above, locating literature that speaks to the policies and legislation directly linked to homeless people during COVID 19 is a challenge, particularly because some of these may have not been formally documented by Gauteng DSD. One of the clear national policy adjustments was the provision of social assistance in the form of grants, in line with the SASSA Act No 9 of 2004. The government through the DSD responded to the pandemic by increasing social assistance programmes such as social grants and introducing a special COVID relief grant. An analysis of how many people applied in comparison to those who received the COVID 19 relief grant finds that the application for the COVID 19 grant does not favour people from poor backgrounds and puts the middle class at an advantage over poor people (Kohler & Bhorat, 2020). As of June 2020, of the 11.33 million applications received, 4.35 million

applications were still pending and 2.65 million had been rejected. The application excluded homeless people who may not have the necessary documents or access to a cell phone.

The Western Cape DSD has clear policies on homeless people and further norms and standards for shelters. The Street People Policy, Cape Town (2013) provides for the establishment of a local network of care for homeless people. The homelessness policy for the City of Tshwane (2012) also outlines the approach of Tshwane to homelessness, what stands out from this policy is that it aims to establish at least one shelter that belongs to the council in each region.

The City of Johannesburg (COJ) also has a comprehensive strategy to assist the homeless, its overall aim is to reintegrate people living on the streets with their families and communities. The programme is run under the COJ's Social Development Unit where they monitor organizations that are funded by the COJ to provide services including shelter and outreach programmes to homeless people.

Noting that homelessness is not solely the responsibility of government institutions, NGOs and Faith Based Organisations play a key role in the fight against homelessness and other social ills. In a study by Tenai and Mbewu (2020) they identify the need for faith-based organizations to also have their own policies that inform how they approach the homeless. Their approach is that churches need to be involved in policy discourse and secondly to ensure that policies established consider the context or conditions under which policy is developed. The Socio-Economic Rights Institute (SERI) Case described above is an example of instances where NGO's have policies that contradict the rights of homeless people (Mogoeng, et al., 2017).

Evidently, locating policies for homeless people is one of the challenges that probed this study. While other policies are still in the pipeline, and many are unique to the various municipalities, none of the policies are binding for all homeless people interventions across the country. My concern with these policies is how to measure their efficiency; and the extent to which the different departments and municipalities consider these policies when making decisions relating to homeless people. Policies are important because they guide the strategic use of the institutions' resources and define the rational basis of action and inaction (Mitchell & Mitchell (1972). The lack of universal public policies, therefore, makes it inherently difficult to establish the gap between what government institutions have committed to do versus what they are doing in reality. Considering the latter, the City of Johannesburg is in the process of establishing a policy for homeless people in the city. The goal of the policy is to contribute towards the City's aspirations of fulfilling the Sustainable Development Goals, the National Development Plan

(NDP) 2030 directives, local government Integrated Development Plans (IDP) and other relevant strategies that foster a better quality of life for the homeless (City of Johannesburg, 2022). From existing information, there appears to be progress in terms of public policies from the municipality's side. However, the DSD, whose role is to provide social security to vulnerable groups of society, does not have a national, provincial, or regional policy for homeless people nor does it acknowledge the municipal policies in any of their interventions. The DSD aligns its operations with the NDP whose plan is to eradicate the persistent poverty, unemployment, and inequality in South Africa. The department also prioritizes Sustainable Development Goals, and therefore it is prudent to establish what is hindering progress, especially for homeless people.

Conclusion

Considering the literature presented above, a general concern for me has been how the Gauteng DSD reaches decisions on policy or interventions. Their response to eradicating homelessness during the COVID 19 pandemic has been met with hostility and in some cases, has been rejected. Mitchley (2020) reports that by the 1st of April 2020 about 200 homeless escaped from Caledonian Stadium temporary shelter after they had been brought in by law enforcement. Some of the reasons for escapes are linked to overcrowding, meaning that the police at some of the shelters could not manage the large numbers, substance abuse and food shortages at the centre. The article suggests that this was due to poor coordination and planning by the various organizations involved and very little inclusion of the actual service users as well as community organizations such as NGO's and FBO's, who work with homeless people daily, in the active decision-makers in the process. Although the national DSD has various policies (general policies such as the Substance Abuse Act) that are incorporated on a case-by-case basis by the department, there is minimal literature evaluating whether these policies have been effective; nor is there rigorous literature that evaluates how the department has adopted the policies to accommodate the growing trends of homelessness. For future research, it would be beneficial to evaluate the successes and failures of these interventions to gear towards alternative responses.

CHAPTER THREE: METHODOLOGY

Introduction

The purpose of this research was to reveal the government's response to homelessness during the pandemic and ultimately produce findings that can contribute positively towards eradicating homelessness in Johannesburg and Tshwane. The focus of this research was on DSD Tshwane and Johannesburg, both of which had allocated social workers voluntarily to various homeless hotspot areas and shelters to service homeless people during the pandemic. The participation by social workers was voluntary because the department does not have a designated homeless unit. Social workers were recruited from the Family, Child, and Statutory units within the department. Social workers were allocated to hotspots such as the Caledonian Stadium in Tshwane and Wembley Stadium in Johannesburg which are temporary shelters that were established at the onset of COVID 19 in March 2020. To give background on the two case studies: The shelter in Caledonian Stadium in Tshwane is one of the temporary shelters established by the Gauteng DSD. The aim was to provide accommodation and basic services to homeless people during the pandemic (Xulu-Lentsoane, 2020). The temporary shelter in Wembley Stadium was also established during the pandemic; however, the program operates under a DSD-funded NGO, Kusasalethu. The shelter has progressed from being a tent village to having formal park home building structures.

The research study was situated within the interpretivist paradigm, which seeks to understand how various key participants (primarily social workers) make sense of the interventions of the DSD during the pandemic. Data was collected using document analysis and semi-structured interviews with social workers. Thematic analysis was used to analyse the data. The hope is that the general outcome of the study can influence future interventions.

Research Design and Paradigm

The study adopts a case study design as it is focusing on DSD Tshwane and Johannesburg which provided shelter to homeless people from March 2020 to March 2021. The data was situated within the interpretivist paradigm, which acknowledges that multiple realities may influence how people make sense of homelessness. The interpretivist paradigm involves understanding the social context that participants work in and through interactive processes, understanding their human experience, view, and how they make sense of the social world (Rehman & Alharthi, 2016).

Qualitative Document Analysis

The research study is a qualitative one as it seeks to generate rich in-depth data from single cases rather than statistically representative samples (Corbetta, 2003). Data was also collected through secondary data in its various forms as outlined by Daglish, Khalid, and McMahon (2020). This data included official documents such as policies, directives, and annual performance plans that were retrieved from the departments archives and the Parliamentary Monitoring Group archives which are public. Other documents that were analysed include legislation, media, and communications in the form of public reports.

During the data collection phase, secondary sources were used for analysis. These secondary sources include policy documents such as government gazettes that were published during the lockdown and prior documents that may have triggered policy adjustments. The approach used was the READ approach which is a systematic procedure for collecting documents in the context of health policy documents (Daglish, Khalid, McMahon, 2020). The first step was to prepare the documents, whereby the researcher established the document parameters. The documents were collected from various platforms including Google Scholar, government department websites, and government gazettes. The second step wass to extract the data. A spreadsheet with all the categories of data was compiled, including the dates, titles, and conclusions of all the documents. Third, when analysing the data, the researcher seeks to establish if there are any missing documents, trends, and patterns (Daglish, Khalid, & McMahon, 2020). Here, the researcher kept a reflexivity journal where their position towards the data was recorded to eliminate any forms of bias. The final step was to distil the findings into more in-depth categories (Dalglish, Khalid & McMahon, 2020). The purpose was to ultimately generate findings that address the aims and objectives of the study.

Semi-Structured Interviews

The purpose of conducting semi-structured interviews with social workers was to understand the interventions directly from the people who work with the beneficiaries of the shelters. This allowed the author to explore where the successes and failures are based on the perceptions of the various participants and to establish possible alternatives. Semi-structured interviews allowed for the researcher to establish a guide that is flexible and allows for open-ended questions for the topic to be explored further (Trigueros & Sandoval, 2017).

Population and Sampling

The study focused on key informants, particularly social workers who were involved at the onset of COVID-19 when the interventions were established. It would have been ideal to interview homeless participants; however, given the complex nature of COVID, there are challenges anticipated with locating homeless people as well as getting them to access online means of data collection. The researcher reached a total of thirteen (13) participants, that's seven (7) DSD Tshwane Social Workers, and six (6) DSD Johannesburg social workers and officials.

The aim was to ensure diversity in the number of working years of participants because their diverse working experience affects one's perceptions of issues. The DSD Tshwane homeless Unit has more participants than DSD Johannesburg because the homeless unit is more capacitated in terms of staff and resources.

The sampling method used to identify participants is as follows:

- Permission was received from the Gauteng DSD to conduct research with employees who were tasked with the establishment and operations at Caledonian Stadium and Wembley Stadium.
- Social workers were identified through snowballing noting that the availability of officials was limited.
- Given the COVID 19 pandemic, the plan was to conduct interviews with social workers online through the use of platforms like Ms-Teams or Zoom; however, the preference of the participants was to have the meeting physically.

Purposive sampling was used particularly because this method allows the researcher to identify and select participants that are experienced and knowledgeable on the topic (Cresswell & Clark, 2011). This method is more applicable to this study because it takes note of the availability and willingness to participate, as well as the ability to articulate experiences (Bernard, 2002). The snowballing method allows for the participants to assist the researcher to identify other participants (Cresswell & Clark, 2011).

Data Analysis

Thematic analysis was selected as a fundamental approach to analysing qualitative policy data. This method is most suitable for this study because it allowed for the interpretation of

significant patterns. Thematic analysis provides a guideline to identify, analyse, and interpret patterns emerging from the data to respond to the questions (Clarke & Braun, 2006) further revealing how various categories are associated with each other (Herzog, Handke, & Hitters, 2019).

There are limited policy studies that explicitly discuss why thematic analysis was employed in many studies (Herzog, Handke, & Hitters, 2019). It was therefore a difficult task to find the best form of application of thematic analysis for this study. Firstly, noting that that the study is based on the perceptions of the DSD officials, thematic analysis was relevant as it allows for the analysis of experiences, perceptions and understandings of the interventions and policies in place. What has further influenced the selection of thematic analysis as a suitable method for this study, is that it allows for theoretical freedom and flexibility to produce rich and detailed findings (Braun & Clarke, 2006). Braun and Clarke provide theoretical assumptions that should guide how one approaches the data analysis. The theoretical assumptions considered in this study include essentialist and constructionist epistemologies, and inductive and deductive analysis (Herzog, Handke, & Hitters, 2019).

Recapping that the overall aim of the study is to understand what the responses to homelessness undertaken by Gauteng DSD during the COVID 19 lockdown reveal about understandings of and approaches to homelessness. Below is a breakdown of how data analysis was approached in relation to the theoretical assumptions underlying thematic data analysis.

Essentialist and constructionist epistemologies

Essentialist epistemology seeks to simply understand the relationship between language and the communicated experience without interrogating the implicit meanings that exist outside what is shared by the participant whereas constructionist epistemology seeks to have an understanding and interpretation of the language and experience relationship, interrogating the implicit information (Herzog, Handke, & Hitters, 2019). I have therefore attempted to elicit meaningful interpretations from the codes and themes rather than simply presenting the shared experiences of the social workers.

Deductive Analysis

Key to the study is to interrogate existing policies and use the data to identify opportunities for future policies. Thematic analysis is important in this regard as it allows for the analysis to take an inductive and or deductive approach to the analysis. The deductive approach is more theory

driven, analyzing the data based on a pre-existing theoretical framework whereas the inductive approach fits in well working with new data, producing codes solely reflective of the content of the data (Herzog, Handke, & Hitters, 2019). In this case, the deductive analysis approached was adopted.

1. The researcher familiarized themselves with the data.

   The researcher analyzing the data is the same person who has collected and transcribed the data, this means that the process of familiarizing themselves with the data started from their engagement with policy documents relating to homeless people as well as with the social workers. This process was essential as it allowed the analyst to identify important information and retain it (Braun & Clarke, 2006). The process of thematic analysis can only be applied to datasets in written form and therefore I have transcribed all interviews. As a memo I have kept recording of the sessions as well as notes of the sessions where permission was not granted. I have also compiled a mind map of some of the repetitive themes emerging from the interviews.

2. In the second phase, the researcher grouped the information into broad groups, coding as many patterns as possible and to avoid losing the context of the data when excluding some data (Braun & Clarke, 2006).

3. The third phase focused on searching for and establishing themes (Braun & Clarke, 2006). Here, the researcher used a thematic table to analyze each code and place it in themes as well as sub-themes, making it easier to link information that may have been scattered in the transcript. According to Baun and Clarke (2006), there may be codes that do not fall within the boundaries of any themes, and these are placed under miscellaneous themes rather than immediately dismissing them from the data. At a later stage, the researcher evaluated these themes to ensure that important information is not abandoned.

4. In the fourth phase, themes were refined. While others were disregarded, others were merged with other themes. Furthermore, the analyst may decide that other themes are too broad, and these may be broken down into multiple themes (Braun & Clarke, 2006).

5. The fifth phase comprises defining and naming themes that were presented in detail in the final analysis (Braun & Clarke, 2006).

6. The final phase was the actual write-up of the final analysis that should present the findings in response to the research questions that were established earlier (Braun & Clarke, 2006).

Reliability and Trustworthiness

To attain reliability, the researcher has employed techniques to ensure that the data is transferable, credible, and dependable. To ensure transferability, the research is conducted based on two similar settings (Johannesburg and Tshwane DSDs) which allows the researcher to establish whether the findings are consistent within the two populations. To ensure the accuracy or credibility of the data, the supervisor worked hand in hand with the researcher to ensure that the data is interpreted accurately. To establish whether findings would be the same if conducted by another researcher, the author documented all the changes made to the research and keep a paper trail of how conclusion were reached to allow for this dependability. This managed the concern that thematic analysis allows for biasness, as the selection of codes and themes is subjective to the interpretation of the researcher (Herzog, Handke, & Hitters, 2019). Documenting the process is vital in policymaking as it allows other researchers to understand what informed the conclusions reached (Herzog, Handke, & Hitters, 2019). Further allowing for future extensions and debates.

Ethical Considerations

The study exposed participants to no risk; and to further ensure this, the participants were kept anonymous and confidential post the interview stage. For transcribing purposes, I used pseudonyms for each of the participants. Participants were given a participant information sheet which was also explained verbally to them to ensure that they understand what is expected of them before agreeing to participate in the study. A consent form was issued to all participants where they firstly, consented to participate, and secondly, were made aware of audio recordings. Given this, all participants were aware that they have a right to decline audio recording and further may request to discontinue the interview at any given point. The data will be stored and used in line with the departmental and university policy which the participants were informed of in advance.

Outcomes and Limitations

The results collected from the data have outlined how homelessness is conceptualized according to policy and legislation, how interventions for homeless people were developed in

response to the lockdown, and further, which policies inform these approaches. The purpose of the study was to understand the successes and failures of these interventions and possibly establish whether these interventions have implications for future policies relating to homeless people.

One of the limitations of the study is that it was only conducted with a small sample size making the results less generalizable. However, due to the in-depth exploration of these two interventions, this sample has generated data that encourages further research on the topic to bridge the academic literature gap. The study has also revealed the department's understanding of homelessness and how they got to interventions. Further scrutiny of this study by the DSD can lead to better interventions for homeless people in future.

As shown from the onset, there is an inconsistency in the statistics on homeless people. Cross, Seager, Erasmus, Ward, and O'Donovan (2010) attempt to identify the cause of this, they suggest that there is a lack of comprehensive data on homelessness which creates a challenge for policymakers and legislators in their attempts to form policy frameworks that address the problem adequately. Research conclusions are made on assumptions because of the constant mobility of homeless people (Cross, Seager, Erasmus, Ward, & O'Donovan, 2010). It would have been ideal to have a study that incorporates the perceptions of homeless people however this was still a challenge even for this study as homeless people are mobile and the nature of the COVID 19 pandemic did not allow for physical contact.

CHAPTER FOUR: PRESENTATION OF THE FINDINGS

Introduction

The following section presents the results of the study. The data was collected through semi-structured interviews with social workers who worked in the DSD homeless programme during and post the pandemic. These participants were selected because they were at the forefront of the interventions and in the process of finding solutions to the problem, social workers became key role players. The general observation is that Tshwane DSD had made more advances in the homeless programme as compared to Johannesburg whose homeless unit was still under the family unit. As a result, many of the participants in Johannesburg showed an element of role confusion because while the homeless programme tries to find its feet, the social workers are expected to function fully in their respective units.

Another general observation with both the department and social workers, is the disconnect between the two. Many of the participants' concerns with the department including being understaffed, not being consulted on departmental plans, employment of interns rather than permanent staff post and lack of communication. However, none of the participants appeared willing to address their dissatisfaction with the department. All the social workers were keen on participating in the study; however, accessing them was an extreme challenge because many work in units where they cannot pre-plan their schedules in advance as a lot of their work requires them to be on field rather than in the office.

The findings are presented in three segments; prior to the pandemic, during the pandemic and post the pandemic. Therefore, each of the themes identified below, should be understood within these three segments. The onset of the pandemic was categorised by two themes, the lack of preparation and consequently, role confusion between the cities and DSD. Without neglecting the complex nature of the pandemic, the findings show that the department did not have any operating procedures in place because the programme was previously run largely by the municipality. Even though City of Tshwane and City of Johannesburg have been running the programme, they were both criticized of having many shortfalls that compromise the quality of the interventions. Other themes presented below include unemployment, migration, abuse and rejection, substance abuse, gender, and general social expectations all of which are themes that shape how the participants understand homelessness in Gauteng. Further presented in this chapter are the interventions (March 2020 to March 2021) by DSD as well as the policies ad

legislative framework that may have informed these interventions. Towards the end, this chapter reflects on the successes, challenges, implications for future policies and proposed solutions.

Background of the Intervention

To give the context of the interventions by DSD, participants were asked to reflect on the onset of the pandemic. Presented below are a few direct quotes of how various participants reflected on the programme. The consensus is that the programme was completely new to the department, hence the social workers experienced quite a lot of stumbling blocks.

> "*This is still a new programme. We only started it in March 2020*" – Joy
>
> *"Before the pandemic, there was no unit for homeless people at DSD. So, we didn't have it even in our annual performance plans. It was the role of the city"*– Palesa
>
> "*During the pandemic, we volunteered to assist. We were offering psychosocial services to the homeless people."* – Ben

The above quote shows that the homeless programme was previously the sole responsibility of the City of Johannesburg and Tshwane. DSD did not have a homeless unit that deals with shelters prior to this, thus social workers from the department had to be called in to assist on a voluntary basis.

> "*Police brought in people irrespective of age or gender, we had to admit all of those people and then if our shelters were not capacitated to house people with disabilities, we would work with our supervisors and other stakeholders to try and get alternatives to house these people*" – Ben.
>
> "We *didn't have money to get temporal IDs, we had to dig from our own pockets for those that urgently needed an ID, e.g. have found temporal jobs. No one was funding us for such things even though the department claimed to have allocated money for this. There was no petty cash. If someone was really in need of an ID, we would have to do it ourselves."* – Sindy
>
> *"They just gave us departmental cars and they made sure that there was food at the shelters. Jah... we had doctors, and SANCA was giving medications."* – Zama

The above is clear an indication that the department was not ready for the crisis, there were no adequate operational procedures in place hence social workers are found at the helm of the programme, trying to establish solutions as they go.

Although the department had mobilized various stakeholders such as SANCA and the Department of Health (DoH), the problem was largely underestimated; hence they experienced challenges such as rapidly increasing numbers of people in need of shelter, food and rehabilitation while having to work with a limited budget.

Before the Pandemic

As noted above the programme, before the pandemic, was run by the cities of Johannesburg and Tshwane respectively. Participants identified several issues with the interventions of the municipalities, which in fact compromised the quality of services. Responding to whether the services provided were adequate, participants stated that,

> *Honestly speaking, I will say no, because the way we started with this programme, there were no systems in place. You wouldn't say that it was there before. You would say that we were all responding to a crisis* – Palesa

> "*I can't answer that because we just refer to them. We don't know what they do." –* Tshepiso

The city of Johannesburg was criticized by many participants for not having adequate systems in place, reflective of how long the city has been running the programme. One of the participants shared that the interventions were not adequate because the municipalities were focusing solely on providing overnight shelter to homeless people, which does not remedy the situation and assist the homeless person off the streets. More sustainable programmes are required, such as substance abuse rehabilitation. The lack of records is also identified as a shortfall by the city. As the entity that was dealing with the homeless programme, DSD expected that there would be records and statistics that shed light on the extent of the homeless programme in Gauteng. The second response quoted above shows complete neglect of the programme by the department, which is questionable considering that the department deals with social protection services.

Services provided by the city prior to the pandemic were also criticized for generally compromising the human dignity of the homeless person. Some of the shelters are not compliant with the department's standards. In some instances, the city failed to provide

statutory services to children under the age of 18, by not separating them from adult homeless shelters.

The nature of responses and approaches undertaken by Gauteng DSD

As stated earlier in the paper, the first step undertaken by Gauteng DSD during the pandemic was to reach out to existing NPOs. One of the participants stated:

> "*When the president said it was lockdown, he said it on national TV, and everyone had to adhere to the rules. The COT [City of Tshwane] and the metro police removed all the people from the streets. By then there weren't enough shelters, so an emergency plan had to be done. They used stadiums and erected tents where they would house the homeless people. The region didn't have enough shelter. Others used halls, and churches to accommodate the people during the lockdown. But it was difficult because homeless people do not like to live in a restricted area. They like roaming around and that's why they were resistant and some of them escaped even though there was security and metro police on the premises*" – Tshepiso

The above statement captures well the events leading up to the establishment of temporary shelters. This was prompted largely by the two regions, and its existing shelters, not having adequate space to house all homeless people. The participant states that there was some form of resistance that may be the reason why other people opted to escape. However, the findings show that this was also closely linked to the not being fully informed of the intervention and the forced removal of people from the streets.

> *"A lot of people were very angry because they were never told why they are there. They said that the police just came there, and they forced them and brought them to us. They were surprised."* – Bongani

> *"Remember with the pandemic it was different. If it was under normal circumstances, we would have followed normal standards of consultations with the different stakeholders and the beneficiaries. But with the pandemic we were under a state of disaster, we cannot expect that the normal processes will be followed because we are responding to the immediate need "*– Palesa

> *"I think consultation is a major issue because, for us social workers, there was no consultation as well. You just received communication/ direction that tomorrow you must go to this shelter. You didn't even know what you are going to do there."* – Sindy

While some participants thought that, given the nature of the pandemic, there was no room for consultation, others thought that the programme could have been received better by both social workers and homeless people if the communication and consultation had happened differently.

> *"…consultation at the grassroots level because we just got commands to say go do this, go do that. We were the ones at the grassroots, and we understood their needs better. We were not invited to share our experiences and the needs assessment we had done with the people" And having us share our opinions, or even with the homeless people as well. Having them share their needs and what they think would be a good solution for them in the long run.* – Sindy

The DSD's approach is criticized for being reactionary and lacking an understanding of the depth of the problem. The participant above highlights that the consultation of social workers was important because they are at the grassroots level and had conducted needs assessments; however, they were never invited to formally propose long-term solutions.

Homelessness within the South African context

In trying to understand the term "homelessness" and factors that lead to homelessness within the South African context, several themes emerged including unemployment, migration, abuse and rejection, substance abuse, gender, and general social expectations. Homelessness was defined as context specific and exists side by side with several other challenges such as child homelessness that if not resolved, becomes a permanent problem.

Homelessness is understood and interpreted differently by various institutions and in pursuit of understanding how the DSD interprets homelessness, a participant shared their definition of homelessness, which also has a big influence on how they intervene or approach the problem.

> *It differs from case to case. Some people are homeless only because they are in Gauteng and cannot afford rent. Their homelessness is context specific. Some will tell you that I was home during the weekend because they are not entirely homeless. Then you get those that are completely homeless. I'll give you an example, I'm in the child unit. You get children that are completely homeless from a young age. When discharged by the shelter at 18 years, they have nowhere to go. Those are the people I can classify as completely homeless.* – Palesa

The participant above captures well that homelessness is context specific, while other people do not have a home to go to, in other cases, people are homeless temporarily because of various

circumstances such as not being able to afford accommodation in the city that they work in. Joy, states that "h*omelessness is a gradual pattern that starts off by being temporal and then becomes a norm",* hereby flagging that in some cases, what starts off as temporal homelessness ends up being a permanent situation.

The following participants, in trying to conceptualize homelessness, expand to identify the causes of homelessness in Gauteng.

> "*It's because people flock to the city to look for employment. Unfortunately, when they get here, they do not get the job and end up on the streets. Some of them, were unemployed, they lost their job before the pandemic"* – Tshepiso.

There are several reasons that people are homeless but a common theme that emerged is unemployment. Many people migrate to Gauteng in pursuit of employment opportunities and when this does not actualize, they end up on the streets. In the context of the pandemic, many people lost their jobs meaning that they cannot afford basic needs including shelter.

Abuse and rejection are other segments that cause homelessness. While other people opt to stay on the streets as an escape from abuse perpetuated by their families, Sindy shares that "*some people have committed crimes back home i.e. they may have raped then they ran away from that"*. Essentially DSD approaches people cognisant of the fact that they may be victims or perpetrators of the abuse, which prompted the different types of rejection they experience at home or within their communities.

The research also finds that substance abuse is also an important factor that either causes homelessness or occurs as a result of staying on the streets. Other causes of homelessness include bereavement, general family issues, disability, and other medical conditions.

The participant below brings in an important element of gender and general social expectations which drive other people towards homelessness.

> *"It happens mostly to men who are unemployed. If you are not working or providing, then it becomes a challenge because everyone is looking up to you. They then move out and come to the city to hustle hoping that the situation will change, only to find that it is not that easy. It is also difficult to go back home because they are not as welcoming. Other factors include substance abuse, theft at home and com munities, and relocation from rural areas*" – Lindiwe.

The other problem is the non-acceptability of families. Some of these homeless people identify with the LGBTQI+ community and their families and communities struggle to accept them. -Zama

Outside of the general stereotypes that are associated with being homeless, other prevalent stigmas are attached to gender, disability and even mental illness that led people to homelessness. What the research found was that these stereotypes are also held and perpetuated in subtle ways within the DSD. Quite a number of participants made use of connotations such as "ama-homeless, hobos, paras" to refer to homeless people.

"*During school holidays others go home for about two weeks and the weekends. It is part of reunification because the plan is not for them to be there for the rest of their lives. But there are instances where such is not possible. They can continue staying at the shelter post the age of 18 if they have not completed school but beyond 21, they must move. Unfortunately for now we do not have a transitional home where children are prepared that now you are leaving the home to be independent. They do everything on their own. It's a waste of government resources because you pay for a child for 18 years for them to end up on the streets"* – Palesa

Child homelessness is another segment of homelessness that was identified by one of the social workers interviewed. Although the department makes provisions for children, these are only effective when the child is under the age of 21. Post this, if reunification cannot happen, these children feed into the large statistics of homelessness.

The root factors are honestly just the social ills in SA such as unemployment, substance abuse and poverty and Nyaope. Homelessness cannot be dealt with as a matter in isolation. If you do that, you are going to fail. Look at the guy who burnt parliament, the family came out to say he has a home. Maybe it is just an issue of independence which we cannot neglect. The government, through the lack of employment and skills dev, has deprived him of this independence. - Palesa

The participant argues reasonably that homelessness co-exists with a multitude of other issues which should not be neglected.

Homelessness as a problem that cannot be resolved.

Aside from the challenges identified above, other participants touched on themes that suggest that the problem is one that cannot be resolved. Such themes include resistance to rules and

boundaries, challenges with adapting to restricted environments, the desire to be independent and economic factors that if not resolved, will continue to perpetuate the problem.

> *"The other homeless people are those that don't want to stay at home. They left when they were younger because they do not want to listen to their parents until they reach 18."* – Tshepiso

In many instances, participants made nuances that suggest that homeless people will always go back to the streets because they do not like rules and boundaries. The above quote is a response to why people escape from shelters, the participant links this behaviour to the fact/assumption that other people ended up homeless because they did not want to listen to their parents.

> *"A lot of people did escape because they are not used to boundaries. We tried by means to create order. We ate at a specific time, you see the doctor at a specific time, and we have sessions at a specific time. Some people were not used to this, and we couldn't force anyone. And, it was during the lockdown, some people felt as though they cannot cope. Cigarettes were not allowed; we didn't want people moving in and out. So, they really felt trapped and unable to maneuverer around hence they escaped"*- Sindy.

> "*That was a task and a half. Remember, you are taking somebody who lives on the street, and is dependent on fending for themselves. Now COVID forced us to remove them from the streets and put them there. When you put them there, its minus drugs that they were taking, minus freedom, minus everything*!" – Bongani

The participants above confirm that the homeless had challenges adapting to a restricted environment hence some opted to escape. Their escape from shelters is informed by a number of factors including wanting to return to their normal routine of generating an income on the streets, not having access to any substances/drugs or alcohol and limited freedom.

> "*Basically, I think that people end up being homeless because they are being rejected by families. No one would opt to sleep under a bridge, with a blanket, if you are accepted at home and everything is fine. It is basically the rejection that leads them to decide that I am not going back home. It's family issues, deep family issues that would lead someone to such circumstances. Being homeless is not a fancy life*." – Tumi

Although true that some people may not be able to adjust to environments that have strict rules and boundaries, the participant above highlights that for a person to resort to living in the

streets, there must be a factor such as family issues, that trigger them to leaving home and not wanting to return.

> *"We can never resolve that thing! You cannot resolve homelessness while people still do not have jobs*" – Ben.

> ***"****We cannot get rid of it overnight when they are deep economic factors that we are not dealing with. I do think in the evaluations we were being artificial. Decisions and interventions cannot be taken up there because they are not realistic. We miss the point****" – Palesa***

The participants above clearly highlight that despite the individual challenges that make it difficult to resolve the issue of homelessness, unemployment is a structural issue that will perpetuate challenges such as homelessness.

Interventions (March 2020- March 2021)

Having noted that DSD had no intervention with homeless people before the pandemic, it is reasonable to conclude that the pandemic set in motion the homeless programme in both regions. Although this is a positive opportunity, it also reveals that the department had neglected a large portion of its constituency.



Figure 1: Interventions of the department during the pandemic.

The chart above is an indication of most of the interventions of the DSD during the pandemic. Gauteng DSD provided temporal shelter in the form of tent villages. Sampled in this study are social workers who worked in the Caledonian Stadium as well as Wembley Stadium which are two sites where the department erected tent shelters.

> "*And then we were monitoring. Checking what are their needs? Checking if they need blankets and mattresses? Do they need food? Do they have food? If they are women, do they need sanitary towels? If they are kids, do they have clothing? We were checking all those things there, okay."*- Joy

At these sites, social workers facilitated the process of providing people with safety, hygiene packs, and food. All this was in collaboration with the South African Police Services (SAPS).

The second item on the chart is rehabilitation and medication. The research finds that many of the people removed from the streets struggled with substance abuse and therefore required some form of rehabilitation. The causes of substance abuse and the link to homelessness is complicated: substance abuse can lead to homelessness; or it can be caused by homelessness.

> "Other people its drugs. They get involved in drugs and they start stealing from their families then they are kicked out from home" – Sindy.

> "It's substance abuse. I remember one guy who wanted to go to rehab and if the rehab is full, it means that you must wait for 6 weeks. They become impatient because in the waiting process, they experience cramps and other symptoms. Here we don't have medication to assist with that. They end up relapsing" – Lerato

> "We need assistance in terms of people on drugs. They need medication while they await admission."- Lindiwe

Rehabilitation from substance abuse is an important intervention that was provided by DSD alongside SANCA during the pandemic. Due to limited resources, the waiting period for admission into a rehab can take up to six weeks and during this time, homeless people battle with withdrawal symptoms which the shelters are not equipped to manage.

The findings of the study also show that a vast majority of the people who are homeless do not have any form of documentation, and this is because they are always mobile, and in the process lose their belongings. As a result, they are unable to access social grants, which require identification, proof of address and other documents.

> "During the pandemic we managed to assist so many, some we would have to transport outside the country, many didn't have documents which we negotiated with home affairs to say if a person is on the database, maybe once has a birth certificate and lost it, can we shorten the process and assist these people with ID's. The presence of an identity documents means that all those who have reached 60 were able to access their social grants." - Bongani

The process described above was a success but was limited only to individuals who had been previously documented and may have misplaced their documents. The department, through its social workers also provided counselling primarily to find remedial solutions for the person. Highlighted as a key success of this action is family reunification. Many people were reunited with their families.

> "We had 6 social workers who were doing family reunification. Fortunately, enough those social workers were hired at the various NGOs. That's basically their role post the lockdown, family reunification."- Joy.

Although social workers worked tirelessly to ensure that there are psychosocial services, the participant reveals that there were politics of "who is truly responsible" for providing support. This then leads one to conclude that, if there were clear standard operating procedures in place, such matters would not be experienced.

> "*We come from the partnership and finance unit, we do not do psychosocial services, we work with NPO's. Psychosocial is supposed to come from a different unit. So, in the beginning everyone was just trying to fit in because we didn't know who was supposed to be doing what."- Palesa,*

Furthermore, during this period, DSD was able to temporarily absorb people to work in the construction of the Wembley Stadium Shelter. The department aimed to link people to skills, assist them with the basics of finding a job and link them to opportunities.

> "*We would assist others with CVs. Some, especially in Turffontein were hired by the contractor that built the shelter and later when the contractor moved, they we employed and relocated with it*." – Bongani

Although SA received a vaccine post-level 5 lockdown, those who were still frequenting the temporary shelters were provided with vaccines to prevent any further transmission of the virus especially since the setting is a shared space.

> "*We prefer people who are vaccinated…vaccination is important because so many people live within the same space*." - Lindiwe

The above is an indication that homeless people had access to vaccinations as these were mandatory at most of the shelters.

Policies

> "*DSD just came to the party without any policies. In as far as processes are concerned, we were borrowing from existing programmes. We didn't have anything that guides monitoring and compliance and thus had to borrow from other programmes. There is literally nothing to regulate the interventions"*- Joy

> *"Our relationship with Tshwane was a bit shaky. We found each other but there were areas where we didn't agree because we all are coming with different approaches*"- Palesa.

The statements highlighted above show explicitly that the department does not have any policy or legislation pertaining to homeless people. One of the participants suggested that they had expected that the city would have a solid policy which they have been using over the years. As it stands, social workers rely heavily on policies from other units within the department, which they pick and choose depending on the nature of the case.

> *"We don't have any legislature [legislation]. That's why even last week we attended sessions and training on the policies because we cannot function without policies. All other programmes have policies. In the meantime, we are just operating with other policies from other departments. The policy is in the pipeline and we as social workers were consulted-* Nonjabulo

The department is currently working on guidelines, for which they have consulted with the social workers from the homeless unit. This then probes the question of whether homeless people were consulted at all, or whether the perceptions of social workers alone will contribute sufficiently towards a homeless person's policy position.

> "*Thursday, we attended an annual general meeting (AGM). According to the report that was read for the previous years by the outgoing committee. They said they had the representatives. But with this new one, unfortunately, I did not see any representative, which is a good idea to say for let's do even ongoing continuation must be there so that they can be represented. I think this is very important. On our next meeting, we have to raise it, or we can write them an email to say we have been nominated, but there is no representative from the homelessness."* – Zama

Although the need for consultation with homeless people is acknowledged, the department thus far does not have homeless people representing themselves with these committees and consultative meetings. Rather, consultation only happens between the DSD (through its national and provincial offices) and social workers from the regional offices and non-governmental organizations which are funded by the department.

The successes and failures of the DSD

This section seeks to outline the successes and failures of the interventions according to the perceptions of the participants at the shelters and DSD. As identified earlier, one of the shortcomings of the department is not having a designated homeless programme prior to the

pandemic. The findings in this section suggest that, despite all the challenges, the department's biggest success was being able to expand its practice and start funding homeless shelters.

Successes

Seven themes emerged from the data that speak to the successes of the department. These successes include funding for homeless shelters, psychosocial support, access to social grants, intergovernmental relations, medical interventions, temporary employment opportunities and access to the vaccine rollout.

1. **Shelters that are funded by the department:**

   "Currently funded it's [we have] seven that are funded and 4 unfunded. These still need to sort out their documents and compliance issues." - Sindy

   "The good thing that came out of COVID now is that it gave birth to some shelters that are funded by the department, and we, therefore, have a direct link with them. We know that at these shelters we have qualified social workers who will profile them and make necessary interventions. As much as it's still not our full jurisdiction, it's a step to show that in collaboration with the city, we can do a better job." – Bongani

The first participant confirms that Tshwane DSD currently funds seven shelters and has 4 which they are monitoring to ensure that they meet the compliance requirements. This is reasonable progress considering that none of the shelters was within the department's scope of work. In the Johannesburg DSD, the number of shelters funded was not identified however, there has been significant progress as well. The department needs to expand its budget allocation towards the homeless programme to ensure that there is a gradual growth in the number of shelters funded by the department.

2. **Psychosocial support**

   "They do family reunification, counselling, individual and group counselling, Skills development, Job placements and referrals e.g. to the hospital, old age home, rehabs or mental health institutes. They get three meals a day and get to sleep at the shelters, ID applications for free through liaising with the department of home affairs, and vaccinations" - Tumi.

The participant above captures holistically the activities and services provided at the shelters. Most importantly, rather than harbouring all the people who were homeless at the onset of the

pandemic, the DSD managed to reunite several of them with their families in Gauteng and in other provinces.

3. **Social grants**

Social grants are an integral part of the department's programmes and therefore one of the successes is that many people were able to access a social grant, which they meet the requirements for.

4. **Intergovernmental relations**

In the process of providing psychosocial support, the department developed relations with key stakeholders such as the departments of Home Affairs, Health, and SAPS.

> "*Medication is for health; I cannot answer for the DoH. All stakeholders had to be involved and carry put their different mandates*." – Tshepiso

Although the pandemic encouraged stakeholder collaboration, the statement above is also an indication that there was no proper stakeholder collaboration, and departments were working in isolation.

> *So far, the department of Health is providing funding where needed. The department of labour also assist with job placements* – Zama

> "*We do but the immigration office is difficult to work with. The process is long and there is no feedback or communication. We have a better relationship with the ones that deal with local IDs, the process is smoother."* – Pinky

> "COJ has not assisted with any funding. They helped us with the land, electricity, and water"- Mathew

Despite the challenges, the above shows that the department has made significant attempts to establish intergovernmental relations with other departments.

5. **Hospital/medical interventions**

At the shelters, people were given medication onsite and could access further assistance from surrounding hospitals such as South Rand Hospital. SANCA also played an important role, noting that many of the people are substance users.

6. **Temporary Employment Opportunities**

The department, through its contractors at Wembley Stadium, was able to provide temporary employment opportunities to homeless people when the site was under construction. In

essence, the service users were given the option to be active role players in the construction of the site.

7. **Vaccine rollout**

   "The second report has the vaccination rollout. Organizations report to us how many homeless people have been vaccinated with them and their age groups. The third report is a COVID report. This is to avoid the spread of COVID"- Nonjabulo

The shelters were also able to provide access to vaccinations to people who are homeless. This is a compulsory requirement at most shelters considering that people are expected to live in a shared environment, which can often facilitate the spread of the virus. From the participant above, it is evident that DSD has established structured reporting procedures with the homeless organizations, which means the department is kept abreast with the developments at the shelters.

Challenges

Although a significant number of successes has been identified above, the findings reveal that the department experienced several challenges. Many of the themes including escapes from shelters, hotspots, the lack of statistics, lack of identity documents and limited capacity of social workers, identified below suggest that if such challenges are resolved, the greater problem of homelessness can be alleviated.

1. **Escapes from shelters**

At the onset of the pandemic, one of the greatest challenges social workers had been that homeless people would escape from the shelter to return to the streets. Various participants of the study interpreted this as "homeless people do not like rules", which suggests that homeless people do not like being in confined spaces.

> *The other challenge is that the permanent shelters that were available were unhabitable. Bekungahlaleki. It was going to need a lot of money to renovate those buildings. The buildings belong to the city and the city didn't have enough budget to renovate them*." – Tshepiso

Tshepiso speaks of the conditions of the buildings and shelters that are one factor that may have contributed to the escapes. The DSD had not anticipated a large number of homeless people thus, they had challenges with overcrowded spaces and limited resources. Despite this,

the situation eventually improved as the department made more attempts to secure more beds and food.

> *As much as they want to escape… who are they going to beg money from because there are few cars and even those that are there are still scared to even open the window and expose themselves to the virus. It assisted, but the moment lockdown regulations were eased (giggles)… when the buzz started homeless people started telling us that they are going. – Bongani*

Bongani argues that our analysis cannot be limited to "homeless people do not like rules" rather, people escaped from shelters because they wanted to return to the daily hustles, which sustain them. Although they escaped from the shelters, they would return to the shelters because the economy had come to a complete lockdown, therefore their ordinary ways of making money were not possible.

All participants made mention of substance abuse. From the findings of the study, substance abuse is closely linked to homelessness. Whether it is the cause or the result of, is a debatable matter, nonetheless, it is one of the challenges that pushed people to escape. The use of drugs and other substances was prohibited from these shelters. While SANCA was onboard, their rehabilitation centres could only accommodate a limited number. Many of the participants struggled with withdrawal symptoms stemming from years of addiction to substance abuse.

2. Hotspots

The fact that some people do not want to live in shelters is often linked to their desire to retain their own independence. DSD has identified hotspots where people choose to stay, other than in shelters. This may be in the form of open spaces like parks and abandoned buildings. At the onset of the pandemic, the DSD used to aid hotspots. However, this has been discontinued as it presents the department with new challenges.

> *"During the pandemic, we closed the hotspots because we realized that those people are not in need of shelters. They only need food. Our mission as DSD is to add value to them, giving them food alone is not sustainable. Other interventions such reunification and jobs are needed so that people do not stay on the streets forever." – Zama*
>
> *The department decided they can no longer fund hotspots because it is difficult to monitor and account for them. If we give them blankets, they sell the blankets. If we give them mattresses, they sell mattresses – Joy.*

"I can't say enough. Remember if you make funding available for an organization, you must account holly for that organization. An organization must be compliant which includes having a structure. We cannot fund people who are operating from a tent. If anything happens to them, they are not complying with the city by-laws, the DSD would be held responsible for funding a non-compliant place." – Tshepiso

Amongst the problems encountered at hotspots is safety. The safety of social workers is compromised because the department does not have the means to ensure that their site visits are safe for the workers. On several encounters, state vehicles were damaged on site and in this case, no one can be held accountable for the damages. As shared above, monitoring hotspot sites is difficult because the people found there are not bound by any organisation, rules or laws which will regulate how their behaviour as well as the services provided by the department. Apart from providing food, the goal of the department is to provide long-term support that will add significant value to homeless people. To mediate this problem one of the participants shared that they "*assessed them at the hotspots and referred them to shelters. The decision lies with them."* This indicates alone that the decision to utilize shelters provided by the department is a voluntary decision that must be made by the individual. This then probes the question, "if the people residing in hotpot areas were to decide to make use of shelters, would the department be able to cater for all of them?". The response to this clearly shows that there is a need for the department to shift or expand its focus from temporary shelters to a more tangible solution to combat homelessness in Gauteng.

3. The lack of statistics

The results of this study confirm that Gauteng DSD does not have statistics on the number of homeless people that require shelter in Johannesburg hence the department struggled with the allocation of resources at the onset of the pandemic.

There are shelters that are not funded by DSD and we cannot monitor them because we are not funding them. – Nonjabulo

we have two categories of beneficiaries at the centre and then we have the ones we are providing drop-in service to, they come during the day for meals and showers. We do not know where they sleep. Then the ones we can accommodate we can account for in terms of statistics – Palesa.

"*You will end up with duplication, that's what they do. They go to a shelter with this name and shelter B with the other name. I once received a call from the police station*

where they were trying to trace this lady but couldn't because she was using different names" – Tshepiso

The only statistics that the department keeps on a monthly statistics as presented by the organizations that they fund, essentially DSD cannot account for the statistics of those that are not part of any organization. Although each person will probably access a shelter whether for overnight shelter or feeding schemes, keeping an up-to-date database is difficult because people tend to use pseudonyms for many reasons. The tendency to jump from one shelter to the next is quite common because many shelters are temporary and will provide services for 3- 6 months trusting that the person will self-sustainable post this period. Some people use pseudonyms simply because they do not want to be found or tracked in the system and because many are unable to present documents, it is impractical for the shelter to request them to present documents.

4. **The lack of Identity Documents**

It is a known fact that it is difficult to assist homeless people because many may have lost their documents. At the onset of the pandemic, social workers at the shelters would assist people to obtain documents however foreign nationals who are in the country present a serious challenge for the department.

"*Those who have asylum seekers, we can assist them with all the services even the vaccine. But for those who do not have anything, we also have a challenge because we cannot assist them*." – Palesa

"*The biggest challenge is with foreign nationals because we want to assist them, but we cannot because everywhere we refer them, they want some form of documentation. You end up stuck with people whom you cannot assist*." –Mathew

The city removed them from certain areas from time to time, and in the process, they lose their documents. In such instances, a person may be willing to vote but they cannot. If they have health issues, they cannot access medical care in some clinics. They also cannot be employed – Zama

Many of the participants showed a willingness to assist people without documents; however, the law makes it difficult for them to intervene.

5. **The Capacity of Social Workers**

Many of the participants shared being overworked especially during the pandemic. Although the services provided by the department are mainly for shelters that are funded (which is a relatively small scale), the department does not have sufficient human capital for the workload.

> "*The employment of social workers is important if you want to conquer all these social issues. Even within this department, we are under capacitated*." – Tumi

> *I'm an intern here, and the department cannot employ us, but it gives me solace that they are pumping so much into people through organizations. The problem is that, somewhere somehow, the money is not being used correctly.* – Nonjabulo

During the pandemic they relied on social workers who were assisting at the sites voluntarily, post the pandemic, many of the social workers returned to their various department units. Since then, the department has been utilizing social work interns and contract workers for 3/4/6 months and the longest contract being 2 years at an estimated salary of R6000. Although the efforts of the department towards homeless people are appreciated by participants, it is also disheartening when public funds are not being used correctly.

Implications for Future Homelessness Policies

Many of the problems encountered by the department were largely linked to the lack of adequate policies that guide the intervention process. Highlighted below are the two main policy implications revealed by this study: Guidelines for homeless shelters and city by laws. Although these policies were identified by most of the participants, none of the participants could clearly articulate what the policy stipulates and how they translate it into their day-to-day interventions. The DSD still relies heavily on the South African constitution and any other legislative frameworks that link to working with homeless people, at times, these policies may contradict each other, thus the need for the department to establish its own policies.

1. **Guidelines for homeless shelters.**

Positive to note is that the pandemic encouraged the department to consider its policy position as it relates to homeless people.

> *"Well, so far we don't have any legislature. That's why even last week we attended sessions and training on the policies because we cannot function without policies. All*

other programmes have policies. In the meantime, we are just operating with other policies from other departments. The policy is in the pipeline and we as social workers were consulted." – Nonjabulo

In the pipeline, DSD is trying to establish guidelines for social workers and shelters which is a positive move in the correct direction. All the participants acknowledged the lack of policies and proposed that like other departments, the homeless department should have its own policy position which will be reviewed consistently to close in on the gaps.

"*I think the model that we were using is the integrated service delivery model. The one that says we are giving services to those that are vulnerable. And in this case, it's the homeless people. So, we were looking at different stakeholders and looking at what they bring. We were using the drug and rehabilitation act because we take people to rehabs. We did use a bit of the children's act because some of our shelters didn't take minors, we would refer them to another shelter and continue to provide statutory services to the child*" – Sindy.

It is only a draft guideline. They are still in the process of approving the guideline and rectifying some of the errors. But we are using Older Persons Act. We are using Children's Act. We are using the Domestic Violence Act. We are using the Sexual Abuse Act and Some Health Act 5s and then employment and housing. Why are we using that legislation? We are using them because remember, in homeless., all the target groups are involved in homeless. They are older people which is why we are also using Older Persons Act. 1s There are children 2s some people become homeless because of domestic violence, 2s because of sexual assault. 2s I forgot you also use the policy for disability. We are also using the Disability Act, but because the homeless include those with disabilities, we are using those regulations for now because we don't have any policy other than the Constitution of South Africa. – Joy

Currently, social workers use policies borrowed from other units and the challenge is that there is no homeless policy or whitepaper that sets the operations of the department apart especially in instances when policies from other departments converge.

"*Homelessness needs its own policy and legislature framework. People who are going to do it, need to be open-minded and understand the state of homelessness. It is*

impractical to set guidelines that are impossible to meet. All interventions are context-specific and therefore must be realistic. It is not possible to end homelessness because of situational homelessness. The policy must also look at sustainability. There are no outcomes for other people because they are not homeless." – Palesa

The participant echoes well the sentiments that have been expressed by many others, a policy must be practical and encourage solutions that are sustainable for the homeless community.

2. **City by-laws and other department policies that relate to homelessness**

Flagged in the interviews was that, although the department and the city are trying to forge relations, the city by-laws around homelessness need to be reviewed as they make it difficult for organizations to access land or abandon buildings. This needs to be rectified so that shelters can meet the department's compliance requirements for funding.

> "Banning and making living on the streets illegal is farfetched because where will you take them? They have a constitutional right to freedom which hinders firm development and decisions' – Mathew
>
> "South Africa is a democratic country, and it affords its citizens too much freedom."- Zama
>
> "Unfortunately, not even the government has enough shelters to accommodate everyone" - Tumi.

The statements made above were made in relation to the city of Cape Town's attempts to ban homelessness and whether this would be a viable solution in Gauteng.

> *"With the housing laws, you cannot remove a person without giving them an alternative, so they are stuck with a problem"*– Palesa

Another department that has an active role in combating homelessness is the DHS. The statements above are proving that government has progressive policies however these are not in sync with the objectives of other departments. This is indicative of a greater need for a national policy that will not only apply to the individual but will also apply to various departments to ensure that operations and procedures correlate with each other.

Solutions

This section seeks to explore solutions that were expressed directly by the participants, this doesn't however take away from the solutions that may have emerged in subtle ways above.

Drawing from challenges of substance abuse and a high rate of unskilled individuals at shelters, participant identified that the department needs to invest more into skills development and rehabilitation facilities. Furthermore, outside from permanent shelters, the department does not have long term solutions to the problem at hand. As a start, other solutions proposed below include conducting feasibility study/ impact research that will inform the need for future interventions, accountability with the DSD and its shelters, as well as strengthening the role of the homeless forum.

1. **Skills Development**

   "*The only thing I can stress is skills development. When people are here, they become frustrated because they want jobs but cannot find them. Many are doing security courses because it seems easier to find jobs. The issue is that they work fly-by-nights. That's the* disadvantage" – Mathew

   "*Another challenge that we experience is the lack of skills development. Many want to do handwork. The government needs to beef up on these, if you finish a course, they should be able to give you something like sort of a toolbox to allow you to do your own things."* – Lerato

   "I felt like people were just being kept there. People would have walked out there with matric certificates if they wanted. Bring in teachers or transport them to a school where they can get an education or tangible skills. I think that would have made a difference. Entrepreneurial skills, they were supposed to at least walk out with something." Sindy

Although the greatest challenge is employment, skills development is also an integral part of ensuring that people are compatible with certain jobs. Skills development and employment opportunities are important if the aim is to achieve self-sustainability. Many social workers hold the belief that while the current social grants and no-fee payment of homeless shelters provide temporary relief, they also aid dependency.

2. **Rehabilitation facilities**

The province is in dire need of more rehabilitation facilities.

   "For example, if you see that one of your client needs to go to rehab, the rehabs we are connected with are always full most of the time. The admission process and the waiting period are too long, by the time you get space, the person has already given up and returned to substances." Lerato

"Assistance in terms of people on drugs. They need medication while they await admission and skills development"- Lindiwe

Substance abuse has been identified as one of the biggest problems faced by homelessness and therefore it would be ideal to have rehabilitation facilities to ensure that processes are not delayed.

3. A feasibility Study/ Impact Research

One of the participants proposed that the department needs to conduct a flexibility study that will inform the direction that the department seeks to take as it pertains to homeless people. While other participants argue that each DSD should have a homeless person's unit, others raised the following concerns.

"*I just feel that DSD is doing a lot and many of the things they are doing are not even effective. They need to fix whatever they already have. They have an issue with communication. They do not plan things on time. The top-down approach is wrong. Most of the things come from up there without consulting the grassroots level. It is like we have a whole APP calendar, but things don't change. The world is changing, the youth are now being affected by several issues that they were not affected by back then. Now you talk about social media, and cyberbullying. We have not transformed our ways; we are still talking about parenting skills. There are so many things that are happening. We can talk about personal development and capacitate people on things that will assist them. We already have a fixed programme of what we intend to provide and maybe our services are not even needed. Having another unit will require a lot of planning, resources, and time while other units are struggling*"- Sindy.

The participants are not entirely rejecting the establishment of a homeless person's unit within the DSD however there is a concern that there are many other departments whose programmes are not as effective in the challenging world. Essentially homelessness could possibly divert resources and attention from other units that are also struggling to adapt to the changing times.

The impact is felt by an individual, not a structure" - Tumi

"It has made a difference for those that are willing. Others are not willing, and you cannot force them. We have helped a lot of people, others we even placed in the construction project that erected this shelter. The placement is voluntary"- Lindiwe

Although it was proposed that DSD must have an impact study, two of the social workers expressed concern. The nature of the problem is complex, it largely depends on the individual's willingness to actively participated in activities of the department, making it difficult to measure the impact and the sustainability of the programme.

4. **Accountability**

From the interviews, the department seems to lack structures that hold workers and shelters from misuse of public funds. Although the department has an M&E department, they hardly pursue the legal route to hold shelters/NGOs/workers accountable.

> "We would get communication that there is money that is put aside to cover the needs of our clients. So, they asked for the needs we had identified. We did a report and reported back. But there was no follow-up, and they were no response after that to say we received your needs, and this is what we are doing. The problem is that the needs were facing us because we were at the grassroots level. There was no way we could have ignored them."- Sindy

The above is an indication that even internal staff does not know of the budget and funding aspects of the programme, this indicates a challenge with communication and transparency.

5. **Strengthen the role of the homeless forum**

The homeless forum has been established as a means of communication between homeless people and stakeholders such as DSD.

> *Their role is to advocate for the homeless, whether those homeless people are catered to, underfunded or unfunded.* – Zama

> *According to the report that was read for the previous years by the outgoing committee. They said they had the representatives. But with this new one, unfortunately, I did not see any representative, which is a good idea to say for let's do even ongoing continuation must be there so that they can be represented* – Zama

The structure is in place however from the findings of the study, one draws that DSD does truly understand the role of the homeless forum. The participants quoted that this is a new programme for DSD and therefore they do not truly know because previously this was a programme of the City of Tshwane. Although this is true, it has been over 2 years since DSD took over the programme, rather too long for them not to be able to clearly articulate the

objectives of the homeless forum, there is therefore a need to strengthen their relations with the forum.

6. **Permanent Shelters**

Both the DSD and homeless Forum are however in agreement that a permanent shelter is needed

> "*The homeless forum is currently negotiating with the city, requesting a building, a standardized building that they can use to house homeless people. That is essentially the long-term plan."* – Zama

> *The department needs a building where they can advertise for the NPOs who qualify, to run a shelter for the department. In that shelter, the NPO will run the programme. A big building, not these small buildings, if it belongs to the department, we can assure compliance of the building. They can make it in such a way that maybe they say it is for males only, or females only, or women and their children. That would be helpful. We need the COT to assist with abandoned buildings to be allocated to NPOs who are willing to run the programme. Even if people are allowed to go and hustle, they shouldn't have to go sleep on the streets. But we need rules and regulations. They can even contribute maybe R10 per day if they have. It will allow for the process of reunification because shelters are not permanent. If people undergo the process of reunification or find jobs, they open space for others*. - Joy

The ultimate goal for both stakeholders is to establish solutions that combat homelessness thus the relation between the two is essential to ensure that homeless people receive dignified services for a sufficient duration of time until they

Post the lockdown.

As mentioned above, post the lockdown DSD handed back some programmes back to the city and NGOs to continue operating as there were. Although temporary sites/hotspots were discontinued, DSD has adopted its own homeless programme whereby it monitors shelters that they provide funding for and reached out to potential shelters/NGOs to assist them with compliance issues.

The department received a lot of media coverage during the pandemic which suggests that social workers/ the department are unable to tackle the issue of homelessness adequately.

Participants perceived this as a problem mainly because they had gone above and beyond to ensure that services are provided to homeless people, with limited resources.

> *"We do our monthly reports which cover the numbers we had, as well as the interventions, how many were enrolled for skills development, how many have gone for rehabilitation, how many have been reunited with their families. But all that information is with the shelter managers."* – Sindy

Seemingly this information was not made available to the public/ media and data was not consolidated post the lockdown.

The lack of monitoring and evaluation of programmes

Having touched on the problem of policies, the department also has a challenge with monitoring and evaluation which leads one to question the quality of their M&E tools and processes.

> *"I don't know. I don't remember because I'm always in contact with the supervisor, but I don't remember"* – Tshepiso.

The above is an indication that even if an evaluation of the programme was done, there is no transparency in the report, many of the participants who are responsible for the monitoring are not aware of the process post the reports that they compile. The monitoring aspects are done monthly by the department however there is no evaluation of the sustainability, and impact of the programme. The information is also not readily communicated amongst workers and through the website for the public that may be interested in the information.

CHAPTER FIVE: RESEARCH ANALYSIS AND RECOMMENDATIONS

Introduction

The statement "temporary solutions to a structural problem" concisely summarises this study's findings. In this chapter, these findings will be unpacked in detail in pursuit of understanding the responses and approaches undertaken by the DSD, particularly in the City of Tshwane and Johannesburg. This chapter further seeks to make an in-depth analysis and recommendations of the interventions implemented to assist homeless people from March 2020 to March 2021 in comparison to other years. A detailed analysis of the successes and failures of various stakeholders that play an essential role in establishing solutions to homelessness is also presented in this chapter. Having identified a challenge with policies regarding homeless people, the chapter aims to outline the implications for future homeless policies based on the policy and legislative challenges encountered during the COVID-19 pandemic.

Homelessness in South Africa

The complex history of SA

Homelessness in South Africa is a broad phenomenon, and to break it down, I begin by analysing the data within the context of the two regions and what the data means in South Africa as a whole. The literature reviewed at the beginning of the study reflects that various sectors in SA understand homelessness in diverse ways. Although the term is not formally defined by the DSD, the approach of the department's interventions focuses mainly on people physically living on the streets. This may be temporary for some, while others are permanently homeless. Without setting aside the conceptualisation of homelessness mentioned above, the findings of the study shape, in-depth, our understanding of homelessness in the South African context, but specifically in Gauteng. Twenty-nine years into democracy and freedom, we learn that with homelessness, like many social injustices, we cannot neglect (1) the complex history of the country as well as (2) the present-day socio-economic factors which were worsened more by the pressures of the covid 19 pandemic.

The SA constitution, as amended in 1996, equips all citizens with the right to human dignity, healthcare, food, water, and social security. Further, all citizens are entitled to adequate housing, meaning that through all its organs, the government must "take reasonable legislative and other measures, within its available resources, to achieve the progressive realisation of this right". Fast forward to 2020, the onset of the pandemic, which shows us that the DSD could barely account for the number of homeless people in Gauteng. In the 29 years of democracy, what may have hindered the department from fully realising these rights?

The Legacy of Apartheid

The long-standing history of Apartheid in South Africa still presents itself in how different racial groups experience many intersectional social issues, including homelessness. The study finds that most homeless people in South Africa are black. Although acknowledging that there are white squatter camps in SA, homelessness from face value appears to be a predominantly black problem. The apartheid era was categorised by racial segregation which separated white people from non-white South Africans resulting in black people being confined to restricted tribal homelands (African Union). The apartheid rule through the 1913 Black Land Act prohibited Africans from owning land or property. Black people were subjected to rented government housing and single-sex hostels (South Africa: Overcoming apartheid, building democracy). The 1920 Housing Act gives rise to low-cost housing for poor people, further separating poor black people from white communities. Segregation laws placed black people in segregated townships and today, these communities battle with access to essential services and sustainable employment opportunities (Doller, 2014). Post Apartheid, the above-mentioned segregation laws' impact is still visible primarily in the difference in development or the inequality between White and Black people. The study found a link between the apartheid segregation laws and homelessness, where in many cases, homelessness begins with not being able to afford to stay closer to areas of work. In such cases, although a person has access to a home, they temporarily sleep on the streets because of exorbitant travel costs which are expected to come from low wages.

Migration

The findings show that Gauteng still experiences a large influx of people who migrate to the city to seek employment opportunities however, in the process, they find themselves homeless. This includes people who migrate from other provinces, as well as people who come from other

countries. Moyo (2021) reports that South Africa houses 2.9 million immigrants which equates to almost 5% of the South African population, and this excludes the many migrants that are living in the country illegally. Gauteng is the primary host to these migrants, as many believe it is the country's economic hub. I agree with Moyo (2021), who criticises the government of being unable to manage, through adequate policy implementation, the changing patterns of migration post-1994. Policies such as the Immigration Act of 2002, which seeks to prevent illegal migration, are criticised for neglecting the large portion of low or unskilled workers; however, even with measures such as the border management authority bill of 2020, the country has failed dismally at managing the influx of illegal migrants. Illegal migration poses significant challenges for the DSD because, without proper documentation, the department is unable to provide sustainable interventions to homeless immigrants. One of the critical interventions by the department during the pandemic was to assist people with documentation; however, illegal migrants could not be assisted through this process. An identity document not only hinders a person from accessing social services, but they cannot find formal employment without it. In essence, they cannot contribute to or benefit fully from any formal economic activities.

Urbanisation

Urbanisation is another contributing factor in Gauteng. The findings of this study found that at the onset of the pandemic, DSD had to intervene by transporting many of the people to their original provinces in cases where the family was willing to embrace the individual back into the household and the community [noting that in cases where an individual had relocated purely to find employment, the family was willing to accept them back unlike in cases where the individual had left because of conflict with family or the community]. Population increases and uncontrolled urban growth are among the root causes of homelessness across the globe (Akinluyi & Adedokun, 2014). In South Africa, approximately 62% of the population is concentrated in urban areas (Turok, 2012), the Parliamentary Monitoring Group further reports that the statistics of people living in urban areas will have risen to 71%, which will have a significant impact on service delivery and infrastructure developments.

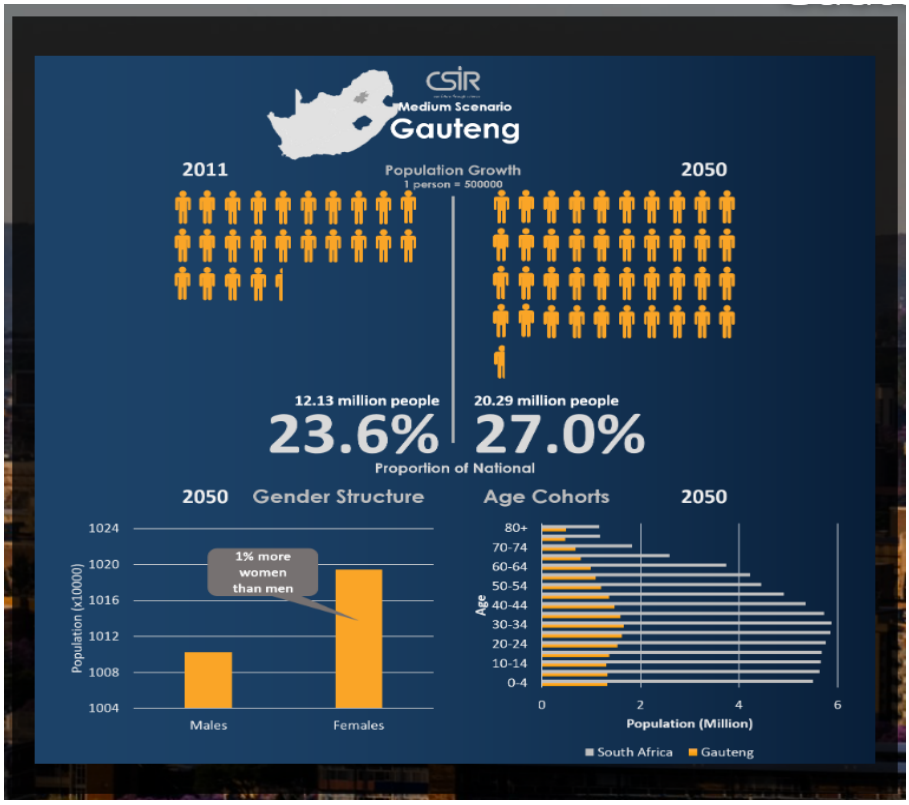

Figure 2 CSIR

The illustration above shows that the population trends in Gauteng are likely to increase from 12,13 million to a population size of 20,29 million by 2050. The population increase further predicts the population growth to have slightly more women and people within the working age (15-64 years). Having scrutinised the DSD plans as published in 2010, it is without a doubt that the department has failed 1, on implementation and 2, to review and amend plans as social trends consistently change over the years. In 2010 with regards to migration and population growth, the department had intended to "increase alternatives to migration by intensifying rural development, reducing backlogs of urban infrastructure and reviewing the nature and impact of all forms of international migration in order to formulate an appropriate strategy." 13 years later, the department has not achieved these goals fully. In the annual performance plan for 2022/2023, the department acknowledges population growth only in relation to the department's priority areas, i.e., social grants for various population groups and population trends concerning the spread of HIV infection. Although the discussion of poverty may include homeless people, the department's plans do not fully reflect this. In many cases, interventions such as the Presidential Employment Stimulus Package, EPWP work opportunities, social grants, and the R350 special covid grant will exclude homeless people as issues such as documentation hinder them from accessing these services.

Gender

Homelessness in the context of South Africa presents itself differently amongst various genders. Without neglecting the many homeless women, the study finds that most people on the streets are men. In the 2022/2023 annual performance plan, the DSD made huge emphasis to women and children, and accordingly, their interventions focus on shelters mostly in the context of vulnerable women, children, and the LGBTQI+ community. In attempted to tackle Gender based violence, these social groups may have rightfully been the priority during the pandemic hence the oversight on how the department approaches homelessness. Gender in the case of homelessness is an important factor, and findings reveal that social expectations such as the narrative that men should be the head of the family and therefore have the responsibility to provide for the family, drives them into homelessness as they succumb to the pressure to find employment or any other means of providing for their families. Failure to meet these social expectations has landed many men on the streets. Tessler and Rosenheck (2001) support this finding, arguing that homelessness is caused by social roles that define an individual's place in the social structure. Gender, therefore, determines how a person is socialised and societal expectations, which also affect their expectations of themselves (Tessler & Rosenheck, 2001). My argument seeks not to critique the DSD's focus on women but to emphasise that DSD, when responding to homelessness, needs to have a thorough perspective on how homelessness presents itself among various genders so that their plans are inclusive and effective for everyone.

Structural Causes of Homelessness

The common causes of homelessness in the two regions are socioeconomic factors including unemployment, substance abuse, family conflict and abuse which are elements that the department has made attempts to incorporate within the department's priority plan.

Unemployment

Statistics South Africa (2023) reports that the unemployment rate in SA is 32% however, even against such figures, many people still relocate to Gauteng with the hope of finding employment opportunities. The pandemic contributed more to these figures because an additional 3 million South Africans lost their jobs during the lockdown (Tswanya, 2020). Most

of these people are already disadvantaged within the labour market because they fall within the scope of unskilled and informal workers, and therefore COVID has intensified their hardships (Tswanya,2020).

In its annual performance plan, the DSD identified economic transformation and job creation as a priority legislative/policy directive. DSD intends to realise this plan through the Social Sector Extended Public Works Programme (EPWP), co-operatives and Community Nutritional Development Centres (CNDC). I focus mainly on these two programmes because they are more applicable to homeless people. However, DSD has other programmes that seek to link graduates to opportunities, internships, and subsidies for NPOs, amongst many others. Although the department aims to create self-sustainable livelihoods, the above plans lack sustainability and, to some extent, foster dependency. The EPWP provides temporary relief for 24 months or less. The programme was intended to elevate poverty and provide income relief; however, I wonder how temporary relief is expected to provide self-sustainability among vulnerable groups. Aliber et al. (2007) argue that how EPWP is designed correlates poorly with the problem it seeks to address and that such initiatives need to be informed by a coherent framework that expands on the scale that the initiative seeks to achieve. They argue that the government has made notable strides to improve the livelihood of the poor however the initiatives appear to widen the gap between the government's contribution towards welfare versus development (Aliber, Kirsten, Maharajh, Nhlapho-Hlophe, & Nkoane, 2007). This critique was levelled against the government prior to 2007 and DSD and other government departments disregarded this and continued incorporating EPWP programmes into their plans. My interpretation of this statement is that welfare programmes such as EPWP and CNDC, in their present form, do not translate to the development which the government seeks to attain.

Homeless people also benefit significantly from CNDC, which provides them with at least one meal a day, and NPOs, which provide shelter. Even so, the question of the sustainability of these programmes remains. The DSD has failed to pinpoint how each of these programmes translates for various vulnerable groups, especially the homeless. Expanding on the recommendation that DSD needs to conduct research to define homelessness, I recommend that the department further compile a demographic profile of each homeless person they have reached through the current programmes. This profile should include elements like skills level and educational background which will inform how economic transformation, the labour market and job creation for homeless people would look.

Substance abuse

The study found that many of the homeless people who had been placed at temporary shelters battled with substance addiction which may have been the cause of their homelessness or a habit they developed while on the streets. Substance abuse is one of the DSD's priorities to ensure social cohesion and safe communities. In 2022 the DSD launched a treatment programme where they intended to maximise admissions in 1400 treatment beds and intensify aftercare, skills development, education and bursaries in Gauteng. This is in line with one of the recommendations made by social workers who suggested that Gauteng is in dire need of more treatment centres because the waiting period is too long, causing many of them to relapse while waiting for placement at a rehabilitation facility.

The Gauteng Premier, alongside the Gauteng MEC of Social Development, Ms Mbali Hlophe, also launched an Anti-Substance Abuse Helpline which was to be capacitated with over 100 social workers (Bodibe, 2022). This programme is intended to link people affected by substance abuse to professional interventions.

Output Indicators, Annual and Quarterly Targets

Output Indicators	Annual Target	Q1	Q2	Q3	Q4
Number of people reached through substance abuse prevention programmes	3 166 757	698 571	1 648 693	2 694 915	3 166 757
Number of children below 18 years reached through Ke-Moja drug prevention programme	756 010	192 036	398 991	559 959	756 010
Number of youth (18-35) reached through Ke-Moja drug prevention programme	421 053	129 787	231 553	331 536	421 053
Number of parents and caregivers participating in Ke Moja Programme	38 221	10 586	9 846	8 977	8 812
Percentage of persons who received substance abuse treatment participating in aftercare programme	100% (10 807)	100% (2 718)	100% (2 686)	100% (2 717)	100% (2 686)
Number of service users who completed in-patient treatment services at funded treatment centres	3 156	749	829	749	829
Number of service users who accessed Substance Use Disorder (SUD) treatment services.	28 076	7 419	14 304	21 188	28 076
Number of service users admitted at registered and funded Halfway Houses	720	180	180	180	180

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Figure 3:GDSD Substance Abuse Targets

The above illustration clearly accounts for GDSD Annual Performance targets as it relates to substance abuse. The GDSD budget for restorative services increased from R523.5 million in 2018/19 to 728.3 million in 2020/21. R760 million is allocated for the 2022/23 financial year, including an allocation for in-patient substance abuse centres. Although substance abuse continues to affect South Africa and derail the fight to eradicate homelessness, I struggle to critique the department regarding its substance abuse initiatives. Perhaps future research can give a perspective or a review of these programmes. Substance abuse is a broad phenomenon where interventions cannot focus solely on addiction but also on the growing drug market that fosters the circulation of illegal drugs in SA.

Individual factors that cause homelessness.

While most people are homeless because of the structural issues mentioned above, many other causes exist. Homelessness can be context-specific, meaning that the experiences leading up to homelessness may be unique to an individual. The study found that for some, homelessness begins as a temporal problem where people opt to sleep on the streets on days when they cannot afford transport fees and moving closer to the workplace is expensive for people working low-paying jobs or informal forms of work such as street vendors. Although this experience is unique to the individual, its root cause comes from structural problems in today's economy that hinder one from accessing decent employment opportunities to afford transport and housing.

Other causes of homelessness in Gauteng include family conflict and abuse, disability, and medical and mental conditions. Child homelessness is a rising problem that affects many children who are orphaned and or abandoned. The DSD can cater for these children until the age of 18 – 21, depending on when they complete school. Post this, these children, if not adopted or reunified with family, become vulnerable to being permanently homeless. In such cases, the DSD, through its various units, can intervene on a case-by-case basis.

Negligence by the department.

Moving away from the Apartheid legacy and how it has manifested itself in homelessness, the pandemic revealed that the DSD itself had no operational procedures in place that guide how to intervene in the homelessness crises. More worrisome is that the department did not have proper apprehension of the depth of the problem as the homeless programme had been the sole

responsibility of the municipalities. Proving this is the lack of statistics that would assist the department in intervening adequately. The department had seriously underestimated the number of homeless people in both cities which compromised the quality of interventions. At the onset of the pandemic, temporary shelters experienced challenges such as shortages of beds, blankets, limited food, being under-capacitated in terms of staff, especially security personnel and social workers and limited working resources such as petty cash.

For many years municipalities have been responsible for providing shelter to homeless people however, both cities were also criticised of not having adequate systems in place to show that they were responsible for the programme prior to the pandemic. Interventions of the city focused largely on providing overnight and temporary shelter but fell short of sustainable programmes that would gradually move the city closer to eradicating the problem. Social workers from the DSD share that in attempt to forge working relations with the municipalities, it was clear that they too could not account, even though records, for the intensity of the problem in Gauteng. Programmes of the municipality also lack continuity because of political factors. Johannesburg alone has had six mayors in the past two years, and Tshwane has had five since 2016, which has significantly impacted service delivery but has also prolonged the conversation to secure abandoned buildings for homeless people. The services provided at some of the shelters of the municipalities are believed to compromise the dignity of the homeless person as they are not compliant with the department's standards. Although social workers shared their frustration with the city's interventions, this does not negate that the DSD is obligated to "provide integrated, comprehensive and sustainable social development services" to all its people.

Before the pandemic, the department failed to cater for the homeless constituency. Although the pandemic prompted the department to make strides towards establishing a homeless programme, the 2022/2023 annual performance plan highlights the department's legislative/ policy directive and the department's priorities as per Sustainable Development Goals (SDGs) which align with the NDP, however, does not detail how the department intends to elevate homelessness in line with these goals and further, how the department intends to advance their policy position on homelessness. Annexure A, attached below shows that some of the priorities of the department include plans to.

a) Improve economic transformation through NDA co-operatives.

b) Education, Skills, and Health through NPO development, youth skilling and nutrition programmes.
c) Spatial Integration, human settlements and local government through infrastructure and shelters.
d) Social cohesion and Safe Communities by focusing on social crime, family programmes and substance abuse.
e) A better Africa and world through migration, xenophobia, and refugee grants.

The above are amongst many examples of the department's priorities however, I have intentionally selected those that link directly with the findings of this study. Although these are key root causes of homelessness, I do critic the department for not going further to define truly how these priorities would translate for various social groups especially people experiencing homelessness. As a recommendation, the study's findings identified a need for a feasibility study and impact research that will inform all other interventions of the department. I fully support this recommendation; if the problem is clearly defined, the department will then be able to assess risk, cost, and the impact of their programmes.

Interventions

In response to the COVID-19 pandemic, six interventions stood out from the DSD.

1. Temporary shelters, food, blankets.
2. Rehabilitation and other medical interventions.
3. Identity documentation and SASSA social relief.
4. Counselling and family reunification.
5. Skills development, job applications and external referrals.
6. Vaccinations.

Social workers who are also at the forefront of delivering the plans of the Gauteng DSD played a major role in ensuring that the above interventions are provided. The COVID-19 pandemic found the department unprepared hence the nature of interventions, although necessary, are immediate, temporary and need more innovation. Considering that the DSD is making a capital investment towards the homeless programme, interventions should be more deliberate in achieving notable change rather than managing a problem at face value. The expectation was that social workers would be able to clearly articulate the deliverables or outcome of each intervention. Seemingly many social workers could only account for their work and not entirely

for the department's impact. Again, here I emphasise the value of evaluation of programmes as it allows one to draw thorough judgements about the programme, its effectiveness, and future decisions. I acknowledge that the pandemic required prompt response to homelessness, post the pandemic the DSD did not revisit the programme to redefine the interventions. Figure 2 is the only reflection of the pandemic that the department published. Their in-depth strategy, targets and long-term plans remain unknown to the public who are not privy to internal discussions.

Challenges

Social workers who work on the homeless programme experienced several challenges including people attempting to escape from shelters at every disjuncture, more people utilising hotspot areas than shelters and the lack of identity documents. All of these are challenges that directly affect the homeless person. Indirect challenges include the lack of statistics and the shortage of social workers.

Escapes from shelters were influenced by several issues, including addiction and insufficient resources at the temporary shelters set up during the pandemic. Escapes from shelters were also primarily informed by homeless people wanting to retain their independence and their ability to fend for themselves. The dilemma here is that even in an ideal scenario where all homeless people were open to shelters, the department would not be able to cater for all of them. Homeless people who are not in shelters utilise hotspots, including parks and abandoned buildings. The DSD has had to discontinue funding to these hotpots because any resources allocated to hotspots are difficult to account for. The hotspots are generally unsafe, making it difficult for social workers to make site visits. However, they cannot be regulated because they do not have any legal document or constitution that can be used for accountability purposes. Homelessness is a complex phenomenon because many of the interventions of the DSD depend on the individual's willingness to cooperate. As much as homeless people have constitutional rights that DSD must protect, they also have an active role in eliminating the problem. In this regard, another contribution to the legislative framework for homeless people is that it should also speak to involuntary procedures.

Another challenge that came out from this study is the need for more social workers. At the onset of the pandemic, the Gauteng DSD utilised social workers on a voluntary basis to assist with the programme. Once the programme had found its feet, most of these social workers

returned to their original roles. Despite reports that there is a critical shortage of social workers (Cloete, 2022), Over the past two years, the Gauteng DSD has continued to utilise unemployed skilled social workers as interns as well as contract workers, earning R6000 per month rather than recruiting and capacitating social workers permanently. Given that social work is a professional qualification, I firmly believe that the department is trying to compensate for its budget constraints by exploiting qualified social workers. The Gauteng DSD recently launched Anti-Substance Abuse Helpline was set to capacitate 100 social workers however, this has not been put into effect, to date the department has not advertised these positions, which then leads to leads me to question where the 100 social workers would come from given that social workers who are already in the system already have designated roles.

Successes

Despite the department's shortcomings, I noted earlier that COVID gave birth to the homeless programme. Thereafter, DSD increased their funding for homeless shelters and currently, "The Gauteng Department of Social Development is funding 26 homeless shelters in the province and has launched four park homes for the homeless across the province, accommodating around 3000 beneficiaries. The department continues to link beneficiaries in these park homes with centres of excellence for skills development," shared the department.

At the temporary sites established, social workers provided psychosocial support mainly through family reunification and counselling. DSD ensured that people who had obtained their documents could also access social grants. Also, important to note is the intergovernmental relations that DSD forged with other departments including the DoH, home affairs, NGOs, and the SAPS. These intergovernmental relations enabled the department to provide a broader range of services such as medical treatment and vaccination with the assistance of hospitals such as South Rand Hospital, rehabilitation through organisations such as SANCA and temporary employment opportunities from NGOs such as the Ikusasalethu Youth Development programme.

Proposed Solutions

Despite social workers being expected to work under stringent working environments where they too criticised the department's operational procedures, from all those who participated in

the study, I commend their dedication, passion, and willingness to work towards finding solutions to the problem.

Communication

A significant concern flagged was the disconnect between what the DSD from all levels (National, Provincial and Regional) communicates in public and how social workers translate the communication. Given this, an abstract solution that emerged from the study is internal communication. The DSD was criticised of being populist which I also picked it up on many instances where the departments launched programmes on media platforms however the Annual Plans of the department do not reflect this. Recently the Gauteng MEC has been criticised of reprioritising NGO funding. An internal consultation was essential because various monitoring social workers were pulling from different directions, others attesting that indeed, NGOs had received less funding and, as a result, many NPOs will be affected.

Contrary to this, in the media, the MEC argues that no budget cuts were made to the 2.3 billion allocated to NPOs (Majavu, 2023). In the same light, the former MEC Morakane Mosupyoe announced that DSD had set aside 87 million to spend on programmes for homeless people (Sobuwa, 2022). Not all social workers were clued up on these budget allocations and further how the money would be prioritised for various areas related to homeless people. DSD must resolve its communication channels to ensure that firstly, social workers can contribute holistically to programmes, and secondly, initiatives or any developments by the National department are unpacked and unanimously understood thoroughly across the department.

Feasibility and Impact Study

As a solution to the operational challenges that the department encountered during the pandemic, social workers proposed that a feasibility and impact study would be beneficial for the department as it would first inform the direction and form that future programmes take. All stakeholders have a perspective of what is ideal, and with thorough research, the department would be able to assess the feasibility of all proposals. Currently, social workers debate whether the department should have a homeless unit within the department designated towards homelessness considering that other social ills have special units within the regions that deal with various problems, including older persons, substance abuse, disability, and children. Contrary to this view, other social workers believe that the department is overcommitted to programmes, some of which are ineffective for the various constituencies. The suggestion in this regard is that the department should focus on strengthening existing programmes rather

than extending its scope of work. I believe that a feasibility study would have assisted the department to access the viability of both these interventions.

Nonetheless, the department in Gauteng already has a homeless unit that is a sub-programme of the "Care and Services to Families department. Secondly and most importantly, considering that the department has already established functioning homeless units at the regional level, an impact study is essential. In 5 years, Gauteng should be able to thoroughly assess the impact of programmes of this nature that are already in effect.

Accountability

DSD needs to strengthen its structures to ensure that there is accountability internally and externally with the NGOs that the department funds. The department has a partnership and finance unit as well as a monitoring and evaluation unit. Both are responsible for monitoring that the shelters meet their constitutional obligation and adhere to their service level agreements (SLA) with the department. Although it is a success that the DSD funds the homeless program through shelters, the impact will be minimal if the department is unable to hold NGOs accountable for monies allocated to them.

Homeless Forum

Gauteng has a homeless forum who are also at the forefront of advocating for people experiencing homelessness. Given that the department cannot spontaneously convene homeless people for consultation, social workers proposed that DSD should strengthen their relations with the homeless forum as this structure has made significant strides to organise homeless people. The homeless forum has a 10-year strategic plan that proposes housing, economic development, psychosocial interventions, and awareness-raising approaches. Therefore, it would be ideal that they are given a platform to be active role players in formulating a DSD strategy and policy development.

Skills development

Another solution to homelessness is skills development, given that many people are unskilled and in need of sustainable employment opportunities. A question that remains uncovered and perhaps a limitation of this study is "What does skills development look like for the DSD"? In a country that is already facing an increase of skilled/educated yet unemployed people, the department should be weary already that there is a market shift and therefore, skills development programmes of the department should adapt to this. I note again that programmes

such as EPWP and now, the Bontle Ke Botho Clean Up initiative are temporary and will not enable the department to realise their priority to ensure economic transformation and job creation.

Permanent shelters

Shelters funded by the department allow one to stay for three to six months, suggesting that this period is sufficient for individuals to "sort themselves out". Although this sounds logical, the department now faces challenges of people hoping from one shelter to another because in the allocated 6-month period, they would have not been able to escape the challenges that led them to homelessness. Social workers proposed that the DSD should have permanent shelters. A large emphasis was made on rules and regulations at these shelters because even with a permanent structure, a mediation process must occur to ensure that the person is reintegrated back into their community. This proposal was made considering all the abandoned buildings that the City of Tshwane and the City of Johannesburg have access to. Gauteng DSD in its Annual Performance Plan 2022/23 has allocated to buildings and other fixed structures, which is a positive move toward securing a building to accommodate the vulnerable.

What policies informed the interventions?

DSD does not have any forward-looking policy on homeless people however, even the municipalities, who have been running the programme for much longer, only have draft documents as a policy reference. The COVID-19 pandemic prohibited any movement during the pandemic which had many adverse effects on the country. It is however important to note that the pandemic also gave birth to homeless interventions within the department. In the Gauteng DSD Annual Performance Plan, they make mention that:

> "Buildings and Other Fixed Structure budget will be utilised for the upgrade and rehabilitation of the departmental Child and Youth Care Centre and Regional Offices. Through this allocation, the department will also prioritise shelter for the vulnerable or homeless programme whereby an existing building will be upgraded and refurbished to accommodate the vulnerable."

The statement above shows that efforts are being made to elevate homelessness compared to the 2019/2020 Annual Performance Plan, that does not mention what resources were allocated directly to homeless programmes.

In terms of policy advancements, Gauteng DSD, at the time of the study, was in the process of establishing policy guidelines. Their annual performance plan also refers to a "Draft Gauteng City Region Strategy on Street Homelessness", which is “already” in place however both documents have not been published, leaving us to assume that they have not been finalised internally. This lack of urgency and poor administration in the department is worrisome, mainly because the Gauteng DSD, on media reports, appears to regard homeless people as a priority. Another observation made is that there is a huge communication breakdown between senior management in the department and the social workers expected to carry out these duties and therefore if there were any policy developments in the department, the execution of these policies would be compromised.

RECOMMENDATIONS

In the previous section, I critiqued the department as reactive hence their interventions are temporary and unsustainable. This section seeks to re-emphasis some of the key recommendations that emerged from the study. Given the complex nature of homelessness other recommendations can only be realised through intergovernmental relations while other issues such as migration require external government relations.

In a journal titled "Entries and Exits from Homelessness" by Johnson, Scutella, Tseng, & Wood (2015) emphasise that there is an interaction between structural factors such as unemployment; and individual characteristics such as age, which is beyond the person's control and, behavioural patterns which a person has agency over (Johnson, Scutella, Tseng, & Wood, 2015). Interventions by the department should therefore take this into cognizance. These authors recommend that it is firstly, important for interventions to balance between preventative and reactive services. DSD preventative interventions like the KE-MOJA substance abuse programme focus largely on preventing behavioural patterns that lead to homelessness. Little emphasis is made on structural interventions that will prevent the problem. Secondly, as it stands, DSD is unable to make a clear diagnosis of unique factors that contribute to homelessness in SA especially in cities. Homelessness among individuals can be increased by a variety of factors and if interventions focus only on one of these factors (Structural Factors or Individual Factors), the problem will remain high, regardless of the interventions (Johnson, Scutella, Tseng, & Wood, 2015).

Structural Issues

1. Migration

Looking at migration as one of the structural issues, we know that migration is reported to have adverse effects on cities which include overcrowding, increased demand for housing and economic pressures resulting in low-status and low-paying jobs (Solomon, 1994). Having scrutinized the DSD plans as published in 2010, it is without a doubt that the department has failed implementation and has failed to consistently review and amend plans as social trends change over the years. In 2010 with regards to migration and population growth, the department had intended to "increase alternatives to migration by intensifying rural development, reducing backlogs of urban infrastructure and reviewing the nature and impact of all forms of international migration in order to formulate an appropriate strategy. (Development D. o., Fifteen Year Progress Review of the Implementation of the Population Policy for South Africa

(1998) 122 and the International Conference on Population and Development (ICPD) Programme of Action (1994, 2015)" 13 years later, the department has not achieved fully these goals.

Although the recommendation for rural development is broad and cuts across numerous departments, DSD nationally, in its approach needs to consider how rural development would look from a social development perspective; and further, how it would translate to reduced levels of migration in cities. As a first step in the right direction, The Gauteng provincial government in October 2022 extended the MEC of Social Development portfolio to incorporate the elements of agriculture, rural development, and the environment. My issue with the department here is the lack of communication internally and the inability to formally publish these changes and the implications thereof. Over a period of over 8 months, Gauteng DSD has not clearly defined what this title change means for the department's interventions. It is therefore far stretched to even expect that they have defined in their plans how rural development would assist the homeless.

Migrants from Zimbabwe account for 24% of the total number of immigrants in South Africa, Mozambique 12% Lesotho 7% (Ndebele, 2021). These statistics further indicate that most immigrants come from the Southern African Development Community (SADC). Although not all migrants are homeless, the study found that a significant amount of homeless people are migrants, and this constituency benefitted the least from DSD interventions because of the lack of adequate documentation. This proves that there is thus a need for a strong framework to coordinate labour migration within the SADC region. Migration is clearly beyond the jurisdiction of the DSD; however, the implications of migration affect greatly the operations of the department. I therefore recommend that SADC region should intervene given that their primary role is to "achieve economic development, peace and security, and growth, alleviate poverty, enhance the standard and quality of life of the peoples of Southern Africa, and support the socially disadvantaged through Regional Integration". In line with their mandate of Social and Human development I believe that SADC would be able to contribute to the establishment of homeless policy as it pertains to migrants and secondly, SADC can relieve the DSD in numerous ways including the proper documentation of refugees and/or provide capital injection into the initiatives of DSD such that they incorporate migrants as well.

2. Communication within and external to the DSD

As noted previously, there is a huge disjuncture between what DSD communicates on media reports, what DSD communicates internally and through their action. As another recommendation, DSD should pay attention on the element of internal communication and public reporting. Supporting this, in a DSD briefing of the National Drug Master Plan one of the points that were raised by the Ms Christians of the Democratic Alliance was that it is difficult to access departmental reports which have been submitted and signed off. Her questions suggest that without departmental reports the department cannot be held to account, nor can Parliament monitor their progress. Although this discussion occurred in the context of substance abuse, I share the same sentiments with regards to the homeless programme.

The department makes a lot of mention to homeless programmes in the media however their department reports do not reflect this. One of the findings of the study was that the department was in the process of establishing guidelines for homeless interventions and shelters however, in 2023, a year after the data was collected, the department has not published any policy framework on homeless people. A recent news article also suggests that NPO funding was reduced to allocate funds to the homeless programme. An article titled "Vulnerable lives compromised as DSD reduces NPO funding by R62,1 million" suggests that the funding was reprioritised to the drug and substance abuse programme run by the Gauteng Premier Mr Panyaza Lesufi. Although the MEC Ms Mbali Hlophe debunks these allegations the Gauteng DSD has not published any formal departmental reports that allow external readers to fully scrutinize what has led media and other political structures to assume that NPO funds were re-prioritized.

3. Housing and Shelter

Housing and shelter have been identified as structural challenges throughout this study. Housing and permanent buildings for shelter are also beyond the jurisdiction of the DSD and therefore the recommendation in this regard is that DSD should have intergovernmental relations with relevant departments (Department of Housing and Municipalities) so that all spheres of government intervene towards homelessness in a manner that correlates with one another.

4. Unemployment

Unemployment has been discussed intensively as a leading cause of homelessness in SA. Given this, emphasis is made on sustainable job creation in South Africa and all sectors including DSD should have clearly defined roles in this strategy. This discussion cannot happen without

comprehensive information on the skills profile of homeless people and the ideal labour market for this category of people. Without such research the DSD risks providing skills development opportunities that are not relevant in the present-day labour market job opportunities that are temporal such as EPWP.

5. Data Collection and Statistic relating to homelessness.

Throughout the study, I have also made an emphasis on the need for statistics. The DSD needs to establish means to compile comprehensive statistics on the number of homeless people in South Africa. Without neglecting the fact that this constituency is always mobile, resource allocation and subsequently, the quality of intervention depends largely on these statistics. If DSD had collected details of beneficiaries who received assistance during the pandemic, this can be used as s working database for the current interventions. Going fourth, I recommend that DSD should delegate a timeframe to collect adequate data of homeless people in Gauteng. Despite concerns of this group being mobile, the study found that at some point of their stay, homeless people will reach out for relief whether through overnight shelters or just soup kitchens. These are strategic places where the data can be collected and consolidated into a single database. This database may extend to include a demographic profile of the person, their ideal intervention, and skillsets.

6. Sustainable Interventions

The lack of sustainable solutions also stems from populist interventions and secondly, interventions and plans that are not revisited to access their practicality, impact, and sustainability. Given this, DSD needs to strengthen its monitoring and evaluation methods.

7. Policy Framework

Lastly, and most importantly, the findings of the study have shown on numerous accounts that DSD needs to establish a homeless person's policy framework that guides their interventions. Without such a framework, nothing truly guides the interventions of social workers within the department.

CHAPTER SIX: CONCLUSION

The purpose of the study was to explore what the Gauteng Department of Social Development's responses to homelessness revealed about their understanding and approaches to homelessness during the COVID-19 lockdown. To gain an understanding of this phenomenon, I conducted semi-structured interviews with social workers at the Johannesburg Region DSD and Tshwane DSD, as well as Wembley Stadium, one of the homeless sites set up in response to the pandemic.

At the beginning of this paper, I quote Linda Lingle (2004) who suggests that as a society "We have come dangerously close to accepting the homeless situation as one that we just can't solve". It has become a norm to ordinary South Africans that at each stop in Gauteng, you will meet a homeless person, seeking assistance in the form of food, money, or employment. Further demonstrating this, the study found that there are no direct statistics of homeless people in the country however it is estimated that SA has about 200 000 homeless people, of which 50 000 of them are in Gauteng. It is then alarming to learn that at the onset of the pandemic, both the City of Johannesburg and Tshwane could only for 3800 homeless people. While the lockdown was imposed abruptly, the pandemic revealed that the DSD had neglected homeless people, leaving all interventions to various municipalities throughout Gauteng.

This paper goes on further to explore the interventions of the department during the pandemic. DSD was able to establish temporary sites that would remove people from the streets which in the long run gave birth to the homeless programme that is currently funding 26 homeless shelters. Some of the interventions provided at these sites include psychosocial support, counselling, and family reunification. Through the intergovernmental relations formed by social workers during the pandemic, homeless people are connected to various resources including health services, social grants, and rehabilitation centres. These successes were however countered by ample challenges such as homeless people being resistant to shelters, the lack of proper documentation and limited rehabilitation facilities.

The challenge of homelessness continues in Gauteng despite all the interventions that have been put in place since 2020. Given this, it was essential for this paper to provide recommendations for future research but more especially for the department itself. Crucial to the findings is the lack of policy or legislative framework that guides the department's

interventions. In the academic sphere, future research would therefore be able to guide how this policy would look such that it is inclusive of the many complexities of homelessness.
I further recommend that to have effective interventions, DSD should invest in thoroughly understanding homelessness through informed research. This study unpacks homelessness within the SA context, Homelessness as a structural problem and homelessness as an individual problem. We learn that factors such as migration or urbanisation cause homelessness as people move more towards cities to seek better employment opportunities however, we also learn that structural factors such as unemployment and substance abuse expose people to homelessness while for others it's individual issues such as behavioural problems or abuse that led them to homelessness. All these problems are intersectional and therefore DSD interventions need to reflect a detailed diagnosis of the nature of homelessness in Gauteng.

Finally, the study appreciates that although homelessness is a social welfare problem, issues of shelter and housing, education, and skills development, employment opportunities, and migration issues extend beyond the boundaries of the department hence the emphasis on the need to strengthen intergovernmental relations so that their plans correlate with one another but most importantly, to promote sustainable interventions.

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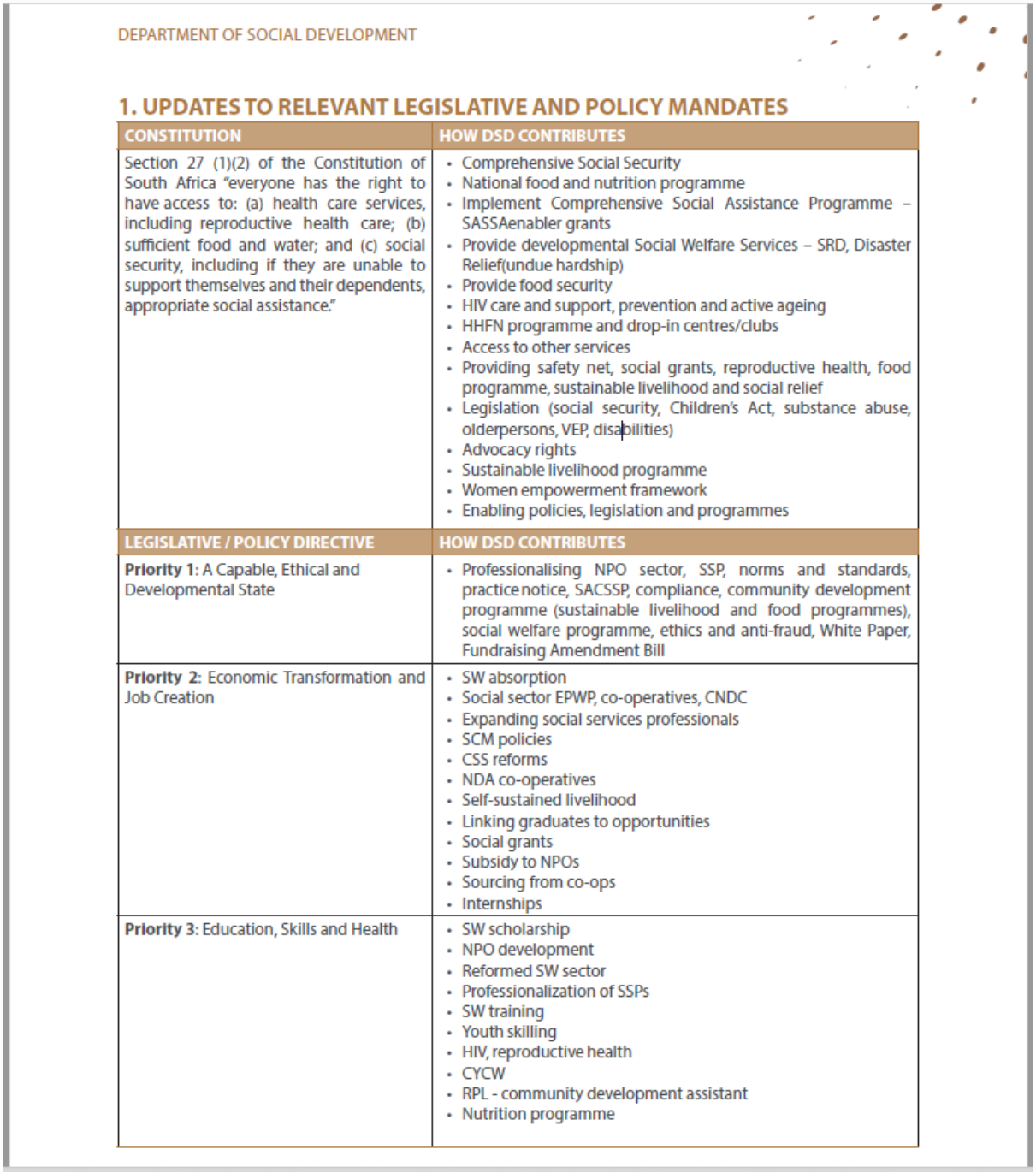
ANNEXURES



DEPARTMENT OF SOCIAL DEVELOPMENT

1. UPDATES TO RELEVANT LEGISLATIVE AND POLICY MANDATES

CONSTITUTION	HOW DSD CONTRIBUTES
Section 27 (1)(2) of the Constitution of South Africa "everyone has the right to have access to: (a) health care services, including reproductive health care; (b) sufficient food and water; and (c) social security, including if they are unable to support themselves and their dependents, appropriate social assistance."	• Comprehensive Social Security • National food and nutrition programme • Implement Comprehensive Social Assistance Programme – SASSAenabler grants • Provide developmental Social Welfare Services – SRD, Disaster Relief(undue hardship) • Provide food security • HIV care and support, prevention and active ageing • HHFN programme and drop-in centres/clubs • Access to other services • Providing safety net, social grants, reproductive health, food programme, sustainable livelihood and social relief • Legislation (social security, Children's Act, substance abuse, olderpersons, VEP, disabilities) • Advocacy rights • Sustainable livelihood programme • Women empowerment framework • Enabling policies, legislation and programmes
LEGISLATIVE / POLICY DIRECTIVE	**HOW DSD CONTRIBUTES**
Priority 1: A Capable, Ethical and Developmental State	• Professionalising NPO sector, SSP, norms and standards, practice notice, SACSSP, compliance, community development programme (sustainable livelihood and food programmes), social welfare programme, ethics and anti-fraud, White Paper, Fundraising Amendment Bill
Priority 2: Economic Transformation and Job Creation	• SW absorption • Social sector EPWP, co-operatives, CNDC • Expanding social services professionals • SCM policies • CSS reforms • NDA co-operatives • Self-sustained livelihood • Linking graduates to opportunities • Social grants • Subsidy to NPOs • Sourcing from co-ops • Internships
Priority 3: Education, Skills and Health	• SW scholarship • NPO development • Reformed SW sector • Professionalization of SSPs • SW training • Youth skilling • HIV, reproductive health • CYCW • RPL - community development assistant • Nutrition programme

Figure 4 - DSD Annual Performance Plan 2022/23

LEGISLATION / POLICY DIRECTIVE	HOW DSD CONTRIBUTES
Priority 4: Consolidating the Social Wage through Reliable and Quality Basic Services	• Legislations • Norms and standards • Social protection • UIF, SASSA, RAF, minimum wage, grants, HHFN, EPWP, define socialfloor, HIV programme, social grants, CNDC
Priority 5: Spatial Integration, Human Settlements and Local Government	• Infrastructure • Shelters and treatment • CYCC • Community (participation, action, research)
Priority 6: Social Cohesion and Safe Communities	• Shelters • GBV • Infrastructure • VEP • Social crime prevention • Substance abuse • Community development • Social welfare service • Family programme • CPS • Social-mobilisation programmes • Men's forum • Community mobilisation and dialogues • Sexual health and reproductive programmes
Priority 7: A better Africa and World	• All policies implemented effectively • Multilateral/bilateral (UN, AU, SADC) • Migration, xenophobia, refugee grants • Social development, social security, NISPIS • Social sector jobs (HCBC, CYCW) • Training of SSPs (CPD, SACSSP) • Social security, developmental social welfare, community development and sustainable livelihood • Support demographic plan Integrated Development Plan (IDP), social mobilisation, participate in local government structures (KHAWULEZA) • GBV, substance abuse, migration, family strengthening, moral regeneration • Skilled workforce
SDGs – ALIGNED TO THE NDP INCLUDING THE PRIORITIES	
Goal 1 "No poverty" **Goal 2** "End hunger, achieve food security **Goal 5** "Gender Equality"	• **Goal 1:** Sustainable livelihood programme + social assistance, social grants, community development, HHFN • **Goal 2:** Food nutrition, CNDCs, SRD, NPO funding, grants, HHFN • **Goal 3:** GBV /VEP, mainstreaming and advocacy, social grants, women empowerment programme (including violence prevention and parenting programmes)

Figure 5 DSD Annual Performance Plan 2022/23