THESIS SUBMISSION

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An analysis and reframing of South African policies in response to homelessness: Towards an evidence-based victim inclusive policy framework

Full names and surname:

Jean-Paul Pophaim

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Supervisor: Prof Francois Steyn

Co-supervisor: Dr Matthew Cronjé

An analysis and reframing of South African policies in response to homelessness: Towards an evidence-based victim inclusive policy framework

Jean-Paul Pophaim

Submitted in accordance with the requirements for the degree

Doctor of Philosophy with Specialisation in Criminology

Department of Criminology

Faculty: Humanities

University of the Free State

Supervisor: Prof Francois Steyn

Co-Supervisor: Dr Matthew Cronjé

Dedication

To my nephews

Daxton and Ethan Nagel

My message to you…

"If you believe in yourself, nothing is impossible. Without a dream you cannot have an aim and without an aim you cannot achieve and to dream you must have faith in yourself". ~

Koyel Mitra

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Declaration: Doctoral Student

I, Jean-Paul Pophaim, declare that the thesis (or interrelated, publishable manuscripts/published articles) that I herewith submit in fulfilment of the Doctoral Degree in Criminology at the University of The Free State, is my own, independent work and that I have not previously submitted it for a qualification at another institution of higher education. All citations, references and borrowed ideas have been duly acknowledged.

(Student signature)

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(Date)

Criminology

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For examiners: Doctoral thesis written in the three-article format

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(ii) A mini thesis is written under the guidance of a supervisor or a supervisor and a co-supervisor(s) (at least 60% of the degree).

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(e) At least one (1) of the manuscripts must be publishable in an accredited journal, or the published articles must have appeared in an accredited journal.

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Summary

At the dawn of democracy, the intended break from institutionalised racism, segregation and oppression of apartheid sought to establish a new society founded on equality and humanity. However, homelessness remains a persistent social issue that starkly undermines these founding democratic principles. It serves as a reminder of the deep-rooted systemic and individual inequalities that continue to afflict the nation and its citizens. The thesis investigated the context in which homelessness exists and the manner in which it is being responded to. The aim was to develop an evidence-based victim inclusive policy framework to improve local responses to homelessness, with an emphasis on promoting inclusivity and protection among this vulnerable population. Guided by three key objectives, the study included an analysis of existing local and international responses; to determine the experiences of victimisation and service needs among people experiencing homelessness; and to obtain input from various stakeholders to inform the development of an inclusive policy framework.

The study is underpinned by an integrated theoretical framework which connects to existing knowledge while facilitating the generation of enhanced perspectives within the homeless domain. The theoretical considerations unpack the complex trajectories from the onset of homelessness through the analytical framework of the life course as a developmental theory, to the nuanced explanations offered by the social cognitive theory, providing insight into how individuals interact with various factors shaping their responses to adversity and access to resources. The public (rational) choice and deliberative public administration theory provided critical insights into the policymaking process, which is an important aspect in response to this progressive social issue. To explain victimisation, the study drew upon the differential risk model and extended low self-control theory. The theory of planned behaviour examined help-seeking patterns and service access, identifying barriers among marginalised groups that stakeholders need to remain cognisant of. Structural functionalism portrayed the notion of a broken system, advocating for the improved collaboration of key figures to achieve inclusivity and enhanced responses.

Grounded in a pragmatic paradigm, underpinned by a mixed methods approach, the thesis is presented in three phases, sequentially designed to address different aspects of the research problem. Through the use of document analysis, questionnaires and semi-structured interviews, the study revealed a significant amount of rich information within the context of six local policy documents, 150 people experiencing homelessness and 38 stakeholders in the service sector.

Firstly, the study identified strengths and limitations in current responses on a provincial and municipal level, denoting a generally overlooked area of service delivery in South Africa. The second phase provided rich data regarding the lived realities of people experiencing homelessness. Through the identification of distinct pathways and the development of an experiential definition, the study contributes to the improved contextual and conceptual understanding of homelessness in academic discourse. The study further revealed the dynamic interplay of risk factors perpetuating experiences of vulnerability, violence and strife. A substantial proportion of the sample have experienced victimisation (59.7%), with more detrimental impacts and challenges as a direct consequence of their continuous exposure to adversity and complex negative outcomes. Moreover, through consultative engagements with stakeholders, the study presents practical solutions to the challenges confronting both the service sector and people experiencing homelessness. The study contributes to the advancement of theory, policy development and improved practice by adding much needed depth to the dearth of local research. The information obtained through this rigorous process culminated in the development of a pioneering and novel victim inclusive policy framework to facilitate the creation of infrastructure and services for people experiencing homelessness.

Key words: Homelessness, victimisation, vulnerability, risk factors, pathways, policy analysis, policy reform, accessible services, victim inclusive policy framework.

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Part 1: Introduction and rationale

To establish a strong foundation, part one of the thesis provides a general orientation and introduction to homelessness and its multifaceted implications as it has been explored within the context of the current study. The exposition includes the general overview of homelessness in terms of its origin and background and how the phenomenon has been problematised, thereby justifying the rationale for the research. Moreover, a discussion on the policy environment and regulatory frameworks related to homelessness and its associated conditions will be provided in conjunction with the existing literature and relevant theoretical frameworks that can be used to explain various interrelated components of the study. To conclude the section, a discussion is provided on the overarching research methods and ethical considerations, along with the inherent value of the study and the structure of the thesis.

Introduction

Renowned for its extensively documented and well-known narratives of radical political change, South Africa is a nation steeped in history, with one of the most compelling paradigm shifts from apartheid to democracy (Pophaim, 2022:61). Since becoming a democratic country in 1994, a constitutional promise was made to protect and safeguard the rights and interests of all South African citizens (Constitution of the Republic of South Africa, 1996). However, this promise remains a pipe dream in the lives of people experiencing homelessness, in which the aftermath of apartheid capitalism – among other detrimental factors – can clearly be observed, frequently ostracising them to the peripheries of society, where they face extreme poverty and deprivation, marginalisation, and vulnerability to crime and victimisation (Ellsworth, 2019:98; Pophaim, 2022:61). Homelessness as a social concern has been a present fixture for several years, believed to exist prior to the Middle Ages (Kutza & Keigher, 1991:288; Pophaim & Peacock, 2021:69). Its resolution and complete eradication remain elusive and is fast becoming one of the most profound social crises in human history, further exacerbated by several compounding contextual factors such as the widespread impact of the Coronavirus pandemic (COVID-19) (Owadally & Grundy, 2023:178). At the forefront of the rather intimidating social challenge lies a considerable dearth of local research on homelessness and its related conditions exist (Pophaim & Peacock, 2021:72; Pophaim, 2021:260; Sadiki & Steyn, 2021:60), which brings forth a range of practical and ideological challenges related to the key concerns around the quantification, conceptualisation and contextualisation of homelessness.

These seemingly insurmountable barriers, consequently, impact the feasibility of policy and intervention responses, as these initiatives are not based on a clear understanding of what homelessness entails and without the establishment of a realistic baseline, many responses are ill-informed and in the longer-term, remain largely ineffective (De Beer & Vally, 2021a:3; Sadiki & Steyn, 2021:58). To further intensify the problem, homelessness continues to be significantly under-prioritised in the South African context, as the lack of action, support and political will by government and other important stakeholders, has led to the increased visibility of a rather pronounced policy vacuum (Batchelor-Hunt, 2023; De Beer & Vally, 2021b:302; Groenewald, De Beer, Perrier & Makusha, 2023:10; Powell, Perrier & Le Roux, 2021:249). Moreover, with very little application and broadened implementation of existing frameworks (Naidoo, 2010:132-133; Pophaim & Peacock, 2021:82) and the absence of a national policy framework, the gaps further impede the required degree of engagement and intervention at grassroots level. Without clear guidance and support, the homelessness domain is fraught with instances bordering on and including gross human rights violations, often characterised by extreme marginalisation, discrimination, victimisation and limited access to services (Hopkins, Laitinen & Skinner, 2024:2; Perrier, 2021:70; Tenai & Mbewu, 2020:2; Wentzel & Voce, 2012:78).

Origin and Background

Homelessness is a longstanding and daunting social issue that continues to challenge governments globally (Owadally & Grundy, 2023:178). As with most social issues, homelessness is not a new phenomenon; instead, it is best described, due to its persistent nature, as a continuously rediscovered and reemerging issue. While traces of homelessness appear in Mesopotamian and Egyptian texts, the most reliable accounts date back to before the Middle Ages, during which the formation of new displaced groups are documented as a recurring feature at the dawn of each economic order – often accompanied by new meanings and understandings ascribed to the particular group (Kutza & Keigher, 1991:288). In this regard, homelessness has been a constant feature of societies for several years, with an increase in concern for the status of homelessness becoming more prominent over the last two decades (Pophaim, 2019:8). Homelessness has been identified as a global social crisis, prompting the United Nations (UN) to appeal to all member state governments to commit to its eradication by 2030 – which happens to be the target year for achieving the Sustainable Development Goals (SDGs). Although the SDGs seek to eliminate interrelated components of homelessness, such as poverty, hunger and a host of other social issues and share the same 2030 horizon. It is

notable that homelessness was not explicitly mentioned in one of the 17 goals or included as a standalone target. One could argue that this omission reflects the critical gap in global development priorities, considering the obvious intersection between homelessness and multiple SGDs (Casey & Stazen, 2021:63; Pophaim & Peacock, 2021:69; United Nations, 2016). As a result, the overlooked status of homelessness and intermittent inclusion on the agendas of government departments and other organisations has led to slow and under-prioritised action.

The inaction is spurred on by a general disinterest and lack of political will, underpinned by negative stereotypes, stigma, and notions of personal mismanagement. Additionally, many perceive homelessness to be a temporary state, that can be easily overcome, with the associated challenges and adverse experiences – such as victimisation – often regarded as widely overstated (De Beer & Mashayamombe, 2021:278; Garland, 2013:542; Weng & Clark, 2018:82). In South Africa, the COVID-19 pandemic was the revelation which exposed the historic political and institutional fault lines, demonstrating just how neglected homeless populations are and how many cities were unable to produce rapid responses or sustain collaborative solutions that took place during the hard lockdown period (De Beer & Vally, 2021b:314). Alongside a host of practical and ideological challenges, the poor implementation of existing frameworks and the absence of a national policy framework on homelessness are regarded as the most significant challenges contributing to the uncoordinated and ineffective response to homelessness.

With formal responses from only one province, three cities and one municipality, this immense social phenomenon continues to plague the nation and thrive within what is best described as a policy vacuum (De Beer & Vally, 2021b: 302; Groenewald et al., 2023:10). As a result, many local governments tend to take their own approach to address and reduce homelessness, with a mixture of punitive, compassionate, institutionally based strategies, and the less frequently used developmental approaches. However, none of these approaches have proven to be sustainable or have any longer-term, positive impacts (Desmond, Timol, Groenewald & Sausi, 2017: 2; Hopkins et al., 2024:132-133). The convergence of several complex and interrelated factors in the context of the policy vacuum has resulted in the inability to mobilise the correct team of stakeholders or identify the leading agency responsible for addressing homelessness. Consequently, this is consistently exacerbated by the lack of collaboration between sectors and the evident role ambiguity perpetuated by the misalignment of roles and responsibilities within the policy and intervention space – fostering an easy cop-out for important stakeholders who

have not been explicitly mentioned and called to task (De Beer, 2021:144; De Beer & Vally, 2021b:312). Given the social orientation of homelessness, most of the interventions are currently filtered through the Department of Social Development (DSD) and are widely criticised for being uncritical, welfare oriented services, further perpetuating that homelessness should only be viewed and addressed as a social welfare issue, thereby inadvertently disregarding several other challenges that amount to gross human rights violations (De Beer, 2021:144; Muleya & Mlilo, 2023:107-108). Narrowly framing the problem to fit the mandate and budgetary allocations of a single department fails to capture the significance of the collaborative, yet nuanced approach required to address homelessness. Moreover, it is due to the isolated contextualisation of homelessness that many governmental initiatives default to the generic, one-size-fits-all approach.

In this context, the 'easy' management translates to allocating exorbitant amounts of money on the criminalisation of homelessness. In doing so, the untransformed minds and practices of institutions fail to acknowledge the systemic failures that persistently exclude and even exploit people experiencing homelessness – instead of investing in developmentally supportive measures (De Beer & Vally, 2021b:303, 314; Desmond et al., 2017:2; Groenewald et al., 2023:10). Due to the nature of these ostracising practices, people experiencing homelessness are often relegated to areas characterised by high crime rates, poverty and deprivation, and the lack of access to essential services (Perrier, 2021:82). In an attempt to address the broad systemic and subsequent grassroots inadequacies, it is important to assess the current responses to homelessness, gain insight into the nature and broad experiences of the homeless and engage with relevant stakeholders to provide holistic recommendations toward the development of inclusive frameworks, practice and accessible services.

Problem statement and rationale

Homelessness promises to remain a fixed feature of the social landscape for many years to come, as the UN projects that the world's general populace would have grown to more than 9.6 billion people by 2050, with the most significant growth expected to occur in Africa. Moreover, it is anticipated that most of the population will be living in urban areas, with the implication that urbanisation gives rise to one of the most prominent socio-economic challenges, which is displacement (Stonehouse, Grobler, Bhoora & Janse van Rensburg, 2023:1). The UN's projections are in line with other observations that the South African street homelessness numbers portray an upward trajectory (Tenai & Mbewu, 2020:1). With the dire

socioeconomic state and other heightened contributing factors in the South African context, the anticipated population explosion may very well become a reality. The volatile predicament is likely to leave a large group of vulnerable individuals with literally no place to go, left to fend for themselves, forced to live in plain sight of the general public and potentially dangerous people, unprotected with little, to no viable or accessible support (Ellsworth, 2019:97; Pophaim & Peacock, 2021:68; Weng & Clark, 2018:84). Drawing on reports from the UN (2005) and the World Economic Forum (2021), the global homelessness population is currently situated between 100 and 150 million people, with as many as 1.5 to 1.8 billion people currently residing in egregious and inadequate housing conditions, perpetually at risk of absolute or chronic homelessness (Awad, 2023:1; Homeless World Cup Foundation, 2022; Olufemi, 1998:223, 2000:223-224; United Nations, 2025). An alternative set of estimates places the global homeless population at 140 000 000 people and reports that Africa currently warehouses approximately 54 000 000 (38.7%) of the global population, with 24 400 000 (17.4%) from Nigeria alone (Ekpong, 2025). Locally, there are no official comprehensive estimates that fully documents the true nature and extent of homelessness.

Consequently, researchers and policymakers primarily depend on unofficial and voluntary estimates produced by individuals and organisations (Obioha, 2022:992). In the late 1990's it was estimated that there were three million people experiencing homelessness and in 2000 approximately eight million informally housed individuals, which is most likely a reflection of the application of broad definitions, the lack of homogeneity and the many pathways into homelessness (Makiwane et al., 2010; Olufemi, 2000:224). The Human Sciences Research Council (HSRC) provided estimates on the South African homeless population, which placed it between 100 000 to 200 000 individuals (Cross et al., 2010:7). These figures have since set the precedent and have subsequently been widely cited in several academic and policy publications (Desmond et al., 2017; Obioha, 2022; Pophaim, 2021; Rule-Groenewald et al., 2015; Stonehouse et al., 2023; Tenai & Mbewu, 2020). Notably, both global and local population estimates remain widely contested and are considered stark underestimations, as many experts are of the opinion that the accuracy needs to be tested due to the fact that conclusions for research on homelessness are usually based on assumptions because of their constant mobility (Awad, 2023:1; De Beer & Vally, 2021a:3; Tenai & Mbewu, 2020:2). The obstacles associated with counting homelessness are further characterised by several definitional challenges and the fact that the homeless are considered a 'hard-to-count' population (De Beer & Vally, 2021a:2-3; Pophaim & Peacock, 2021:80). Within these opaque

parameters, the 2022 Census reported a combined 55 719 roofless and shelter-based populations (Stats SA, 2023), which can still be considered a stark underestimation, considering prior estimates, the fact that only roofless and shelter-based persons were counted, the dire socioeconomic condition and the sheer visibility of poverty and homelessness in South Africa.

Considering the magnitude of current estimates and future projections of homeless populations, who are forced to live in egregious conditions, one would expect the response to homelessness to be far more prioritised and efficient than it actually is (Pophaim, 2021:260). Despite scant and intermittent global and local advocacy movements to address homelessness, the local response remains constrained, as most strategies and interventions are based on similar, historically generic, one-size-fits-all approaches (Groenewald et al. 2023:10). Driven by a significant dearth of research, a host of ideological and practical challenges perpetuate the inability to accurately contextualise the problem. Consequently, the challenges impact the feasibility of policies and interventions because the effectiveness of responses would depend on the establishment of a realistic baseline which reflects a clear understanding of what homelessness entails (De Beer & Vally, 2021a:3; Sadiki & Steyn, 2021:58). As a result, addressing homelessness in South Africa is further constrained by poorly implemented, uncritical, ineffective and sometimes completely absent policies (De Beer & Vally, 2021b:302). At face value, current responses to homelessness are generally inadequate and lack sustainable, longer-term outcomes, while seemingly mainly addressing the macro level factors and failing to address the micro level factors which could potentially impact the effectiveness of policies and interventions, and in some cases render these directives obsolete (Hopkins et al., 2024; Naidoo, 2010:132-133).

One of the more prominent micro level considerations is the experience of victimisation, which is a considerably neglected area locally with minimal understanding and acknowledgement of its impact within the policy and intervention space (Pophaim, 2021:278). Due to their circumstances and as a joint function of an increased exposure and vulnerability, the homeless are often left traumatised with ongoing mental and physical health problems further complicated by their weak social ties and subsequent inability to access people, places and institutions that could otherwise provide support and services (Pophaim, 2021:262; Turner, Funge, Gabbard, 2018:1). The reality is that people experiencing homelessness often exist in a state of absolute vulnerability and any intervention directed at addressing the complex matter needs to remain cognisant and include services and infrastructure that mitigate the negative

impact of their vulnerability (De Beer & Vally, 2021a:10-11). However, despite the fact that people experiencing homelessness are arguably the most vulnerable in any society, the concept of the homeless victim remains outside of the so-called 'ideal' or 'pure' victim and as a result they remain absent from popular consciousness and from the criminal justice system (Pophaim & Peacock, 2021:80; Scurfield, Rees & Norman, 2004:2). With the above in mind and while addressing the general problem in the absence of victim inclusive responses in South Africa, it is imperative to highlight that a parallel crisis exists. While the general problem of homelessness is being addressed, albeit at a lumbering pace, there are thousands of marginalised and potentially vulnerable victims who simply cannot meet society's standards to be acknowledged and therefore remain cast aside, unable to access the immediate and consistent support and services they are constitutionally entitled to.

To provide further justification for the need to acknowledge and adequately respond to the plight of the homeless victim, the existing literature reports that the nature and patterns of help-seeking behaviour are significantly impacted by experiences of victimisation among general victims of crime (McCart, Smith & Sawyer, 2010:199-200). Therefore, based on the complex circumstances people experiencing homelessness are frequently confronted by, one can only imagine the impact victimisation will have on the help-seeking behaviour of an already ostracised and marginalised group of people, thus justifying the need to explore and identify viable solutions. Within a complex web of interrelated challenges, people experiencing homelessness are impacted by varying degrees of stigma due to negative perceptions and stereotypes, which further exacerbate the lack of access to an already constrained service sector.

Despite the limited amount of literature on the nature and manner in which services are provided to the homeless, sparse reports confirm that people experiencing homelessness often face significant barriers when attempting to access essential services such as healthcare, and when they do, they are often subjected to poor treatment and have unsavoury experiences (Muleya & Mlilo. 2023:88; Weng & Clark, 2018:85; Wentzel & Voce, 2012:78). Moreover, additional reports range from verbal abuse by healthcare practitioners to physical abuse by police officers who have also been reported to confiscate and destroy personal belongings (Pophaim, 2021:261-262; Tenai & Mbewu, 2020:2-3; Wentzel & Voce, 2012:78). Considering the aforementioned information and the lack of or absent responses to homelessness, it is no surprise that this population receive little to no acknowledgment in the mainstream service sector and corresponding policy and legislative frameworks. Within the context of policy

development, social construction and policy design processes often overemphasise the homeless as deviant or undeserving, which is usually in the company of offenders, terrorists and addicts, which results in the inclination to resort to sanctions and punishments instead of developmentally based intervention and support (De Beer & Vally, 2021b:303,314; Hill & Varone, 2016:207). The presentation of the current research problem reinforces the overly reactive, yet passive stance in addressing homelessness in South Africa. The government remain one of the most absent stakeholders, perpetuating the notion that homelessness is not prioritised or a welcomed cost on the current governmental agenda, at the same time failing to realise the potential impact of their involvement (De Beer & Vally, 2021b:301-302). The narrowly formulated and uncoordinated responses confirm that the homeless are viewed as a homogenous group, which adds to the assumption that it can be addressed through structural and systemic interventions alone, often resulting in the loss of human rights, dignity and the recognition of the need to address individually, falling by the wayside.

The government's obligation to deliver on the constitutional rights of every citizen of the country was brought into question in *Government of the Republic of South Africa v Grootboom 2001 1 SA 46 (CC)*[1], however, years later the lack of involvement and service to the vulnerable and destitute remains the status quo. To highlight the need for research of this nature, the current study is positioned to outline the ideological and practical shortcomings of the local responses to homelessness. Through an evidence-based, consultative approach, it consolidates practical recommendations towards developing a victim inclusive policy framework – one which aims to bridge the gaps and facilitate the deliberate creation of equitable and accessible infrastructure and services for people experiencing homelessness, akin to the creation of the envisioned inclusive communities (De Beer & Vally, 2021b: 305,311).

Aim and objectives

The overarching aim of the study is to develop an evidence-based victim inclusive policy framework to improve the current local responses to homelessness by highlighting the need for inclusivity and protection which reflects the acknowledgment of the vast experiences of victimisation and its imminent impact in various spheres of life among people experiencing homelessness. In fulfilment of the aim, the following objectives were developed:

[1] Details of the case provided in the literature review section

- To conduct a comprehensive analysis of existing local and international policy and legislative frameworks in response to homelessness.
- To determine the experiences and service needs of homeless persons who have experienced victimisation.
- To obtain input from stakeholders, policymakers and service providers in the homelessness domain regarding the development of an evidence-based victim inclusive policy framework.

The purpose of the first objective was to explore the local and international regulatory frameworks which directly and indirectly address homelessness and its associated conditions. The aim was to establish whether the broader frameworks and direct (current) responses are adequately geared towards addressing homelessness and if there was any form of coordination and alignment between existing frameworks directed at improving the quality of life and well-being of people experiencing homelessness and its overall resolution. Through this exploration, it became possible to determine the identifiable gaps, strengths and best practice elements that could potentially be integrated into an inclusive policy framework.

The significance of the second objective was to promote the idea of inclusionary consultation. Through this engagement, a better understanding of the experience of homelessness could be obtained. The comprehensive exploration allowed for the collection of information related to pathways into homelessness and the subsequent interaction of the identified factors that often manifest as risks within the context of negative life experiences and outcomes. The objective further explores the immediate service needs and patterns of access among people experiencing homelessness, to better understand potential barriers and ways in which it can be addressed.

The third objective involved the consultation and engagement with relevant stakeholders regarding the manner in which to provide essential or other services to members of the homeless population. Through the documentation of their perspectives and input, a better understanding of the gaps in service delivery could be identified, to gauge the necessity and feasibility of an evidence-based victim inclusive policy framework in conjunction with valuable recommendations concerning its contents. Considering the scope of the study, defined by the aim and objectives, the following section provides a comprehensive outline of the extant literature related to the delimited areas of exploration. The existing literature will be discussed in conjunction with an exposition of the policy and regulatory considerations and an integrated

presentation of the relevant theoretical frameworks, which establishes the groundwork to better explain the focus areas of the current study.

Literature review

As mentioned previously, homelessness is not a new phenomenon and has existed in varying shapes and forms across several societies and timelines. A recurrent theme in the existing literature, that is still evident today, is that historians and contemporary researchers appear to have been more inclined to study societies' elites, instead of those from lower socioeconomic categories (Driaux, 2019:2; Kutza & Keigher, 1991:288). Albeit scant and limited, studies do exist which demonstrate traces of homelessness in ancient Egypt, classical Greece and Rome. Much of the disinterest in studying the history of poverty and its associated conditions stems from the fact that the social lives of the Egyptian elites were of greater interest due to the type of belongings they left behind. Interestingly, the elites in this era only represented 3 to 5% of the entire population, which implies that almost 95% of the population consisted of ordinary people, living in 'relative poverty' and 'simplicity'. Furthermore, poverty cannot be evaluated using contemporary indicators such as economic wealth, for example, as tangible 'money' was not widely used in ancient Egypt. Without extensive documentation on the degree of variation, society was divided using a simple model, referring to the 'haves', who were a small group of decision makers and the 'have nots', who were those who did not participate in decision making practices or have a share in the immense wealth (Driaux, 2019:2). Traces of poverty and the 'inferior' were lost in the immortalising practices of the elite, who had no interest in entombing lower ranked people, who had no connection to them.

Therefore, much of what was available to document and report on reflected the ideals and interests of the elite segment of the population. Thus, one of the main reasons for the invisibility of the poor in ancient texts, could be due to the fact that they were perceived through the eyes of the elite, which involved a level of subjectivity, pertaining to the social phenomenon of legitimacy (Driaux, 2019:3). Whilst not widely documented, traces of poverty and homelessness are recorded in various sections of the Bible, for example, and Jesus said to him… "foxes have holes, and birds of the air have nests, but the Son of Man has nowhere to lay his head" (English Standard Version Bible, 2001-2025, Matthew, 8:20). With further references to the religious position on poverty and displacement, Psalm 137:1-4 and Lamentations 5:2 document the fall of Jerusalem, resulting in the displacement of several Israelites (English Standard Version Bible, 2001-2025). Furthermore, historical narratives

document that restricted access to money among Ancient Galilean peasants meant that they could not purchase food unless they were tenants of elite landowners. Similarly, narratives from Ancient Palestine – which was a predominantly rural region controlled by urban elites – show that access to land and its resources were a pressing challenge for many individuals during this period (Brawley, 2011:1). These accounts underscore traces of economically and structurally excluded groups of people who had to navigate access to land, wealth and resources through associations with the elite landowners. The conditions in which these individuals existed are reminiscent of the current homeless population, raising questions of deep social moral and material inequalities.

With reference to a historical account of homelessness, as it is observed in contemporary society, the United States of America has a rather extensive history. The term homelessness was first used in the 1870s to describe "tramps" who were navigating various parts of the country in search of employment. During this period, as outlined by the National Academies of Sciences, Engineering and Medicine (2018:175) homelessness was described as "a crisis of men let loose from all habits of domestic life, wandering without aim". The 19th century marked considerable growth in industrialisation, which led to the steady migration of people into urban spaces in search of employment. By the 1850s, lodging rooms for vagrants in police stations served as the main shelter system, with most major cities reporting an increase in vagabond populations. After briefly declining after the Civil War, homelessness first became a national issue in the 1870s, underpinned by the growing transportation systems, thus increasing mobility and migration (National Academies of Sciences, Engineering and Medicine, 2018:175). The early 1980s marked the emergence of what may be considered the modern era of homelessness.

Major forces that changed the complexion of homelessness include gentrification of the inner city, deinstitutionalisation of the mentally ill, high unemployment rates, the emergence of HIV/AIDS and the inadequate supply of affordable housing and social services (Bassuk & Franklin, 1992:67; National Academies of Sciences, Engineering and Medicine, 2018:176). Throughout South Africa's history, leading up to the dawn of democracy, vagrancy and squatting represented some of the most contentious issues that involved Black/African and Coloured people who moved around trying to occupy unused land. As part of the colonial rule, these populations were relegated to certain parts of the country, dispossessed and displaced. However, in terms of representations of street homelessness, not much is known as there are no formal statistics on vagrants or the traveling population who did not have a fixed shelter (Cross, Seager, Erasmus, Ward & O' Donovan, 2010:13). Based on this historical account, it

is evident that much of what has been the problem remains a challenge in addressing homelessness in contemporary South Africa.

Many of the structural, socioeconomic and individual deficiencies that manifest in problematic social outcomes, such as homelessness, are still being attributed to the lingering aftermath of the apartheid era (Tenai & Mbewu, 2020:3). South Africa was and remains unprepared for the increasing number of homeless populations. Compared to those who reside in inadequate and informal housing, little remains known about the street homeless and the longstanding reasons are largely attributed to their mobility and elusive nature. There exists a persistent lapse in action towards addressing homelessness, as more than a decade later we are still experiencing the recurrent impact of not having formal statistics (Cross et al., 2010:6; Groenewald et al., 2023:5; Obioha, 2022:992). In the late 1990s, there were approximately three million people experiencing homelessness and in 2000 about eight million people living in informal housing, which is most likely reflective of the application of a broad definition of homelessness, the lack of homogeneity and the many pathways into homelessness (Makiwane et al., 2010:39; Olufemi, 2000:224). Homelessness in South Africa is often seen as either a housing or poverty problem and with many interventions set up to address these pathways, some individuals continue to fall through the cracks. Furthermore, there are continuous reports of significant success in social sectors with regards to the number and type of services available; however, it remains a challenging for people experiencing homelessness to access these routes (Cross et al., 2010:6). As mentioned previously, the COVID-19 pandemic revealed how neglected the homeless actually are and the dire need for policy intervention to address the issue at national level (De Beer & Vally, 2021b:314; Groenewald et al., 2023:10). The absence of a national policy framework guiding the resolution of homelessness is one of the foremost challenges in contemporary South Africa, with equally lacking, uncoordinated and limited action on provincial and municipal levels (Desmond et al., 2017:2). With the recent development of a Green Paper on Homelessness (2023), it became clear that the historic, one-size fits all approach needs to be addressed, reframed and differentiated to account for the diverse pathways and unique life courses of people experiencing homelessness (Groenewald et al., 2023:10). In conjunction with the impending need for a comprehensive policy response, there are several other challenges currently hindering the fight against homelessness.

Challenges related to counting, defining and contextualising homelessness

The dearth of local research and the lack of official statistics has led to several practical and ideological challenges related to the establishment of accurate population sizes, flexible working definitions, and the inability to fully understand and contextualise the problem (Cross et al., 2010:6; Groenewald et al., 2023:5; Obioha, 2022:992; Pophaim & Peacock, 2021:72; Pophaim, 2021:260; Sadiki & Steyn, 2021:60). At a domestic level, academic research on homelessness is limited, with scant and small-scaled research dominating the discourse and studies often focus on exploring similar factors across different locations and samples. Additionally, larger scale projects are few and far between, and as a result, it is usually not possible to keep up with the everchanging and fast paced nature of homelessness.

Consequently, the inability to contextualise homelessness means that a realistic baseline cannot be established, which has a negative impact on the feasibility of policies and interventions (De Beer & Vally, 2021a:3; Sadiki & Steyn, 2021:58). The lack of evidence usually leads to the creation of ill-informed and overly rigid policy documents. The use of these generic and static responses, which are not evidence-based, is usually what leads to the adoption of responses that are not contextually sensitive. This means that any intervention that stems from it will not be able to address the diverse needs of the homeless population (Desmond et al., 2017:3; The Presidency of the Republic of South Africa, 2020:3). The questionable status around the qualification of homelessness in South Africa is another significant challenge. With estimates being the dominant approach to identifying the extent of the problem for several years, no intervention can be accurately directed at a particular number of individuals in need of assistance. The tendency to overly quantify the problem has also led to the negligence of important individual factors that are often overlooked and omitted within the policy space. Both global and local population[2] data are considered to be an underestimation and remain widely contested as many experts believe that the accuracy needs to be tested due to the fact that conclusions for research on the homeless are usually based on assumptions because of their constant mobility (Awad, 2023:1; De Beer & Vally, 2021a:3; Tenai & Mbewu, 2020:2). The most common obstacles associated with counting people experiencing homelessness, are characterised by several definitional challenges and the fact that the homeless have been categorised as a 'hard-to-count' population (De Beer & Vally, 2021a:2-3; Pophaim & Peacock, 2021:80). Within these opaque parameters, the 2022 Census reported a combined 55 719

[2] Global and local population data (outlined in the problem statement and rationale section).

roofless and shelter-based populations (Stats SA, 2023), which can still be considered a significant underestimation, considering prior estimates, the fact that only roofless and shelter-based persons were counted, the dire socioeconomic condition and the sheer visibility of poverty and homelessness in South Africa.

Homelessness is often narrowly defined as an individual who does not have adequate shelter or access to services and basic needs (Obioha, 2022:990-991). Although it is a visible manifestation of being without a shelter, it defies singular conditions and is far more detrimental to the affected individual(s), which means that it cannot be sufficiently captured by simplistic extant definitions (De Beer & Vally, 2021a:2; Mahlangu & Kgadima, 2021:455; Tenai & Mbewu, 2020:1). Homelessness is a complex concept to define, with very little consistency and universality in both its understanding and its application across various contexts, regions and countries (Frazer & Kroll, 2022:1; Obioha, 2022:990). In the absence of a universally agreed upon definition, different governments and organisations use different understandings of homelessness which, by default, impact the level, type and quality of interventions, as well as who is eligible for support (Obioha, 2022:990). Due to the complexities associated with defining homelessness, the leading proposition is that a single definition of homelessness may be inappropriate, and a range of definitions may be needed to underpin interventions and policy development (Kriel, 2017:401; Tenai & Mbewu. 2020:2). In a similar vein, the socially constructed and static interpretation of an 'ideal' victim has resulted in insufficient attention and acknowledgement around the plight of the homeless victim. Christie (1986:17) coined and conceptualised the term in his early work, describing the notion of purity and innocence due to moral and ideological beliefs. Accordingly, those who fall within these parameters are considered more deserving of empathy and services (Pophaim & Peacock, 2021:80). By contrast, people experiencing homelessness are often excluded from this category. The exclusion is driven by prevailing misconceptions, fuelled by the neoliberalist notion of *responsibilisation,* which shifts social responsibility to the individual, perpetuates the idea that homelessness is a choice. It therefore reduces homelessness to an issue of personal mismanagement, implying that if an individual ends up homeless, it is due to their own resistance or inability to engage in behaviours that lead to productivity (Weng & Clark, 2018:82-83). This is further compounded by negative attitudes that commonly categorise people experiencing homelessness as 'dirty', criminal and 'bad for business' (Pophaim, 2021:261). The individual implication lies in the fact that people's experiences become invalidated, and their victimhood overlooked or dismissed. The broader implication is that

those who are not considered an 'ideal victim' face continued inequality and systemic exclusion in accessing justice, support and social protection. As a result, they remain excluded from important conversations concerning victim assistance, thereby hampering inclusion and the implementation of mainstream frameworks and the development of inclusive and protective responses (Pophaim & Peacock, 2021:69, 80; Scurfield et al. 2004:2).

Pathways into homelessness, risk factors and experiences of victimisation

Understanding the intricate interplay between the various pathways into homelessness is an essential part of the comprehensive contextualisation required for the development of targeted and feasible policies and interventions. As with many factors associated with the experience of homelessness, there is no single pathway into homelessness. Accordingly, every individual has a considerably different pathway or combination of pathways that shaped their trajectories toward the onset of homelessness (Desmond et al., 2017:1). Most pathway studies tend to be rather isolated and limited in scope, either focusing on individual risk factors, such as mental health or substance abuse, or structural risk factors, such as discrimination and the lack of affordable housing.

Few studies demonstrate the interaction and inextricable link between individual and structural factors or embed findings in a theoretical framework to enhance the understanding of pathways into homelessness (Piat, Polvere, Kirst, Voronka, Zabkiewicz, Plante, Isaak, Nolin, Nelson & Goering, 2015:2367). Several local reports highlight the common pathways associated with homelessness, which include unemployment, poverty, mental and physical health challenges, childhood adversity, family dysfunction and abuse, and other more structural and systemic factors such as apartheid capitalism, poorly implemented policies and housing insecurity (Moloi, 2025; Mthembu, Sibisi & Singh, 2025; Pophaim & Peacock, 2021; Stats SA, 2023; Tenai & Mbewu, 2020). An important take away from these studies is the importance of understanding how these factors shape the phenomenon of homelessness, not only as pathways, but also how it is expressed and experienced. The main reason for this is because people experiencing homelessness are at increased risk for victimisation, which may be due to their exposure to shared risk factors for both homelessness and victimisation, compounded by the dangerous contexts in which they often find themselves (Charlton & Rubin, 2021:41; Tong, Kaplan, Guzman, Ponath, Kushel, 2021:1). Often overlooked and central to the current study, understanding the nature and impact of victimisation is extremely important in identifying

measures to mitigate the effects it has on the well-being of the victim and the success of policy and intervention measures.

Internationally, it is well-established that people are extremely vulnerable to victimisation, as reports state that the homeless are 13 times more likely to experience violent crime and 47 times more likely to be a victim of theft (Scurfield et al., 2004:3). Additional research confirms this disparity as violent victimisation among the homeless was estimated to range between 14 and 21% in comparison to 2% of the general public (Meinbresse, Brinkley-Rubinstein, Grassette, Benson, Hall, Hamilton, Malott & Jenkins, 2014:123). Recognising the severity of the issue, international regions have coined the term *Aporophobic* victimisation, which refers to negative attitudes and feelings towards poverty and poor people. The presence of negative beliefs often result in the ill-treatment and victimisation of those who find themselves in precarious socioeconomic circumstances, such as the homeless, by association (García Domínguez & Vander Beken, 2024:649-650). In terms of its application, a study involving 261 people experiencing homelessness in four Spanish cities, revealed that 47.1% of the same had experienced *aporophobic* victimisation. Some jurisdictions in the United States of America have included the status of homelessness under their hate crime laws (Al-Hakim, 2015:1757; García Domínguez & Vander Beken, 2024:650), while other studies confirming homeless victimisation have yet to link it to the term *aporophobic* victimisation. The term *aporophobia* holds value in both criminology and criminal law, as it includes practices that contribute to the criminalisation of poverty and all other factors that contribute to the victimisation of impoverished and vulnerable populations (García Domínguez & Vander Beken, 2024:650). South African reports, albeit very few, limited and on a much smaller scale, show that there is a growing body of knowledge regarding the victimisation of people experiencing homelessness. In 2016, Sadiki reported on experiences among rural and urban homeless persons, revealing a 52.9% (n = 70) rate of victimisation. In 2019, Pophaim reported on the experiences of 17 homeless individuals, revealing that 13 participants (76.5%) experienced victimisation since becoming homeless. More recently, Mthembu (2023), among 17 homeless individuals found similar rates of extreme physical abuse and violence (58%), verbal harassment (29%), property theft and damage (24%) and sexual harassment (12%).

In addition, a comparison has also been drawn between local experiences and hate crime legislation (Pophaim, 2021); however, despite these alarming indicators, due to the acknowledgment, the response to the victimisation of the homeless remains slow and under-prioritised. As mentioned previously, it is important to consider the implications of

victimisation, as the existing literature confirms the implications it has for general victims, in terms of help-seeking behaviours and access to services. With this in mind and based on the nature of homelessness and their already marginal and weak connections to society, it becomes even more important to consider the potentially eroding effect victimisation can have on their dignity, willingness and ability to seek and access support (McCart et al., 2018:203-204; Mthembu et al., 2025: 4; Turner et al., 2018: 1).

Global and local directives to criminalise poverty and homelessness

With the current state of homelessness worldwide, many governments have entered into crisis management to alleviate the immense pressure and respond to the increase in the visibility of homelessness (Owadally & Grundy, 2023:178). With the lack of understanding at the forefront of these initiatives, the highly politicised matter is being addressed with several polarised plans of action. Accordingly, relevant stakeholders have opted to use a mixture of punitive and compassionate measures, with the dominant approach being more punitive and oppressive in nature as it has proven to be the most effective, due to the immediate results through the abrupt removal of people experiencing homelessness, without due consideration of their human rights, that are constantly violated during these interactions (Owadally & Grundy, 2023:178-179). A prominent driver behind the negligence of the plight of the homeless victim lies in the tendency to overemphasis the criminogenic qualities commonly associated with people experiencing homelessness. The criminalisation of poverty and homelessness has led to the exposure of a variety of punitive and oppressive practices, that further ostracise and perpetuate their vulnerability, marginality and social exclusion (Hopkins et al., 2024:12; Owadally & Grundy, 2023:178-179; Pophaim, 2021:262-263; Sadiki & Steyn, 2021:58). Through the implementation of these criminalising practices, people experiencing homelessness are often drastically restricted in their ability to move around freely and perform basic tasks such as sleeping, bathing and urinating. Furthermore, these restrictions impact their ability to avoid contact with potential offenders and, consequently, increase their engagement with law enforcement who are responsible for the implementation of municipal by-laws and evictions, further confirming that the homeless are unwelcome in most public spaces that are frequented by members of the housed or general population (Killander, 2019; Pophaim, 2021:273-274). Through criminalising practices – shrouded in undignified harassment, the application of by-laws, fines, arrests, repeated encampment evictions, destruction of structures and loss of property – the homeless are constantly reminded of the underlying negative perceptions about

them, which further increase the effects of discrimination and stigma, thereby significantly compromising their quality of life.

The criminalisation of homelessness works against the grain as it tends to ostracise and isolate the homeless, exacerbating their already constrained level of accessibility, pushing them further away from mainstream society and the viable networks of support outlined in policies and their subsequent interventions. With the adoption of oppressive and punitive practices, there is a grave loss of trust in support mechanisms, as people who experience homelessness often feel that they have less access to support due to fractured relationships with local government and service providers (Hopkins et al. 2024:12). Moreover, such practices often result in a considerable degree of isolation, which heightens their vulnerability to victimisation. On the other hand, compassionate responses, which refer to handouts and support, can be regarded as a way in which entitlement and dependency are facilitated. By knowing that these services are readily available, some individuals experiencing homelessness may fail to see the value of leaving the streets, which many of them have become accustomed to over the years, if their needs are catered to without having to commit to accessing pathways out of homelessness. Balancing the punitive and compassionate responses may lead to a heightened rate of institutionalisation, which comes with its fair share of challenges for both society and the person experiencing homelessness. Forcefully moving individuals into shelters and safe spaces before they are willing and ready to do so, and without a viable developmental strategy to keep them safe and off the street, is another aspect that needs to be reconsidered moving forward.

Perceptions of homelessness, interactions with stakeholders and the presence of systemic barriers

Driven by the mainstream perceptions, stereotypes generally portray people experiencing homelessness in a negative light, as they seem to be more likely to engage in crime, untrustworthy, a public nuisance, more likely to have troubled families, and are often seen as potentially dangerous and unpredictable (Weng & Clark, 2018:85). In addition, they are usually perceived as reluctant or unwilling to engage in interventions that lead to productivity. The presence of these negative perceptions and stereotypes tend to constrain service delivery and lead to unsavoury interactions between service providers and people experiencing homelessness (Mahlangu & Kgadima, 2021:461; Muleya & Mlilo, 2023:88; Weng & Clark, 2018:85; Wentzel & Voce, 2012:78). The existing literature highlights that people experiencing homelessness do face challenges to access adequate healthcare, and when they do, they might

be subjected to poor treatment and have an unpleasant experience (Wentzel & Voce, 2012:78). Similarly, reports exist around the verbal abuse by healthcare practitioners and the physical abuse by police officers who also confiscate their belongings (Pophaim, 2021:261-262; Tenai & Mbewu, 2020:2-3; Wentzel & Voce, 2012:78). Furthermore, homelessness is seen as a politically sensitive subject and how it is addressed depends on how it is interpreted, which means that the risk of stigma and stereotypically driven agendas remain a reality, resulting in ineffective or absent stakeholder responses.

After all, it is their level of comprehension that determines how they interpret policies, which is driven by their perceptions of homelessness and whether these perceptions align with the structure and directives of policy and intervention (Sadiki & Steyn, 2021:58). Policy and interventions tarnished by this dominant perception, tend to ignore larger systemic and social problems, by placing all the blame on the individual and ascribing elements of personal choice, failure and mismanagement to the experience. The individualistic orientation generally underpins public views of homelessness, which tends to reduce the level of empathy and increase the likelihood of victim-blaming. These negative responses often manifest in oppressive and punitive measures which diminish the support of public policies that seek to address the needs of marginalised groups (Turner et al., 2018:4; Weng & Clark, 2018:82). Within the context of addressing homelessness and the provision of services, there remains a large gap where government support is expected to be.

The government is consistently identified as one of the most absent stakeholders, with prominent issues related to their uncertainty regarding who the rightful custodian of homelessness is, the lack of funding and support, and the general lack of political will and determination to prioritise action against homelessness (Batchelor-Hunt, 2023; Beer & Vally, 2021:302, 308). The fact that homelessness exists and remains such a persistent social problem is indicative of a failing government. The case of *the Government of the Republic of South Africa v Grootboom 2001 1 SA 46 (CC)* highlights the Constitutional Court's position regarding the government's responsibility to the citizens of the country. The case outlines the harsh reality of the intolerable conditions many people are still living in, years after the democratic transformation. The court ruled that the government had failed to meet its constitutional obligations and further highlighted several provisions from the Constitution to indicate the conditions under which the citizens of the country are expected to live, by virtue of the government's promise to uphold the rights enshrined in the Constitution. The court carefully detailed the interpretation of the Constitution, by explaining that the obligation of the state was

not directed at individual entitlement but should facilitate the creation of a reasonably successful programme that will meet the needs of everyone over time. The case demonstrates that the government is obligated to implement policy and allocate resources that are reasonable and inclusive, to meet the urgent needs of the vulnerable and those in urgent need of assistance.

Despite the ruling made in this landmark case, the problematic nature around the fulfilment of the government's constitutional duties remains prevalent in contemporary society. Existing literature outlines that people experiencing homelessness endure gross human rights violations on a daily basis. With reference to the twenty-seven rights listed in the Bill of Rights, it is reported that the homeless only enjoy four; thirteen of these rights are infringed upon based on their socioeconomic circumstances, twelve due to government inaction, and eleven due to government action (Perrier, 2021:67).

International perspectives and the pursuit of inclusivity through localised initiatives

For comparative purposes, the Gypsy, Roma and Traveller population, who are the largest and most disadvantaged minority ethnic group in Europe (McFadden, Siebelt, Gavine, Atkin, Bell, Innes, Jones, Jackson, Haggi & MacGillvray, 2018:74), show substantial similarities to homeless populations and may be worthwhile to explore the proposed strategies to promote inclusivity and improved access to services. Based on the findings of a systematic review of the literature, similarities can be observed with regards to challenges in defining, identifying the target population, leading to constraints around determining true population sizes. Similar to homelessness, the Gypsy, Roma and Traveller populations experience considerably worse health outcomes, lower life expectancy, an increased burden of communicable diseases, morbidity from non-communicable diseases, increased rates of suicide, and poorer infant and child health (McFadden et al., 2018:74). In a similar vein, their general challenges and those associated with stigma significantly hamper access to healthcare services, adequate housing, poverty, restricted access to employment and low education and literacy levels (McFadden et al., 2018:74). With the considerable overlap, the present study also provides considerations regarding the facilitation of inclusivity and access to services, which could be useful for the development of the victim inclusive policy framework. The following list includes the most applicable principles that could prove useful for the development of the victim inclusive policy framework: (1) Outreach, (2) dedicated services, (3) raising health awareness, (4) cultural awareness, and (5) collaborative working (which has already been extensively highlighted as a priority in homelessness research) (McFadden et al., 2018: 79).

Advocacy for the creation of inclusive communities generally strives to protect the rights of all vulnerable populations, including the homeless (De Beer & Vally, 2021b:311). Homelessness often manifests in varying degrees of marginalisation and the blockage of basic human rights. Frequently marked as undesirable, people experiencing homelessness often endure levels of stigmatisation that exclude them from institutions and services that ought to provide support (Mahlangu & Kgadima, 2021:455). In order to create environments characterised by humanity and equality, any structure or barrier that prevents access to quality services, should be addressed accordingly (Powel et al., 2021:250). Inclusive communities entail the deliberate creation of infrastructure and services that facilitate access to mainstream networks of support. It aims to encourage the commitment of every institution and stakeholder to acknowledge the homeless as a vulnerable group, prioritising their integration on institutional agendas and budgets (De Beer & Vally, 2021b, 305, 311). The venture presents an ideal opportunity to infuse the popular African doctrines and philosophies of *Ubuntu* and *Batho Pele* in order to re-inscribe and restore the human element into responses to homelessness, by adopting the spirit of a caring community characterised by harmony, hospitality, respect and responsiveness. Furthermore, the transformation of service delivery to the homeless should reflect the eight principles of consultation, service standards, access, courtesy, information, openness and transparency, redress and value for money (Mahlangu & Kgadima, 2021:455-456; White Paper on Transforming Public Service Delivery (*Batho Pele*), 1997). Through the exploration of the adoption of these localised principles, the current study aims to identify and provide valuable policy recommendations to avoid the creation of new competing frameworks or the duplication of resources and dependencies (De Beer & Vally, 2021b:312). Instead, the desired outcome would be to integrate and strengthen existing responses for the promotion of universal inclusivity, protection and accessibility within the homelessness domain.

Policy environment and regulatory frameworks

As evidenced by Figure 1, the policy environment and regulatory framework in which homelessness and its associated experiences can be placed is extremely vast, ranging from human rights imperatives, social assistance, overall health, domestic violence, social housing, equality and anti-discrimination, criminal provisions, and the more silent victim rights frameworks. As a UN member state, South Africa is legally obligated to consult, integrate and uphold the overarching framework around social justice, encompassing human rights and the SDGs. The Constitution of the Republic of South Africa (1996) stipulates that people's needs must be responded to and that the public must be encouraged to participate in policymaking.

In order to address these challenges, the South African government has policy levers at its disposal to promote the creation of employment opportunities and improve the socio-economic conditions of citizens (The Presidency of the Republic of South Africa, 2020:4). As part of the scoping review outlined in the research methods section, it became evident that the UN imperatives do act as benchmarks in the formulation of local policies. Within the context of the current evaluation, it is important to note that homelessness, for the most part, remains 'policy adjacent', which means that most of these frameworks, while addressing related issues, do not explicitly mention or aim to address homelessness. The shortfall could be problematic for member states that are expected to remain compliant with international standards and obligations.

For example, the Universal Declaration of Human Rights (UDHR) (1948) consists of several articles which address conditions related to homelessness. Based on a review of the provisions set out in these articles, homelessness presents as a direct contravention of the minimum standards as outlined in one of the most fundamental global frameworks. A few pertinent and notable citations are warranted:

Table 1: UDHR provisions relevant to homelessness and victimisation

Article	Rights outlined in the UDHR
1	"…a*ll human beings are born free and equal in dignity and rights*".
2	"…e*veryone is entitled to all the rights and freedoms set forth in this declaration, without any distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status*".
3	"…everyone *has the right to life, liberty and the security of a person*"
5	"…*no one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishmen*t"
6	"…e*veryone has the right to recognition everywhere as a person before the law*".
12	"…n*o one shall be subjected to arbitrary interference with his privacy, family or home*"
17(1&2)	*"…everyone has the right to own property alone as well as in association with others and no one shall be arbitrarily deprived of his property".*
21(2)	*"…everyone has the right of equal access to public service in his (or her) country".*
22	"…e*veryone as a member of society, has the right to social security and is entitled to realisation, through national effort and international cooperation…*"
25(1)	"…e*veryone has the right to a standard of living adequate for the health and well-being of him or herself and of his or her family, including food, clothing, housing and medical care and necessary social services and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control*".
26	"…e*veryone has the right to education…*"

30	*"...nothing in this Declaration may be interpreted as implying for any State, group or person any right to engage in any activity or to perform any act aimed at the destruction of any of the rights and freedoms set forth herein".*

Emanating from the UDHR, the next group of UN imperatives in Figure 1 seeks to give instruction to member states regarding the establishment of specific laws and policies that combat issues that obstruct the rights outlined in the Declaration. Based on the perusal of the imperatives and their respective websites, it appears as though the UN prioritises promoting the adoption and creation of strategies that address homelessness rather indirectly. Although there is some mention of the UN's commitment to eradicate homelessness by 2030, most of the imperatives identified in Figure 1 do not explicitly mention homelessness. For example, the United Nations Commission for Social Development (CSocD) is a functional commission within the United Nations Economic and Social Council (ECOSOC). Its' main responsibility is to provide advice to the UN on social development issues and plays a vital role in promoting social policies that support the overall development goals of the UN. Its role is particularly evident in relation to eradicating poverty, advancing social integration, and ensuring full employment and decent work for everyone. Although it lists a variety of items under its 'issues', it does not directly address homelessness. The International Covenant on Economic, Social and Cultural Rights (ICESCR) also covers a variety of related issues but does not deal with homelessness specifically; instead, it is categorised under the land and housing topic. As with the preceding imperatives, the SDGs seek to eliminate interrelated components of homelessness, such as poverty, hunger and a host of other social issues, but failed to explicitly include homelessness as a separate matter, under one of the 17 SDGs (Casey & Stazen, 2021:63). The UN Rapporteur on Adequate Housing Reports is one of the few imperatives that explicitly mention homelessness and how it presents as a contradiction to a large majority of the articles listed in the UDHR. Based on the current status of homelessness across the world, from a critical standpoint, these fundamental imperatives should be adapted to assume a more direct approach, which aims to reduce and improve conditions of those who are currently experiencing homelessness, directing them toward sustainable and longer-term pathways out of homelessness. Once this has been achieved, the focus can be shifted towards the causal factors to prioritise early detection and prevention.

Based on the existing literature, the countries listed in Figure 1 are regarded as those who are doing the most or best in addressing homelessness. The review reaffirmed that homelessness is indeed context bound and that policies need to be created to be contextually sensitive for it

to have any real impact (De Beer & Vally, 2021a:12; Desmond et al., 2017:3). The examples used for the current discussion include the European Convention on Human Rights, which also establishes important articles for consideration. While mentioning that everyone has the right to respect for his private and family life, his home and his correspondence in one of its articles, it does not explicitly address homelessness either. The general adoption of the "Housing first" approach, is an ideology that proposes that the best way to eradicate homelessness is to provide homes to people experiencing homelessness. People who receive assistance are not required to seek employment first, get sober, or make any lifestyle changes. Housing is the first step to recovery, based on the notion that once people have permanent housing, they will be able to seek the help they require to improve their lives (GreaterChange, 2022). Japan and Finland have been identified as two of the most successful regions to address homelessness, both of which adopted the "Housing first" policy, but interestingly, they have two opposite approaches.

Finland highlights government commitment and support and the conviction that housing is a human right and that homelessness is an urgent and immediate issue that requires rapid and consistent efforts. Whereas Japan, has taken a more punitive approach by implementing laws making begging a criminal offence and introduced urban architecture to prevent the homeless from sleeping on the streets. People experiencing homelessness in Japan are also subjected to social prejudice, maintaining that the causes of one's homelessness is one's own responsibility. Interestingly, the invisibility of homelessness in Japan is attributed to their culture of social etiquette, which has led the homeless to try and remain out of sight due to shame and they often try to find temporary housing off the streets in areas that are less visible. In addition, there are organisations that support the reduction of homelessness by providing housing and employment, as well as increasing shelters, social, and support services to help transition into independence (GreaterChange, 2022). Given the context bound nature of homelessness (De Beer & Vally, 2021a:12), it is evident that the adoption of similar strategies would not be successful in South Africa, as the regions mentioned above have experienced success by mobilising resources and support that the country does not have access to. Thereby confirming that, innovative, localised approaches, that are contextually sensitive, need to be developed. Currently, most cities in South Africa have predominantly adopted punitive approaches to address homelessness, including forced evictions and the inconsistent application of by-laws. Concerningly, most local cities lack the crucial governmental support, identified in the Finnish and Japanese contexts, which is often required to adopt more sustainable approaches. In addition, and exacerbating the situation, South African cities remain confronted by the unequal

distribution of resources, a fluctuating unemployment rate, a nationwide housing shortage, high levels of corruption and poorly implemented policies (De Beer & Vally, 2021a:5; De Beer & Vally, 2021b:301-302; McKeever, 2024:1; Marutlulle, 2021; Tenai & Mbewu, 2020:3; Trading Economics, 2024), making it that much harder to yield feasible outcomes.

With regards to the African Charter on Human and People's Rights, the document adopts a similar and repetitive structure to that of the UDHR and the European convention, demonstrating that there is a level of coherence, which is not necessarily a positive aspect as it also failed to explicitly mention homelessness as a violation of human and people's rights on the continent. In terms of the broader frameworks, the Constitution of the Republic of South Africa (1996), is the landmark framework of the country, from which all other frameworks flow, yet it does not make explicit mention of homelessness. The implied and indirect references to homelessness from the preceding sections remain problematic, as the inadvertent silence manifests as a significant shortcoming, as many of the frameworks that are informed by these benchmarks are developed by individuals who are expected to interpret and decide what should be prioritised, included and omitted based on international obligations and trends.

As mentioned previously and more pertinently in Part 4, negative perceptions, stereotypes and stigma tend to have an adverse impact on the way this politically sensitive subject is interpreted and ultimately addressed (Sadiki & Steyn, 2021:58). From the critical discussion presented in this section, it becomes evident that the issues experienced in the South African context could potentially be as a result of the global trend to indirectly and silently address homelessness, while contradictorily referring to it as one of the world's major social crises without making explicit provision for its resolution in global guidelines and frameworks. The major challenge is to address South Africa's continued reliance on welfare orientated, uncritical, and poorly implemented frameworks – that aim to support people experiencing homelessness – yet inadvertently perpetuate the serious human rights violations through punitive approaches, while consistently overlooking victim and human rights-based alternatives (De Beer, 2021:144; Muleya & Mlilo, 2023:107-108; Naidoo, 2010:132-133; Pophaim & Peacock, 2021:82). A major take away from this discussion is that in the abundance of policies and regulatory frameworks, there is a considerable lack of synergy which essentially hinders collaboration due to the indirect, generic and repetitive nature of a large majority of the imperatives identified in figure 1, these severe shortcomings are most observable at a grassroots level with reference to the ineffective stakeholder interpretation and response, as well as the beneficiary experience.

Universal Declaration of Human Rights (UDHR), 1948					
United Nations Frameworks on discrimination and human rights	United Nations General Assembly, Resolution (2020)	Sustainable Development Goals (SDGs), 2030 Agenda	United Nations Commission for Social Development (CSocD)	United Nations Rapporteur on Adequate Housing Reports	International Covenant on Economic, Social and Cultural Rights (ICESCR), 1966.
International frameworks					
Europe	United Kingdom (UK)	Japan	Australia and New Zealand	Canda	United States of America (USA)
European Convention on Human Rights					**Protection under hate crime laws**
“Housing first”					
African Charter on Human and People’s Rights					
The Constitution of the Republic of South Africa (1996)					
No national homelessness policy framework					

National Action Plan	The development of a Green Paper on Homelessness	National Framework for Policy Development (2020)	
Punitive/oppressive laws	**Indirect framework coverage**	**Victim orientated frameworks**	**Direct responses**
Criminal Procedure Act 51 of 1977	Social frameworks	Service charter for victims of crime in South Africa	The Gauteng City Region Strategy on Adult Street Homelessness (2021 – 2024),
Municipal by-laws	Economic frameworks	Promotion of Equality and Prevention of Unfair Discrimination Act 4 of 2000	The City of Johannesburg Policy on Homelessness (2024)
	Housing frameworks	Prevention and Combatting of Hate Crimes and Hate Speech Act 16 of 2023	The Street Homelessness Policy for the City of Tshwane (2015)
	Health related frameworks		The City of Cape Town's Street People Policy (2013)
Stakeholder interpretation and response			The Stellenbosch Municipality Draft Street People Policy (2018)
The beneficiary experience			The City of Cape Town Draft Strategy to address Rough Sleeping (2024).

(Figure 1: Policy environment sketch)[3]

[3] The candidate acknowledges that this is not an exhaustive list of policy and regulatory considerations; the sketch serves to illustrate the vastness of the regulatory considerations related to homelessness and how underutilised or absent they are.

Theoretical framework

Based on the preceding exposition of the existing literature, it is evident that homelessness is a complex and multifaceted phenomenon, and as a result, requires an integrated and multivariate theoretical lens to facilitate a more comprehensive and nuanced understanding of homelessness and its' related elements.

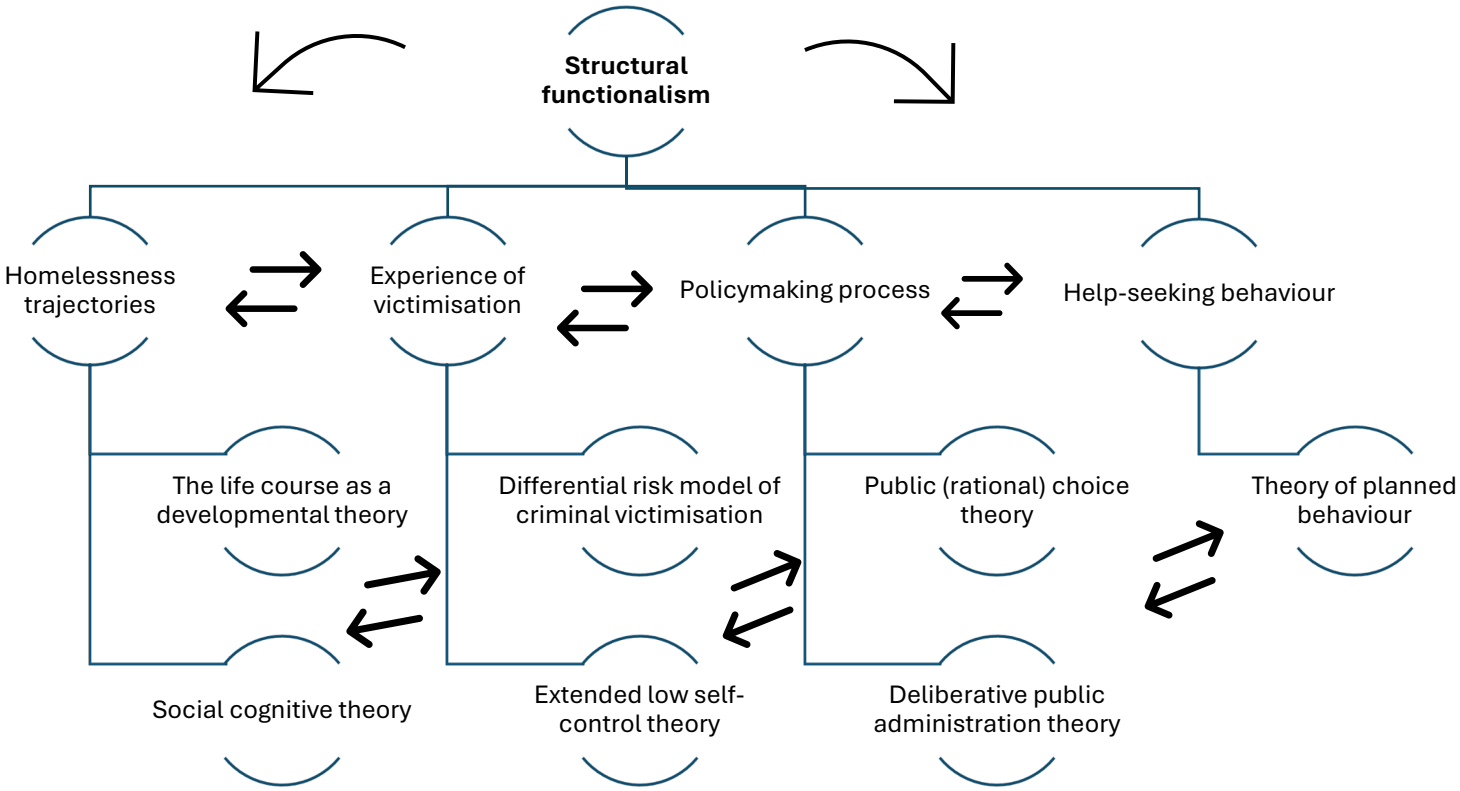

Figure 2: Integrated theoretical model on homelessness trajectories, policy development, victimisation and help-seeking behaviour.

As illustrated in Figure 2, theoretical frameworks often function as standalone explanations; however, it is useful to acknowledge and capitalise on the inherent integrative value to provide a comprehensive understanding of a particularly complex phenomenon such as homelessness. Structural functionalism serves as an overarching theoretical framework to explain how systemic dysfunctions impede the delivery of services to people experiencing homelessness. Following the broader theoretical overview, the section draws on specific micro-level theories to explain individualised dimensions of homelessness. The **life course as a developmental theory** explains the onset of homelessness, the **social cognitive theory** captures the complex

interplay of personal factors, behaviours and environmental influences as individuals navigate life experiencing homelessness. As part of the experience, the homeless are known to experience varying degrees of victimisation at disproportionate rates (Ellsworth, 2019:96, Pophaim, 2021:262; Sadiki & Steyn, 2021:59). Accordingly, the **differential risk model of criminal victimisation** and the **extended low self-control theory** are employed to explain experiences of victimisation. To outline the policymaking process to address homelessness and its related issues, the **public (rational) choice theory** and the **deliberative public administration theory** are employed to explain the decision-making process and value of inclusive, well-reasoned and responsive policies. Lastly, people experiencing homelessness are extraordinarily marginalised and often have weak connections to society and its support structures (Turner et al., 2018:1). As a result, the **theory of planned behaviour** (TPB) is employed to assist in understanding the patterns of help-seeking behaviour in the context of systemic and structural barriers, to facilitate the creation of inclusive and accessible services.

The **life course as a developmental theory**, considers social change, life pathways and individual development as modes of behavioural continuity and change. These pathways refer to social trajectories of education, work and family that are experienced by individuals and groups in society (Elder Jr, 1998: 1). Past experiences shape the social trajectories of family, education and work, and they in turn influence behaviour and particular lines of development. Some individuals are able to select the paths they follow, a phenomenon known as human agency, but these choices are not made in a social vacuum. All life choices are contingent on the opportunities and constrains of social structure and culture (Elder Jr, 1998: 2). The **life course as a developmental theory** demonstrates how the lack of opportunities may or may not influence the choices we make and how these outcomes could potentially interact and manifest as pathways into homelessness and risk factors for other negative outcomes such as substance abuse or victimisation. Here, one can see that homelessness cannot and should not always be regarded as personal choice or due to personal mismanagement (Weng & Clark, 2018: 82). As much as we have agency, decisions are never made in isolation and it is therefore worthwhile to explore the development of our life course within the context of the **social cognitive theory**, in which Bandura (1977) explains the notion of **reciprocal determinism**. The theory explains how an individual's behaviour, personal factors and their environment all influence one another in a continuous cycle, which shows that individuals are not only shaped by their environment but also impact their surroundings through actions and attitudes (Bandura, 1989:1182) (Figure 3).

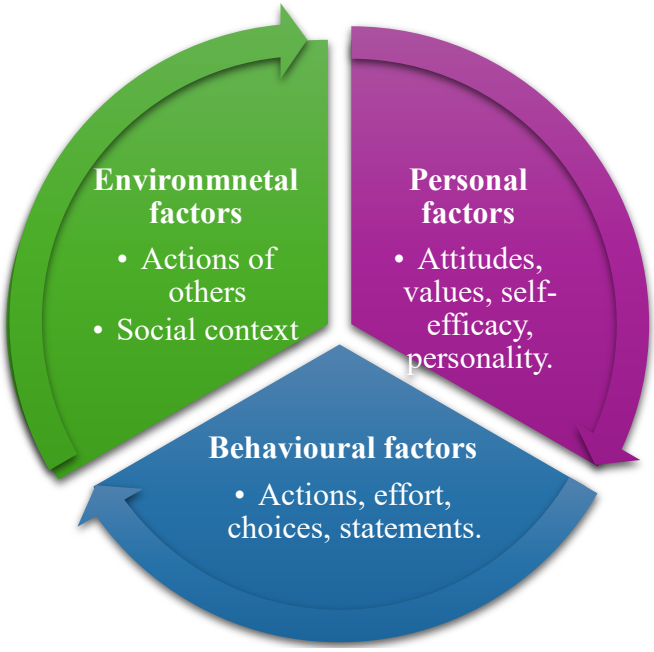

Figure 3: Reciprocal determinism (Adapted from Bandura (1977) cited in Drew (2023)).

Bandura (1989:1182) explains that *"the notion of human agency raises the fundamental issue of its' relation to determinism. The term determinism is used here to mean the production of effects by events, rather than in the doctrinal sense that actions are completely determined by a prior sequence of causes independent of the individual. When viewed from the perspective of the social cognitive theory, there is no incompatibility between human agency and determinism. Freedom is not conceived negatively as the absence of external coercion or constraints. Rather, it is defined positively as the exercise of self-influence".*

Homelessness is often treated as an 'either-or' occurrence, while failing to grasp the importance of understanding and addressing it as a negative outcome, that often occurs due to the interaction of several factors. Reciprocal determinism in the context of homelessness is shown when individuals with positive self-influence and belief in their ability to escape through pathways out engage more with service providers, receiving constant support and encouragement from service providers that helps improve their environment. In contrast, the individual with a negative self-influence, shaped by adversity, with no belief in their ability to escape homelessness, may be perceived as resistant, leading to poor treatment and further isolation from support structure. Therefore, understanding the interplay of these factors could prove useful in the service sector. As timeous interventions could manage the environment,

behaviours and allow the individual to develop a stronger self-influence, which could lead them to engage in reflective thought, to generate novel ideas and innovative actions and transcend their past experiences (Bandura, 1989:1182). With reference to the policymaking process, addressing the issue of homelessness, in an ideal world, would require the implementation of comprehensive policies, which guide targeted interventions. The **public (rational) choice theory** provides a basis for the manner in which the policymaking process ought to be prioritised. The notion of rationality posits that the reason certain societal issues are acted on, is because it is the most beneficial thing to do. In this sense, rationality means that humans are self-interested beings and will choose the course of action that maximises benefit for them (Hill & Varone, 2017: 55; Hoefer, 2021:233). The focus for anyone using a rational approach is constructing goals and seeking the most efficient means of achieving those goals. The key element is the assumption that behaviour is based on a system of values that is stable and consistent as well as believing that the actor has enough information to make accurate choices to maximise one's goals (Hill & Varone, 2017:55). To be rational actors then, means that decision makers try to efficiently maximise gains and minimise losses as they consistently support their primary values, having all the time and resources desired. With reference to homelessness, based on the foregoing presentation of the existing literature, the resolution of homelessness is often under prioritised and is not rationally considered to be in the best interests of society, from the perspective of the relevant decision makers, as the literature often portrays it as an overlooked, neglected and unwelcomed cost (De Beer & Vally, 2021b:301; Hoefer, 2021:233). This has led to the application of the rational actor to be heavily criticised, as it is considered too unrealistic as decision makers never have unlimited time, resources or capacity to search for an objectively true best option.

The problem of not being able to collect all the information needed to make a fully rational decision was addressed by developing the idea of bounded rationality. The idea of bounded rationality relaxes the need for complete information, acknowledging that humans often work with limited knowledge when solving problems, and often experience three areas of limitations. The first problem area is in cases where problems are highly complex, and thus there may be no way to fully achieve the goal of resolving it. Secondly, humans have limited intellectual capacity for processing and understanding the proposed solutions. Finally, time constraints prevent us from using as much time to understand the complex components as is required, if that desired level of understanding is even possible (Hoefer, 2021:234). Within the constrained homelessness policy space, **the deliberative public administration theory** explains the

scepticism about the problem-solving skills of the state and advocates for the shifting away of as many decision-making powers, from central bureaucracies as possible, and instead redirect the process to policymaking fora in which citizens, and more specifically beneficiaries can participate (directly or more frequently) through their representatives. The rationale behind the establishment of the proposed fora is to ensure that participants share not only insight into the problems they themselves face but that they also offer solutions (De Beer, 2020:5). The notion presented here is reflective that if solving a social issue is not in the best interests of decision-makers, rationally speaking, it will most likely never be prioritised, which provides further justification for the collaborative nature of measures required to address homelessness.

Central to the second objective of the study, the victimisation of people experiencing homelessness, as mentioned previously can be demonstrated through a variety of theoretical frameworks. To reiterate, the existing literature highlights that to be homeless is generally characterised by living in constant fear of victimisation. As a joint function of their lifestyles and excessive exposure, the experience is fraught with risks which lead to disproportionate rates and varying types of victimisation (Ellsworth, 2019:96, Pophaim, 2021:262; Sadiki & Steyn, 2021:59). From an integrative perspective, the **differential risk model of criminal victimisation** (1991), outlines ten categories which can be used to explain the occurrence of victimisation among people experiencing victimisation (Fattah, 1991:341-346). The following table demonstrates its application:

Table 2: The differential risk model of criminal victimisation and homeless victimisation

Theoretical factor(s)	**Application of factor(s)**[4]
Opportunity	Due to the lack of shelter and guardianship, perpetrators usually have ample opportunity to victimise people experiencing homelessness.
Risk factors	The shared risk factors for homelessness and victimisation compounded by the constantly dangerous contexts they find themselves in often lead to an increased vulnerability to victimisation. The risk factors for victimisation are often shaped by and insect with an individual's age, gender, race, presence of substance abuse, alcohol consumption, criminal history and previous victimisation experiences.

[4] Derived from the cited work in the literature review section.

Motivated offenders	Begging and carrying most of their belongings with them, might motivate victimisation (due to the perceived material gain). People experiencing homelessness are also easily exploited to a range and combination of factors such as their lifestyle, position in society and forced dependency.
Exposure	Similar to opportunities, having to roam the streets and having to constantly be around potentially dangerous people in dangerous contexts.
Associations	People experiencing homelessness are often in close proximity to gangsters and other criminals due to the shared environments, this element includes their proximity and association with potentially dangerous people due to their alcohol and drug addictions.
Dangerous times and places	People experiencing homelessness are often relegated to certain parts of the city and have nowhere else to go; therefore, their lives are essentially characterised by dangerous times and places. These factors are perpetrated and exacerbated by the inconsistent application of by-laws and evictions.
Dangerous behaviours and high-risk activities	These two elements are quite similar, based on their need to survive on the streets, the homeless often engage in high-risk 'survival activities', which range from begging, drug dealing to sex work.
Defensive/Avoidance behaviour	While some individuals adopt defensive mechanisms to avoid victimisation, many do not. Largely due to the lack of shelter and inability to go someplace safe, people experiencing homelessness remain vulnerable and prone to victimisation. Others are unable to assess dangerous situations to implement defensive/avoidance strategies due to developmental/cognitive or drug/alcohol related challenges.
Structural/Cultural proneness	Given their marginality and vulnerability, people experiencing homelessness suffer multiple deprivations and are virtually powerless. Moreover, on the basis of their inherent characteristics they are constantly confronted with challenges related to stacked stigma, discrimination and prejudice motivated victimisation.

From a micro-level perspective, the **extended low self-control theory** by Schreck (1999), found that individuals with low self-control were at greater risk of victimisation (Schreck, 1999:634). The following table, considering the six elements put forward by Schreck (1999:635-636), demonstrates its application.

Table 3: Extended low self-control theory and homeless victimisation

Theoretical factor(s)	**Application of factor(s)**[5]
Degree of future orientation	Due to their vulnerability and at times desperation, the homeless are often overly impulsive and sometimes do not have the time or capacity to consider any of the consequences for their actions, which could lead to their involvement in rather dangerous and precarious situations in the pursuit of survival.
Empathy	Isolation which can be associated with their marginality and to an extent their own distancing from society due to stigma and shame, leading to the lack of personal relationships, which could impact the level of guardianship. Furthermore, the lack of human contact could also impact their level of empathy, which results in the inability to evaluate the intentions of the next person, placing an increased risk on the possibility of victimisation.
Tolerance for frustration	Desperation and the inability to access essential services and basic needs could lead to frustration and the overly aggressive strategies or a sense of impatience and entitlement in order to secure money or food. One should also note the influence of substances and alcohol with regards to tolerance levels which could lead to excessive altercations and consequently victimisation.
Diligence	People experiencing homelessness could feel that it is of no use to practice safety precautions due to the nature of the street. This could be one element, or it could simply be impossible to diligently take special precautions due to the nature of life on the street.
Preference for mental rather than physical activity	The nature of homelessness may also result in an inability to adequately assess a situation; therefore, the contentious influence of preference may not have bearing in most contexts due to the natural

[5] Derived from the cited work in the literature review section.

	inclination to be reactive in situations that require one to protect oneself.
Risk avoidance	By virtue of their lifestyle and the activities people experiencing homelessness often engage in, with the added influence of low-self-control, can be expected to experience higher rates of victimisation, again due to exposure and the inability to avoid certain people and situations.

Due to the nature and range of challenges that confront people experiencing homelessness, such as dealing with substance abuse and poor health, the need to access and engage with stakeholders and service providers at various levels appears to be inevitable (Heese, Renkin, van den Berg & Hugo, 2021:164; Wentzel & Voce, 2012:77). As alluded to previously, understanding the patterns of help-seeking is essential, especially in the context of homelessness, victimisation and limited-service delivery and access. There are many factors that influence help-seeking, including stigma, attitudes, knowledge, financial resources, perceived need and structural barriers. The **theory of planned behaviour (TPB)**, which is an extension of Ajzen and Fishbein's theory of reasoned action (TRA) suggests that people make conscious decisions to act, based on attitudes and subjective norms (Adams, Gringart & Strobel, 2022:2). In the context of homelessness, victimisation and the creation of inclusive and accessible policy and intervention requires one to remain cognisant of these barriers that could hinder help-seeking behaviours and ensure that the gap is catered for in the provision of essential services and long-term, sustainable pathways out of homelessness.

Lastly, as a concluding theoretical insight, at present, the South African homelessness sector can be viewed as a 'broken system', due to the fact there is absent and poorly implemented policies, which has led to the lack of collaboration and the use of uncoordinated and uncritical interventions to address homelessness (De Beer & Vally, 2021b: 302; Milton, 2007). Advocacy for the creation of inclusive communities strives to protect the rights of all vulnerable populations, including the homeless, which entails the deliberate creation of infrastructure and services that facilitate access to mainstream networks of support (De Beer & Vally, 2021b, 305, 311). **Structural functionalism** provides a systemic explanation for the study of human societies, which means that it views society as an organised system of interrelated parts or structures such as institutions or communities. The system of institutions works together to form the society as a whole. Furthermore, all of these parts must work efficiently and

effectively so that society remains stable (Milton, 2007). Parson's placed emphasis on shared values and norms in response to the foundational question of societal survival (Kingsbury & Scanzoni, 1993:197). Therefore, for a system to function efficiently, a collaborative, multisectoral and transdisciplinary response is required, which essentially means that a system, made up of all the relevant stakeholders, is required to act as 'functioning parts', to maximise inclusive and successful interventions to address homelessness.

Research methods

The detailed discussions of the research methods used in the current study are provided in Parts 2, 3 and 4 of the thesis. The following section, therefore, serves as a summary of the motivations behind the respective methodological decisions.

Paradigm and approach

The study is grounded in the pragmatic paradigm, which embraces the plurality of methods and is often associated with mixed or multi-method approaches and is premised on the notion that the researcher should use the philosophical and methodological approaches that work best for the particular research problem. Furthermore, it facilitates the detection of a socially situated problem and the formulation of adequate action to address the problem (Kaushik & Walsh, 2019:3, 8). The pragmatic paradigm links well with advocacy and social justice. Pragmatists have a deep sense of justice and are deeply aware of the suffering of people and the need to build just institutions. In pursuit of a tolerant and non-discriminatory culture that regards all people with equal concern and respect, the researcher to grapple with analysing contemporary social issues and engage with themes of social inequality, power and politics. This seemed like the logical paradigm to work with (Kaushik & Walsh, 2019:11), given that the focus of the study the reframing of policies to more effectively respond to the lived realities and systemic barriers people experiencing homelessness, with the aim of informing the development of inclusive and accessible frameworks, infrastructure and services.

Due to the novelty of the study, a mixed-method approach was used comprising three phases which generated both quantitative and qualitative data. The purpose of mixing or integrating methodologies to effectively examine complex systems is facilitated to gain a better understanding of the research problem, by generating both generalisable broad and in-depth localised findings (Degotardi, Waniganayake, Bull, Wong, Dahm, Hadley, Harrison, Sadow, Amin, Donovan, Tran & Zurynski, 2022:249; du Plessis & Majam, 2010:456; Ivankova, Creswell & Stick, 2006:3). The justification for the integration of different data types, is that

neither quantitative nor qualitative methods – alone – would be sufficient to capture the complex trends and dynamics of local policy responses, patterns of victimisation, service needs and systemic barriers often encountered by people experiencing homelessness. When used in combination, the integrative approach allows for a more robust analysis, taking advantage of the strengths of each method (Ivankova et al., 2006:3). Finally, the mixed-method approach enables researchers to compare, triangulate and integrate research findings across different data sources and contexts, thus adding both conceptual validity and contextual depth to the new understandings generated by the research (Degotardi et al., 2022:249). A brief summary of the data generation in each phase is provided below.

Phase 1: The policy analysis

Building on the policy environment and regulatory framework discussion, the first phase of the study was initiated through a scoping review of international and local policy and legislation frameworks. The frameworks were reviewed based on their indirect or direct association with the resolution of homelessness and its related conditions. The preliminary review served as a means to determine which frameworks should be included in the policy analysis phase. After confirming that homelessness is indeed context bound (De Beer & Vally, 2021a:12) and that the international policies and frameworks adopted strategies and mobilised resources that would not necessarily be available in South Africa or applicable to the local homelessness population. The local frameworks that indirectly address homelessness were perused and were found to be too indirect for the purpose of the current study. In some cases, the framework was completely silent, while others mentioned homelessness without thorough consideration of the potential implications related to the issue being addressed, as was the case with the Revised White Paper on Families (discussed in Part 4). The preliminary review exposed the implications of the absent national homelessness policy framework, revealing that many provinces and cities did not have dedicated policies in place. Moreover, the appraisal revealed that the current statutory responses to homelessness were generally inadequate to address the complexity of the phenomenon, while suggesting that other national legislation such as the Constitution of the Republic of South Africa (1996) or the Social Assistance Act (13 of 2004) amongst others, while not addressing homelessness directly, could be used to respond to the overlapping conditions or associated circumstances (Naidoo, 2010:132-133). Consequently, the lack of specificity and poor implementation would most likely lead to the inability to meet the diverse needs of people experiencing homelessness, to the degree required for it to be considered a meaningful and sustainable intervention (Pophaim & Peacock, 2021: 82). Upon

further review and in the absence of a national policy on homelessness, the researcher decided to conduct an analysis focusing on the approved and draft provincial and municipal (direct) responses to homelessness. These policies included regulatory considerations, implying that they had been developed to reflect the ideals of international and national imperatives linked to homelessness. Although the final sample only included six policies, the findings from the analysis – in conjunction with the exposition on the policy environment and regulatory frameworks – serves to achieve complete fulfilment of the first aim of the study. The six local policies selected include the Gauteng City Region Strategy on Adult Street Homelessness (2021–2024), the City of Johannesburg Policy on Homelessness (2024), the Street Homelessness Policy for the City of Tshwane (2015), the City of Cape Town's Street People Policy (2013), the Stellenbosch Municipality Draft Street People Policy (2018) and the recently approved (and intended replacement for the 2013 policy), the City of Cape Town Draft Strategy to address Rough Sleeping (2024)[6].

Once the final set of policies were selected, document analysis was used to evaluate the content of the approved and drafted local responses to homelessness. The systematic review and evaluation of the documents, guided by an analytical qualitative framework, allowed for the examination and interpretation of the documents to elicit meaning and gain a better understanding and develop empirical knowledge concerning the current local policy responses to homelessness (Bowen, 2009:27). All of the documents included in the analysis, were freely available in the public domain, therefore gatekeepers' permission and copyright laws were of no concern and the quality of the documents were verified using four criteria: authenticity, credibility, representativeness and meaning (Birkan Özkan, 2023:832; Oriakhogba, 2023:517) To ensure authenticity, only official government (provincial and municipal level) documents were included. For credibility, documents were retrieved from official websites and cross referenced with news and academic articles to ensure their validity. With the limited number of local policies, representativeness is rather restricted, which is why all available documents were included in the analysis. All of the documents selected were easy to interpret and obtain the required meaning for the purpose of the analysis phase.

[6] Acknowledgement regarding the dynamic nature of the homelessness policy space is noted. Amidst the development of the Green Paper on Homelessness, the selected documents were analysed in its current form and the analysis therefore has no bearing on future/updated versions.

Data analysis

The content of each of the selected policy documents were mapped out and categorised into eight broad themes based on likeness and the relevance to the formulated themes (Bowen, 2009: 28). Once the themes were established and the content mapped out, the main findings were critiqued and aligned with the four elements (depicted in Figure 2) of the Health Policy Triangle (HPT) framework developed by Walt and Gilson (1994).

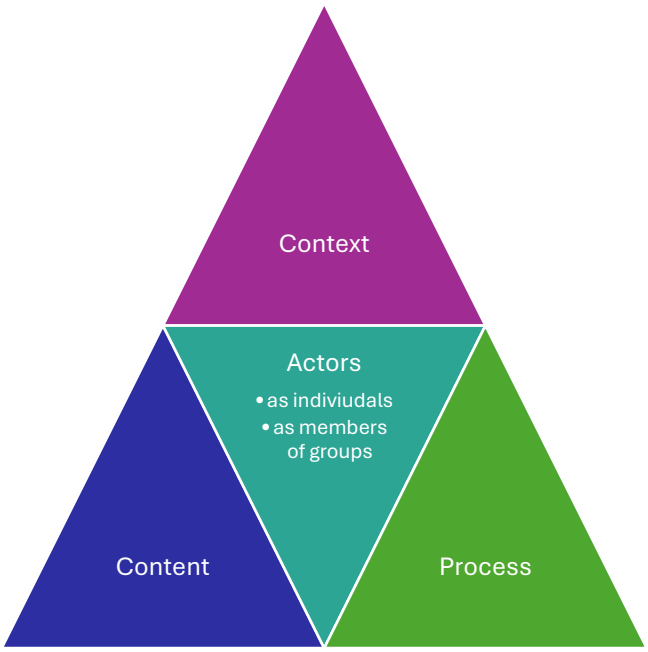

Figure 4: The Health Policy Triangle (Walt & Gilson, 1994: 354)

Although the HPT was initially designed for the analysis of health sector policy, its relevance and applicability extend beyond the single sector (O'Brien, Sinnot, Walshe, Mulchay & Bryne, 2020: 2). Health policy research is primarily critiqued for focusing more on the policy content, which appears to be the case with policy research in general, whilst neglecting the actors, context and processes (O'Brien et al., 2020: 2). Furthermore, by focusing on the policy content, attention is diverted from understanding the processes which often explain why policy outcomes fail to emerge (Walt & Gilson, 1994: 354). Therefore, using this framework allowed the researcher to align the findings by focusing on the:

- **Content**, which is essentially what the policy is mainly about and reflects all of the other elements, covering aspects of objectives, legislation and other guidelines.

- **Actors**, include influential figures who actively contribute to the formulation and implementation of the policy.
- **Context**, which refers to systemic factors and the social, economic, political, cultural and environmental conditions under which the policy will be implemented.
- **Process**, which includes how policies were initiated, developed, communicated, implemented and evaluated.

The addition of the HPT allowed for an integrated discussion which facilitated a thorough understanding of the policy documents. Its application generated transformative insights to support and drive improvements in both the development and implementation of future policy responses, moving toward more inclusive, protective and holistic responses to homelessness (Nunlall, 2022:9; O'Brien et al., 2020:2; Walt & Gilson, 1994:355). The complete discussion and interpretation of findings are detailed in part 2 of the thesis.

Phase 2: Homelessness survey

The second phase employed a survey research design with a quantitative approach, utilising a questionnaire that was administered through face-to-face interviews with 150 people experiencing homelessness to determine the experiences of victimisation and immediate service needs (Babbie, 2020:268). This methodological decision allowed for the extraction of descriptive statistics and personal accounts, which were used to illustrate the lived experiences of respondents The strategy worked well and was able to counteract one of the main shortcomings of survey research, which is failing to offer more in-depth insights into quantitative results. In survey research, respondents often venture into telling a story or relating an incident to motivate their response, hence the use of extensive field notes and a voice-recorder (when consent was obtained) assisted in capturing rich and in-depth personal accounts. Another reason for this strategy was to protect against any developmental/educational/literacy challenges, which has also proven successful in previous studies involving people experiencing homelessness (Pophaim, 2019; Sadiki, 2016). In some cases, respondents opted to complete the questionnaires themselves, with the guidance of the researcher. These cases were closely monitored to ensure that the questionnaires were completed correctly and to be available should the respondents have any questions or uncertainties.

Due to the transient, mobile or elusive nature of people experiencing homelessness compounded by the fact that they were categorised as a 'hard-to-count' population, location sampling was used, which is a popular choice for 'hard-to-sample' populations (De Beer &

Vally, 2021a:2-3; Schepers, Juchtmans & Nicaise, 2017:16). Accordingly, service centres and shelters in Bloemfontein and Cape Town were approached and acted as a central 'location' where people experiencing homelessness could be reached, as this is where they are known to access and obtain a variety of goods and services. With the current challenges around determining the true extent of the homeless population, a pre-determined sample size was established, in line with the parameters of Kendall's tau correlation coefficient (between 85 to 100 respondents). The only inclusion criteria were that respondents had to be at-risk of homelessness, currently experiencing homelessness, or have previously experienced homelessness. Furthermore, respondents had to be 18 years or older, with a basic ability to understand and communicate in English and/or Afrikaans. Based on these strategies and requirements, a final sample of 150 diverse respondents were included in phase two of the study (see Part 3 for sample description table).

Before the main data collection phase, the researcher conducted a short pilot study with ten respondents to test the questions and make any changes if necessary. The respondents, with the researcher present to facilitate, had no problems understanding and providing answers for the questions; therefore, no revisions were necessary. As outlined in Part 3, the questionnaire consisted of 100 questions with various sections to gain comprehensive insight into the lived experiences of people experiencing homelessness. The questionnaire was developed with reference to previous studies and existing literature, which served as a baseline for item selection and design. Furthermore, the reliability of the scale data was tested by employing Cronbach's α coefficient Accordingly, the acceptable value for scale data was set at 0.7 (Field, 2018:823). For example, with reference to the questions regarding the respondents' experiences of Adverse Childhood Experiences (ACEs), Cronbach's α was 0.788 (for ten items) and with the creation of the respondent's experiential definition, Cronbach's α was 0.835 (for 14 items). The final stage of this phase was to analyse the data using the Statistical Package for Social Sciences software (IBM SPSS (v29.0.0.0 (241)). Once the data was collected and coded, the responses were captured into the SPSS database, and an analysis was run to provide descriptive statistics for questions relevant to the objective of determining the experiences of victimisation and service needs of people experiencing homelessness. The data set and variables were checked several times and data cleaning procedures were implemented to ensure that there were no missing entries in the current data set. Following this process, the data was presented in frequency distribution nested tables to illustrate the results of the study The complete discussion and interpretation of findings are detailed in part 3 of the thesis.

Phase 3: Stakeholder engagement

The third phase of the study aimed to obtain input from relevant stakeholders, policymakers and service providers regarding the contents of a victim inclusive policy framework. The phase was guided by a qualitative approach which allowed participants to share their experiences, perceptions, ideas, opinions and perspectives within the context they function (Ugwu & Eze, 2023:20). Participants were selected using purposive sampling, based on their ability to provide specific and useful information (Campbell, Greenwood, Prior, Shearer, Walkem, Young, Bywaters & Walker, 2020: 653-654). Regrettably, representatives from the legislative branch of the Department of Justice and Constitutional Development (DoJ&CD), were not available at the time of data collection. Due to their unavailability, questions related to the development of the Prevention and Combating of Hate Crimes and Hate Speech Act (16 of 2023), which was included to expand on the proposed inclusion of homelessness under this provision (Pophaim, 2021) could not be fully addressed. The final sample consisted of 38 stakeholders from Pretoria, Durban, Bloemfontein and Cape Town, drawn from various service sectors and fields of expertise:

Table 4: Stakeholder sample description (Phase 3)

Stakeholder group	**Number of representatives**
Academics and researchers	3
Officials from the Western Cape Department of Social Development	3
NGO/NPO shelter and service centre staff	17
South African Police Service Officials	14
Department of Justice and Constitutional Development officials	1

Data saturation was not reached during this phase and, as a result, all available representatives were included in the interview process. The data obtained was of a unique nature, indicating that there is no fixed or generic way to address homelessness, further justifying the need for a flexible and dynamic method to respond to the phenomenon.

A collective case study research design was used, and cases were specifically chosen in order to draw comparisons between cases and concepts, which aids in both the expansion and validation of theories (Fouché & Schurink, 2011:322). In this instance, comparisons were

made, related to the provision of service to people experiencing homelessness, in order to identify the potential gaps and obtain valuable and practical recommendations toward the development of the victim inclusive policy framework. Before the interviews could commence, informed consent and permission to record the sessions were obtained. Personal interviews (virtually and face-to-face) were transcribed verbatim. The findings were analysed using thematic analysis to provide a better understanding of the nature and scope of the interactions between the stakeholders and their clients. To ensure trustworthiness, four general criteria were relied upon, which include credibility, transferability, dependability and confirmability. To promote credibility, different sources and methods were triangulated. Furthermore, participants were purposefully selected, based on the nature and scope of their engagement with people experiencing homelessness and related matters, within their current capacity. Accordingly, questions for each interview were restricted to the stakeholders' expertise and how they could assist in advancing the contribution of the study. During the interviews, the researcher made use of member checking, constantly making sure that accurate responses were recorded and each interview was treated as a conversation which allowed for constant clarification and the credible documentation of the information shared. With reference to transferability, the aim of the study was not to generalise, but to create trustworthy and transferable accounts. Thick descriptions were used and linked to relevant literature (Stahl & King, 2020:26-28). The complete discussion and interpretation of findings are detailed in Part 4 of the thesis.

Phase 4: Consolidation phase

The final phase of the study presents the consolidated data collected in Phases 1, 2 and 3. By connecting the key findings from the main phase, the evidence-based victim inclusive policy framework has come to fruition, as presented in Part 5.

Ethical considerations

The study was guided by the fundamental ethical principles of social science research, to maintain the required level of integrity, which protects and safeguards the interests of all those who participated in the study, particularly the vulnerable respondents who took part in the second phase. Before the data collection phase could commence, an ethical clearance protocol was submitted to the General/Human Research Ethics Committee (GHREC) at the UFS. As part of the application process, the researcher was required to submit all relevant documentation (see Appendix A to D), along with gatekeepers' permission from the Western Cape DSD, the

DoJ&CD, the SAPS, U-turn and Towers of Hope[7]. The study received full institutional ethical clearance with ethical clearance number UFS-HSD2023/1848 on 29 August 2024 (see Appendix E). Participants and respondents were recruited using the sampling strategies outlined above, and the research process was conducted in accordance with the following the ethical principles (Babie, 2020:63-72).

- **Voluntary participation**

Participants and respondents were requested to participate in the respective phases of the study on a voluntary basis, meaning that no form of coercion took place. Furthermore, participants and respondents were informed that they could refuse to answer questions that made them uncomfortable and decide to withdraw at any time, without reason(s) or fear of consequence(s). Both research groups were informed that there were no potential (direct) benefits for participating in the study and that there would be no formal compensation associated with their participation.

- **Informed consent**

Before the data collection process could commence, respondents and participants were informed about the nature of the study and what their involvement would entail. Both groups were taken through the applicable information sheets (see Appendix B and D) and allowed to ask questions related to the process. Once they confirmed that they understood the information provided, they were requested to sign the consent form.

- **No harm to respondents/participants**

Due to the nature of the study, the researcher made provision to mitigate the occurrence of mild discomfort due to some of the questions in the second phase of the study. The researcher ensured that a basic level of rapport was established and that the required level of sensitivity was employed while respondents were requested to complete the questionnaires (surveys). Respondents were reminded that they could skip questions that made them uncomfortable or they could simply withdraw from the study, without any questions asked. Although the nature of the third phase did not have the same level of risk, the participants were provided with the same protocols regarding the prioritisation of their comfort.

[7] Non-governmental organisations in Cape Town and Bloemfontein respectively, that provide services to people experiencing homelessness.

- **Deception**

Truthfulness and transparency were maintained throughout the research process as none of the objectives of the study required the use of deception. Instead, respondents and participants were fully informed upon the request for consent and could ask questions related to any aspect associated with the study.

- **Confidentiality**

Confidentiality was guaranteed to respondents and participants. To ensure that their personal information was protected, the researcher made use of pseudonyms and numbers to keep the identity of individual's separate from their responses. To further enhance measures to promote confidentiality, interviews were conducted on a one-on-one basis, in private and in secluded rooms. The respondents were requested to complete the questionnaires on their own, without sharing information, and in cases where respondents required assistance, it was done in a manner that would not allow others to know what they had reported. Both groups were informed that the only people who would have access to their personal information would be the researcher, the supervisor and co-supervisor and that if they felt their confidentiality was compromised, they could withdraw from the study at any time. A final clause was presented to both groups, which stated that the only limits to confidentiality were when they presented as a danger to themselves, others, or they shared that they are currently involved in any criminal activity, these exceptional cases would have to be reported to the relevant authorities. Fortunately, none of the participants and respondents from phases 2 and 3 disclosed any reportable information, thus no further action was required.

- **Debriefing**

As mentioned previously, in an attempt to mitigate any risks or harm due to the direct participation in the study. The debriefing services of a counselling psychologist and social worker were made available to both groups. Fortunately, none of the respondents or participants requested or required access to the debriefing services upon conclusion of the data collection process.

- **Dissemination of research findings**

The data was analysed in a truthful, unbiased manner to fully reflect the information as it was reported by the respondents and participants. Everyone who participated in the study was informed that, while maintaining the required level of confidentiality, the findings of the study

will be used in a variety of academic reports, publications and conference papers. The final thesis will be shared with the relevant government departments, non-governmental organisations and individuals from the second phase who were informed that they could contact the researcher directly (if possible) or request the respective organisations to do so, should they be interested in the findings of the study.

Electronic data and hard copies will be stored on a password protected computer and a locked cabinet for a period of five years for future academic use. Once the five years have elapsed, the data will be permanently deleted from all electronic platforms and hardcopies will be shredded and discarded. The institutional ethical approval process binds the researcher to uphold the aforementioned principles and to remain in compliance with the Protection of Personal Information Act (4 of 2013), which has been embedded in the application process.

Value of the study

Necessitated by the dearth of local research and the general apathy and collective blindness that often accompanies homelessness and its resolution, the current study provides comprehensive insights into the complexities around the experience of homelessness, victimisation and constrained service delivery. By illuminating the policy gaps and obtaining consultative information from relevant stakeholders and people experiencing homelessness, the study provides valuable theoretical and practical recommendations to enhance both policy and intervention measures. Local research, from an academic perspective, is often dominated by small-scaled, 'once-off' studies that tend to focus on more or less the same factors, which do not necessarily cater for the production of new and innovative findings, but rather the replication and confirmation of existing information.

Accordingly, the current study disrupts the status quo by employing a novel mixed method approach, which catered for a new perspective by evaluating the policies and identifying accurate design reality gaps and how it impacts the well-being and delivery of services at a grassroots level. A serendipitous contribution occurred regarding the conceptualisation of homelessness. With the lack of a universal working definition consistently identified as one of the major barriers to the holistic resolution of homelessness, the current study provides an innovative conceptual framework for defining homelessness through an experiential construction process, which could alter the way homelessness is perceived and how it is ultimately addressed.

From a theoretical perspective, the study assists with the generation of much needed contemporary research to improve current understandings of the homeless victim in the South African context by gaining a greater insight into both their distinct experiences, service needs and the persistent barriers that need to be broken down to promote protection and inclusivity. Following the integration of the key findings from the respective phases, the consolidated information will serve as the practical contribution and will be presented as the evidence-based victim-inclusive policy framework, one which aims to formally acknowledge the plight of the homeless victim and intentionally facilitate the formulation of accessible and inclusive infrastructure and services for people experiencing homelessness across all disciplines and sectors. The current study demonstrates the value of employing mixed methodologies to achieve desired outcomes regarding particular aspects related to the resolution of homelessness. The study emphasised the importance of a bottom-up, consultative and all-inclusive approach.

The study showcases the importance of the accurate contextualisation of data towards the development of targeted and valuable practical recommendations. With the arrival of the national policy framework on homelessness, which is expected at some point, but with no definite implementation date. The current study aims to promote the idea of collaboration and synergy of existing sectors and frameworks, not to work against the grain, but in unison, to address the transdisciplinary and intersectional nature of homelessness. While, at the same time, fostering inclusivity to improve the well-being of people experiencing homelessness, while attending to the day-to-day needs, establishing more effective, sustainable and longer-term pathways out of homelessness. Lastly and equally importantly, the current study demonstrates the need for and seeks to inspire continuous research on the diverse and multidisciplinary areas of inquiry related to homelessness to remain informed with the contemporary manifestations of homelessness and sustain the required level of flexibility in attempt to get ahead of this persistent social phenomenon towards the anticipated eradication and prevention.

Structure of the thesis

With changes in postgraduate education and the job market, the focus has shifted to published outputs and skills that serve a lifetime of article writing (Connoway & Malherbe, 2024:64). The Thesis by Publication (TBP) has become an increasingly popular option, spurred on by the expected urgency by the Department of Higher Education and Training (DHET) to complete

doctoral qualifications and increase research outputs within the Higher Education Institution (HEIs) space (Sadiki, 2022:34). A thesis of this nature comprises of a series of independent, yet interrelated articles, with peer-reviewed articles being the gold standard, accompanied by a narrative that shows how these articles come together as a larger project in fulfilment a coherent argument (Connoway & Malherbe, 2024:66). As per the General academic rules and regulations (2024) of the University of the Free State provided above, a doctoral TBP should consist of three publishable manuscripts, one of which should be publishable in a DHET accredited journal.

In line with the requirements of the Council of Higher Education (CHE), the TBP must exhibit the production of research at the highest level that leads to the submission, assessment and acceptance of a thesis, in other words, research that demonstrates a high level of research capability that makes a significant and original contribution to the current field of study (Connoway & Malherbe, 2024:66). The anticipated benefits of early career publication – facilitated by the TBP – is far-reaching as it allows the candidate to join the professional community at an early stage. Publications can also act as a resource that contributes to the field, generate interest and stir debates. Through this process, emerging scholars learn to navigate the "publish or perish" world of academia, while obtaining their doctoral qualifications (Connoway & Malherbe, 2024:69). Moreover, the enriching process exposes candidates to the independent peer review process associated with publishing in academic journals, through an unbiased assessment, with feedback that extends beyond the supervisory team and examiners (Sadiki, 2022:35). Furthermore, this process facilities a learning opportunity between the candidate and supervisor(s), on how to process, interpret and respond to reviewers, which is believed to require a special kind of literacy.

Without this necessary transfer of skills, many early career researchers tend to take comments personally, become paralysed and never resubmit their work again. The successful transfer of these skills will allow the candidate to establish a body of work on which they can build their future research, thereby launching their careers immediately, which seems more advantageous when compared to a conventional thesis, which would still have to be converted to publications once examined (Connoway & Malherebe, 2024:69). Accordingly, using a popular "Sandwich Model", the current thesis bookends the three interrelated articles with an introduction (Part 1) and a conclusion (Part 5). The combining narrative mentioned previously establishes the common thread between the articles, in fulfilment of the studies aim and objectives and as such a slight overlap and inadvertent repetition, attributed to the interrelated nature of the

manuscripts, can be expected (Connoway & Malherbe, 2024:65). Additionally, the manuscripts have been submitted to different DHET accredited journals, therefore it has been structured to subscribe to the respective journal guidelines, with regards to layout, formatting and referencing style. The thesis is structured as follows:

Part 1

Serves as an introduction and orientation to homelessness and the multifaceted aspects associated with the experience.

Part 2

Presents the first publishable manuscript which addresses the first objective of the study. The paper explores six local policy responses to homelessness by analysing the content through the lens of the HPT by Walt and Gilson (1994).

Part 3

Presents the second publishable manuscript which addresses the second objective of the study. The paper explores the experiences of victimisation and determines the service needs, among a group of people experiencing homelessness. Through the exploration various elements related to their experience were documented to better understand the intricate cycles which represent the urgent need for dynamic responses.

Part 4

Presents the third publishable manuscript which addresses the third objective of the study. The paper provides an exposition on the perspectives and input from relevant stakeholders with the aim of better understanding the environment in which they perform their roles and responsibilities.

Part 5

Serves as a conclusion and aims to demonstrate the linkages between the preceding parts of the thesis. In highlighting the key findings and observations, the section aims to provide a consolidated summary of the preceding section and present the contribution of the study which is the evidence-based victim inclusive policy framework.

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Taking stock of South African responses to homelessness: Advocating for victim-inclusive and protective policy reform

Jean-Paul Pophaim

Abstract

Homelessness remains a neglected and under-prioritised area of policy intervention in South Africa. Without a national policy framework, homelessness is generally overlooked, resulting in intermittent, fragmented and ineffective responses. The lack of attention has contributed to a concerning rise in both at-risk and street-based homeless populations, who continue to face challenges in accessing effective support. Using document analysis, the paper maps the content of six local homelessness policies. The findings revealed that the documents adhere to a rigid and static framework, thereby failing to capture the complex contextual and conceptual factors associated with homelessness. A notable shortcoming is the limited focus and response to experiences of victimisation. Using the Health Policy Triangle (HPT), the paper aligns the key findings with the four dimensions of the framework to advocate for inclusive, protective and victim-sensitive policy recommendations to aid in the development of holistic and humane responses to homelessness in South Africa.

Key words: Homelessness, victimisation, policy reform, health policy triangle, protective and inclusive policy, South Africa.

Introduction

Homelessness is a multifaceted and complex phenomenon and shows persistent growth globally. Despite ongoing efforts to mitigate homelessness, it remains a profound challenge. There is currently no national policy framework[1] and South African cities tend to take rather fragmented approaches to address and reduce homelessness (Desmond et al., 2017). The uncoordinated efforts of stakeholders are spurred by varying strategies, none of which have proven to be sustainable or have longer-term positive impacts (Hopkins et al., 2024). The everchanging landscape of what homelessness is and who it affects represents one of the leading problems that impede its resolution.

[1] The author acknowledges the current work around the development of a green paper on homelessness in South Africa, towards a national homelessness policy framework.

Driven by a significant dearth of local research on homelessness (Pophaim & Peacock, 2021; Pophaim, 2021; Sadiki & Steyn, 2021), a host of ideological and practical challenges hinder the development of targeted and sustainable interventions. These challenges perpetuate the inability to accurately contextualise the problem and consequently impact the feasibility of policies and interventions, which are largely dependent on the establishment of realistic baselines, which reflects a clear understanding of what homelessness entails (De Beer & Vally, 2021b; Sadiki & Steyn, 2021). The absence of a national policy perpetuates the implementation of fragmented and polarised (punitive versus compassionate) approaches which further criminalise, ostracise and inadvertently promote dependency and institutionalisation among people experiencing homelessness (Hopkins et al., 2024; Owadally & Grundy, 2023). The reality is that people experiencing homelessness face widespread social exclusion and are constantly confronted by extreme poverty and deprivation, marginalisation and often exist in a state of absolute vulnerability to crime, victimisation and a variety of other challenges (Ellsworth, 2019; Pophaim, 2022). It is further contended that any intervention directed at addressing this complex issue needs to remain cognisant and include services and infrastructure that mitigate the negative impact of factors associated with homelessness (De Beer & Vally, 2021b). However, despite its detrimental impact, these social injustices are rarely acknowledged or sufficiently addressed in the current policy space.

A notable example is that despite the fact that the homeless are arguably one of the most vulnerable populations in any society, the concept of the homeless victim remains outside of the so-called 'ideal' victim and as a result absent from popular consciousness with an ensuing silence in criminal justice, societal and policy responses (Pophaim & Peacock, 2021; Pophaim, 2021; Scurfield et al., 2004). Shaped by a landscape of counterproductive, poorly implemented and absent policies, intended interventions are likely to remain ineffective, with the added risk of reducing the overall safety and quality of life of people experiencing homelessness. It is therefore important to analyse, understand and interpret existing policies and their intended purpose. Through this undertaking, an opportunity to 'take stock' presents itself, to determine what is available, how it is structured and administered by stakeholders and equally important how it is accessed by the intended beneficiaries. Guided by a preliminary scoping review of existing international and local policy and legislative frameworks, it was revealed that homelessness, for the most part remains policy adjacent. In other words, most legislation and policy, while addressing related issues, do not explicitly mention or aim to address homelessness, which is problematic for member states and stakeholders who are expected to

interpret and remain compliant with international standards and obligations. Furthermore, the review also confirmed that homelessness is indeed context bound (De Beer & Vally, 2021b) as many of the international policies and frameworks depend on strategies that mobilise and require resources that would not necessarily be available or applicable in response to the South African homelessness situation.

Moreover, the preliminary appraisal further exposed the implications of an absent national policy, also revealing that many provinces and cities do not have dedicated policies in place to respond to homelessness and that current provisions are generally considered inadequate to address the associated complexities (Naidoo, 2010). With the continued shortfall of direct responses, homelessness in South Africa, continues to exist in what is best described as a policy vacuum (De Beer & Vally, 2021c; Groenewald, et al., 2023). Amidst the constrained and absent responses, the suggestion to rely on other national legislation, such as the Constitution of the Republic of South Africa or the Social Assistance Act (13 of 2004) was considered. Although it does not deal with homelessness directly, it was deemed capable of dealing with associated conditions. However, after a thorough reflection, it was determined that the lack of specificity and poor implementation are likely to result in the inability to meet the unique needs of people experiencing homelessness for it to be considered a meaningful intervention (Pophaim & Peacock, 2021; Tenai & Mbewu, 2020). It was therefore decided to only focus on the existing direct responses to homelessness on a provincial and municipal level. Accordingly, through a policy analysis of the selected South African policy responses to homelessness, the paper seeks to explore the current approaches and challenges associated with addressing homelessness in the country and provide insight for the development of more effective, protective and inclusive solutions.

Current challenges in addressing homelessness

Addressing homelessness remains a daunting and multidimensional task, which continues to confront and challenge several countries worldwide (Owadally & Grundy, 2023). The following realities can be regarded as the key features that contribute to the complexity of the issue and as a result, significantly hampers any real progress both practically and within the policy and legislative space.

Uncontrollable growth and flawed population data

The visibly increasing, yet poorly documented, growth of homelessness in South Africa, has mainly been attributed to vast structural and socioeconomic challenges, further exacerbated by

several individual level factors, the overwhelming impact of the Coronavirus pandemic (COVID-19), and the longstanding and widening population inequalities associated with the availability and affordability of housing and employment (Marutlulle, 2021; Owadally & Grundy, 2023; Tenai & Mbewu, 2020). Determining the magnitude of homelessness is a crucial step in resolving it, yet there has never been formal statistics on vagrants and traveling populations, who do not have a fixed shelter (Cross et al., 2010). More than a decade later, the lack of formal statistics continues to impact the resolution of homelessness. As formal counting attempts remain dominated by inaccurate estimates, commonly attributed to the application of ambiguous definitions, the restricted counting of the publicly visible and the nomadic nature of homelessness, stakeholders are often forced to depend on unofficial and voluntarily produced estimates (Cross et al., 2010; Groenewald et al., 2023; Obioha, 2022). Furthermore, the absence of consistent and reliable population data has a threefold impact on policy development, as it leads to the misrepresentation of the gravity of homelessness which then leads to the under-prioritisation of the problem and the development and inevitable implementation of ineffective responses (Cross & Seager, 2010; Sadiki & Steyn, 2021). With already strained and inadequate infrastructure, resources and service delivery, compounded by the lack of accurate data, it becomes increasingly difficult to address homelessness holistically.

Viable interventions can most effectively be constructed when there is a clear understanding of the nature and extent of homelessness, which through an established baseline, demarcates the scope and area for redress (De Beer & Vally, 2021b; Sadiki & Steyn, 2021). Although it is important, the over quantification of the problem could prove detrimental to the well-being of people experiencing homelessness. As the continued misrepresentation could result in the sustained under-prioritisation and intermittent attention it receives through a combination of punitive, compassionate, institutionalised and the less frequently used developmental approaches (Hopkins et al., 2024). While more immediate needs and experiences such as protection from exploitation, harassment and victimisation, continue to fall by the wayside.

Conceptual dilemmas and knowledge gaps

Homelessness is a complex concept to define, with very little consistency and universality in both its understanding and application across various contexts, regions and countries (Frazer & Kroll, 2022; Obioha, 2022). In the absence of a universally agreed upon definition, governments and organisations use different understandings of homelessness, which by default, impact the level, type and quality of interventions, as well as who is eligible for support

(Obioha, 2022). To provide efficient support, a clear understanding of the varied pathways, different types and consequences is needed. Without a clear understanding, there remains a risk that policymakers will default to generic interventions that may work for a few but will be inappropriate for many others (Desmond et al., 2017). Further exacerbating the issue related to the precise scope and quantification of homelessness mentioned previously. This means that policies need to be evidenced based and contextually sensitive to the diverse needs of the homeless (Desmond et al., 2017). The most basic and widely accepted definitions and much of what is known about homelessness are primarily based on observations and the replication of research conducted in developed settings such as North America and Europe. However, considering the dynamic nature of homelessness, which makes it rather context bound, it remains problematic to assume that extant definitions are applicable and transferrable to a rather diverse South African context (De Beer & Vally, 2021b). Compounded by the dearth of local research, the constrained understanding and application of homelessness has resulted in the development of uncritical and ineffective policies which fail to acknowledge and include many crucial nuances in policy and interventions aimed at addressing homelessness.

For example, homelessness continues to be seen as a social welfare or structural problem, while several human rights violations remain overlooked as the complex interplay between the pathways, consequences, and pathways out of homelessness is rarely acknowledged in policy and intervention measures (De Beer, 2021; Hopkins et al., 2024; Muleya & Mlilo, 2023). With the current work and development of a green paper on homelessness, the importance of a working definition is noted, which would ensure the creation of a clear policy directive in terms of what homelessness entails (Groenewald et al., 2023). However, based on how homelessness defies singular definitions, its dynamic nature and how it affects each individual differently, the reality may be to steer clear from static and universal working definitions and instead embrace the fact that a range of definitions may be needed to underpin interventions and policy development, to ensure that the complexities are fully captured and that it translates to meaningful impact, with sustainable and longer-term outcomes (Hopkins et al., 2024; Kriel, 2017; Tenai & Mbewu. 2020). Employing accurate and more widely applicable definitions within the policy space would likely enhance the specificity of the required stakeholders, resources and interventions.

Experiences of victimisation

Due to their position in society, the homeless are often placed outside of the scope of what is regarded as an 'ideal' victim (Pophaim & Peacock, 2021). To be homeless means that an individual is confronted by an increased and disproportionate level of vulnerability and exposure to violence and crime compared to the housed population (Ellsworth, 2019; Pophaim, 2021). The negative treatment against the poor and homeless is further confirmed through the established term *Aporophobia* – which refers to preconceived attitudes and belief that result in the ill-treatment and victimisation of those who find themselves in precarious socioeconomic positions (García Domínguez & Vander Beken, 2024). To contextualise, people experiencing homelessness are reported to be 13 times more likely to experience violent crime and 47 times more likely to be victims of theft, with an estimated range of between 14 and 21% compared to 2% of the housed population. These statistics are comparable to local studies which reported that at least half of their respective samples reported experiences of victimisation (Meinbresse et al., 2014; Mthembu, 2023; Pophaim, 2019; Sadiki, 2016). Furthermore, the enduring legacy of apartheid has left many communities in a continuous and vicious cycle of social challenges, characterised by past and present trauma. These communities are rife with issues related to violence and gangsterism, childhood adversity and adverse domestic conditions, alcohol and substance abuse disorders, mental and physical health challenges, and crime and incarceration, all of which can be regarded as active pathways both into homelessness and prominent risk factors for victimisation. The prevalence of victimisation is indicative of the glaringly apparent negligence of the homeless victim, reflected by absent protective and inclusive policy and legislation (Pophaim, 2021), which is another unfortunate byproduct of a limited understanding and anecdotally driven responses. This is furthermore illustrated by the exacerbating impact of the often punitive governmental and societal responses to homelessness.

Global and local directives to criminalise poverty and homelessness

With the current state of homelessness worldwide, many governments have entered crisis management to alleviate the immense pressure to respond to the increase in visible homelessness (Owadally & Grundy, 2023). Punitive measures have been the dominant approach in most contexts as it provides immediate results through the removal of homeless groups, with little to no consideration of the gross human rights violations and further detrimental effects thereof for people experiencing homelessness (Owadally & Grundy, 2023). With these criminalising practices, there is a considerable lack of humanity, shrouded in

undignified harassment, the inconsistent application of by-laws, fines, arrests, repeated encampment evictions, destruction of structures and loss of property. This results in the homeless being continuously reminded of the underlying negative perceptions about them which further increase the effects of discrimination and stigma, thereby significantly compromising their quality of life. The adoption of oppressive and punitive practices, results in a grave loss of trust in available networks, as the homeless often feel that they have less access to support due to fractured relationships with local government and service providers (Hopkins et al., 2024). Moreover, such practices often result in a considerable degree of isolation, which heightens their vulnerability to victimisation.

On the other hand, compassionate responses, such as handouts and support, can be regarded as a way in which entitlement and dependency are fostered. When essential services are readily available, some individuals may become accustomed to life on the streets and see little value in committing to accessing pathways out of homelessness. Balancing the punitive and compassionate responses may lead to a heightened rate of institutionalisation, which comes with its fair share of challenges for both society and the person experiencing homelessness. Forcefully moving individuals into shelters and safe spaces before they are willing and ready to do so, without a viable developmental strategy to keep them safe and off the street is another aspect that needs to be reconsidered moving forward.

Lack of governance and continued risk of implementation failure

As outlined in the preceding sections, effectively dealing with homelessness is a complex matter that requires careful consideration and input from as many stakeholders as possible. Although policy development processes claim to consult stakeholders and people experiencing homelessness, the design and implementation maintain a characteristically top-down approach, which may be further perpetuated by the country's aspirations to standardise policy formulation across all spheres of government (The Presidency of the Republic of South Africa, 2020), a process which may seem positive, but could prove ineffective if it is simply done to meet standards of compliance and obligation, without due consideration of the needs of the intended beneficiaries.

The government acknowledges that there is no clarity at a national level in terms of who the lead department dealing with homelessness is (Waters, 2020). Additionally, concerns around the lack of political will are further evidenced by the minimal support and follow through in most governmental initiatives directed at addressing homelessness (Batchelor-Hunt, 2023; De

Beer & Vally, 2021c). Moreover, corruption is another element to consider, as its presence could negatively impact the ability to render services to beneficiaries in an already compromised and under-prioritised context (Mabeba, 2021). Comparing the two scenarios reveals the unfortunate reality in addressing homelessness. Even if there were effective policies, there is no determined vessel to guarantee its successful implementation, which means that we are confronted by a twofold drawback in terms of policy and practice.

Policies and their subsequent interventions are usually framed by mainstream legislation and services, without the required sensitivity and inclusionary consideration for vulnerable segments of the population who must overcome significant barriers rooted in stigma and power differentials. In the absence of a national policy, the dearth of local research and constrained stakeholder engagement; the uncoordinated provincial and municipal responses to homelessness will most likely continue to fail at the implementation stage. Considering the outlined challenges, an analysis of the current draft and active policy responses to homelessness is warranted and much needed, to identify the strengths and weaknesses, to develop more victim inclusive, accessible and targeted solutions for people experiencing homelessness.

The policy analysis strategy and methods

Document analysis was used to assess the contents of the local policy responses to homelessness. The method entailed a systematic procedure of identifying, reviewing and evaluating the relevant documents, which included both printed and electronic material. Similar to other analytical methods in qualitative research, document analysis allowed for the policy content to be examined and interpreted to elicit meaning and gain a better understanding of the current responses. Through this process, the researcher was able to formulate practical and valuable recommendations for the creation of more inclusive and protective policy responses (Bowen, 2009). The policy documents were searched for online, using various keywords including ‘policy responses to homelessness in South Africa’; ‘homelessness policies’; South African policy responses to homelessness and ‘South African homelessness strategy’.

To ensure that an exhaustive list of policies could be established, news and academic articles were consulted to determine where policies have been drafted, approved and implemented. All the documents included in the analysis were available in the public domain; therefore, no permission was required from gatekeepers or under copyright laws (Oriakhogba, 2023). Once a thorough search was conducted, six documents were found and included in the analysis. The selection criteria were supplemented by the application of four elements to ensure relevance,

namely, authenticity: documents were retrieved from official government websites; credibility: the policies were formulated by trustworthy sources and obtained from reputable sources; representativeness: the documents were specifically direct responses to homelessness to identify potential gaps and provide valuable recommendations and meaning: all documents could contribute to an improved understanding of the local policy responses (Birkan Özkan, 2023). While searching for policies, various versions of the same documents were found, however, to maintain reliability and relevance, the most recent versions were used. The policy documents included in the final sample include:

- The Gauteng City Region Strategy on Adult Street Homelessness (2021-2024),
- The City of Johannesburg Policy on Homelessness (2024),
- The Street Homelessness Policy for the City of Tshwane (2015),
- The City of Cape Town's Street People Policy (2013),
- The Stellenbosch Municipality Draft Street People Policy (2018) and
- The City of Cape Town Draft Strategy to address Rough Sleeping (2024)[2].

Once the documents were sourced and selected, the researcher proceeded to read and interpret the contents. This iterative process combines elements of content and thematic analysis (Bowen, 2009). Due to the low number of policies, it was decided that a manual analysis would be appropriate which allowed for a more detailed and nuanced interpretation of the policies. The documents essentially covered similar aspects, with slight differences in the names of headings and the placement of information within the respective policies. The analytical procedure identified eight themes, and the policy content was categorised based on likeness and relevance to each theme (Bowen, 2009). Once the themes were established and the content mapped out, the main findings were critiqued and aligned with the four elements of the HPT developed by Walt and Gilson (1994), which include the content, actors, context and process (Walt & Gilson, 1994). Although the HPT was initially designed for the analysis of health sector policies, its relevance extends beyond this sector (O'Brien et al., 2020). Similar to other research in the Criminology and Victimology space, to foster a thorough understanding of the policies, the four dimensions of the HPT were integrated with the findings from the policy analysis, to generate transformative insights (Nunlall, 2022), which will be used to guide

[2] The author acknowledges the dynamic homelessness policy space, which is currently receiving an influx of attention amidst the developing green paper and subsequent national policy on homelessness. These documents were analysed in its current form and the analysis therefore has no bearing on future/updated versions.

recommendations for the development of more inclusive, protective and holistic policy responses to homelessness.

Policy analysis

Based on the themes established through the analysis process, Table 1 provides an overview of the eight themes and the relevant descriptions. The policy analysis section will be followed by a critical appraisal of the policy content within the context of the four elements of the HPT.

Table 1: Thematic overview of policy analysis

	Theme	**Description**
1	Conceptualisation of key terms	Explores the identification and defining of key terms
2	Contextualisation, background and problem statement	Examines the use of existing literature to contextualise and problematise homelessness
3	Strategic framework	Assesses how the documents have mapped out the respective vision, goals and objectives
4	Regulatory context	Evaluates the consideration of relevant legislative and policy frameworks the policy will be aligned with
5	Policy parameters and scope	Defines the limits of the policy in terms of what it aims to address and who it aims to cover
6	Relevant actors' roles and responsibilities and institutional arrangements	Examines the list of stakeholders and their respective duties in the context of the policy and its intended intervention
7	Implementation and action plans	Examines how the policy will be implemented and put into action
8	Monitoring, evaluation and policy review	Details provisions made for policy monitoring, evaluation and review processes

Discussion of findings and alignment with the dimensions of the Health Policy Triangle (HPT):

By mapping out the policy content and placing it into the relevant themes (see Appendix 1), it became evident that the documents have a similar structure, with similar approaches to addressing homelessness in the respective geographies. Following the policy analysis and identification of strengths and weaknesses, the alignment with the HPT will allow for an improved understanding of the local homelessness policy space to provide valuable recommendations to advocate for the creation of inclusive and protective responses (Nunlall, 2022). The following discussion also demonstrates how the four dimensions of the HPT interact dynamically and how it can be used to reveal the cyclical pattern of homelessness and its resolution. The context explains where the need for the policy originated and under which conditions it will be implemented, while the origin of the need for policy directly informs the content and the content shapes the context in which the policy will be implemented. Jointly,

the content and the context will lead to the mobilisation of the relevant actors, whose ability to incite change will be influenced by the policy content guiding them and the context in which they are expected to function. Lastly, the process dimension will address the ways in which the policies were initiated, developed, communicated and implemented, which is directly influenced by the context, content and actor dimensions.

Context

The context dimension encompasses the origin of the need for policy intervention in conjunction with the systemic, social, economic, political, cultural and environmental factors under which the policy will be implemented (O'Brien et al., 2020; Walt & Gilson, 1994). Homelessness remains a seemingly permanent and prominent fixture in many contexts around the world. Accordingly, the United Nations (UN) has called for all member states to commit to the eradication of homelessness by 2030 (United Nations, 2016; Pophaim & Peacock, 2021). South Africa is not exempt from this reality, notorious for its dire socioeconomic conditions and levels of inequality, the threat of homelessness continues to be a looming presence in the lives of many citizens (De Beer & Vally, 2021b; Mashau, 2017; McKeever, 2024; Pophaim & Peacock, 2021). As a UN member state, South Africa is legally obligated to consult, integrate and uphold the overarching frameworks around social justice, encompassing human rights values and the Sustainable Development Goals (SDGs).

Accordingly, the Constitution of the Republic of South Africa (1996), stipulates that people's needs must be responded to and that the public must be encouraged to participate in policymaking. To address these challenges, the South African government has several policy levers at their disposal to promote the creation of employment opportunities and improve the socioeconomic conditions for its citizens (The Presidency of the Republic of South Africa, 2020). Despite the visibility and continual rise of homelessness in South Africa, active responses remain invisible in government policy (De Beer & Vally, 2021a). The COVID-19 pandemic exposed remnants of apartheid capitalism, revealing the historic political and institutional fault lines and demonstrating just how neglected homeless populations are and how many cities were unable to produce rapid responses or sustain collaborative solutions that took place during the hard lockdown (De Beer & Vally, 2021c; Pophaim, 2022). People experiencing homelessness were disproportionately affected by the pandemic, and the need for many solutions discussed prior became even more apparent (Casey & Stazen, 2021).

Confronted by a bleak contextual environment, the development of South African policy responses to homelessness remains constrained and under prioritised.

In the absence of a national homelessness policy framework, only one province, three cities and one municipality have attempted to introduce policy responses, all at varying degrees of implementation, widely considered uncritical and largely ineffective. Due to this large implementation gap, homelessness continues to exist in what is best described as a policy vacuum (De Beer & Vally, 2021c; Groenewald et al., 2023). The implications of the broader systemic issues are further compounded by the general dearth of local research, which hampers the much-needed understanding for improved responses (De Beer & Vally, 2021b; Sadiki & Steyn, 2021). Concerningly, perhaps the most significant drawback is the general absence of government as a pivotal stakeholder, illustrated by the lack of political will and general support (Batchelor-Hunt, 2023; De Beer & Vally, 2021b; De Beer & Vally, 2021c; Sadiki & Steyn, 2021), which has significant and detrimental effects on the prioritisation and ultimate resolution of homelessness in South Africa,

With no national policy and the issue still at the green paper stage, homelessness currently receives little to no attention in annual budgets and planning within government departments, which is indicative of a combination of poorly contextualised accounts of the extent of homelessness and broader systemic issues. The Tshwane Policy (2015), for example, was approved, four years later (in 2019), with no budget allocated for its implementation (De Beer, 2020; De Beer & Vally, 2021c). Furthermore, the constrained contextual environment and broader systemic issues inevitably cascade down to the grassroots level, negatively shaping realities and responses. In the absence of government support, South African communities have to navigate adverse realities characterised by a non-profit sector with limited resources, high unemployment rates, a housing crisis, high rates of corruption and poorly implemented policies and legislation (De Beer & Vally, 2021b; Marutlulle, 2021; Naidoo, 2010; Pophaim & Peacock, 2021; Trading Economics, 2024). Homelessness is a highly politicised matter and often reflects a specific political orientation, instead of the reality of deprivation (Sadiki & Steyn, 2021). A position which greatly impacts how homelessness is perceived and addressed, currently reflected in a highly polarised manner, presented in a mixture of punitive, compassionate and the less frequently used developmental approaches (Hopkins et al., 2024; Owadally & Grundy, 2023). The implications will be expanded on in the subsequent sections; however, it is important to highlight that the context in which the policies are implemented is characterised by a host of practical and ideological barriers, including the presence of negative

perceptions and stereotypes that tend to constrain service delivery even more and often lead to unsavoury interactions between service providers and people experiencing homelessness (Mahlangu & Kgadima, 2021; Muleya & Mlilo. 2023; Weng & Clark, 2018; Wentzel & Voce, 2012), which is a cause for concern as it directly impacts the wellbeing and infringes on the rights of people experiencing homelessness. Furthermore, the importance of this section cannot be overstated, as most of the policy documents have ambitiously established directives that fail to consider the constrained and limited contextual environment, which is one of the harsh realities of a contemporary South African society.

Content

The content forms the heart of the policy and essentially includes what it is about, while covering the objectives, legislation and other guidelines which directly inform and shape the policy directives and interventions (O'Brien et al., 2020; Walt & Gilson, 1994). Although policy content does not have to be overly prescriptive, it has to clearly outline the intended scope and reach and should therefore be free of ambiguities. Health policy research is often criticised for overemphasising the content, while overlooking the actor, context and process dimensions that shape and provide an improved understanding of why policy outcomes fail to emerge (O'Brien et al., 2020; Walt & Gilson, 1994). In an effort to mitigate this, the current analysis aims to provide an integrated alignment of the content with the other dimensions of the HPT to provide critical and valuable policy recommendations.

Contextualisation of the policy problem

The analysis revealed both strengths and weaknesses in terms of the contextualisation of homelessness as a policy problem, as all of the documents framed the issue in varying degrees of comprehensiveness. The Tshwane Policy (2015) included a section on the institutional and contextual challenges that could potentially hamper effective implementation; consequently these considerations did not extend to the operational sections of the document. Similarly, the Gauteng Strategy (2021-2024) outlined the challenges of homelessness, which is not prevalent in the framing of interventions. Stemming from the general dearth of local research on homelessness (Pophaim & Peacock, 2021; Pophaim, 2021; Sadiki & Steyn, 2021), a recurrent limitation in all of the policies is that the contextualisation sections are mainly informed by outdated information and unofficial population estimates.

Concerningly, the outdated and narrow portrayal of the problem could significantly impact the quality and contemporaneity of the contextualisation of homelessness and impede on the ability

to develop effective evidence-based policies and interventions (Obioha, 2022). The Cape Town Strategy (2024) highlights data scarcity as a shortcoming within the homeless or rough sleeping sector; however, the notable lack of accurate data and failure to acknowledge it, in the other documents will likely result in the unclear understanding of the problem. The implication of the shortcoming, amongst others, is that an adequate baseline cannot be established to inform budget and resource allocations (De Beer & Vally, 2021b; Sadiki & Steyn, 2021). The Tshwane Policy (2015) serves as a clear illustration, attributed to broader systemic issues, inaccurate contextualisation or both; the policy was only approved four years following the publication of the revised version (in 2019), without a budget allocated for its implementation (De Beer, 2020). It is surprising and concerning that although data scarcity is repeatedly framed as a problem, policy development seemingly proceeds without efforts to address the problem. Despite its importance and without disregarding its inherent value, the quantification of homelessness requires a delicate balance, since the accuracy of the population size can provide a better understanding of the extent, the risk remains that the over quantification might mask the variation present in the population (Desmond et al. 2017). Failing to consider this balance would perpetuate the dominant view that the homeless are a homogenous group, that do not require a more nuanced approach.

Maintaining this course of action, means that policymakers will continue to default to generic policy interventions and not progress to the evidence-based, contextually sensitive responses that are required to meet the diverse needs of people experiencing homelessness (Desmond et al., 2017; Groenewald et al., 2023). The policy documents note the generally accepted pathways into homelessness, but if left up to interpretation, could result in a prescriptive application and restrictive conceptualisation of homelessness and misdirect the eligibility for the interventions outlined in the policies (Obioha, 2022). To illustrate the importance of comprehensiveness, the Cape Town Strategy (2024), attempts to localise the problem and direct the policy and intervention to people who are sleeping rough. The strategy does cite local and precise data as an inherent challenge; however, proceeds by contextualising rough sleeping as a category of homelessness. As part of the public commentary process, the strategy has received criticism for being less concrete about addressing homelessness (GroundUp & Hirsch, 2024), considering that it is the intended replacement for the Street People Policy (2013). Rough sleeping is merely a manifestation of homelessness and is not necessarily the most representative category and therefore limiting a strategy to just one category may be considered failing to holistically address the issue of homelessness (United Nations, 2025), which is

especially problematic considering the preventative stance the Cape Town Strategy (2024) assumes.

All of the policies, besides the Cape Town Strategy (2024) refer to the distinct rural and urban dynamics of homelessness. However, the contextualisation and intervention is primarily focused on the street-based urban population, which could serve as a critique for the holistic intent of the Cape Town Strategy (2024), meaning that it is only concerned with addressing the publicly visible portion of the population, which contradicts its preventative stance, but coincides with the focus on those who are sleeping rough. Contextual factors related to beneficiary and service provider consultation is another aspect that requires improvement. Most of the information presented in the policies is based on secondary and structurally informed data and lacks the reflective expertise of stakeholders and lived experiences of the intended beneficiaries. A final consideration in terms of the contextualisation of the problem is the silence around the victimisation and disenfranchised status of people experiencing homelessness. Confronted by social exclusion, marginalisation and victimisation, any intervention directed at addressing homelessness is expected to remain cognisant and include services and infrastructure that mitigate these barriers (De Beer, 2021b; Ellsworth, 2019; Pophaim, 2022). Four of the policies explicitly mention vulnerability to harm and discrimination; however, it is insufficiently elaborated on and not reflected in the policy aims and interventions. The issue of vulnerability and experiences of victimisation is often overshadowed by the vulnerability of at-risk populations, who may end up on the street. Additionally, the counter-narrative, which is their involvement in criminal activities, usually outweighs considerations around the victimogenic traits that are inherently associated with homelessness.

To illustrate the importance of its contextualisation, experiences of victimisation lead to an increase in vulnerability, which is often associated with existing challenges of disenfranchisement, stigmatisation, marginalisation and social exclusion. This is further substantiated by the Johannesburg Policy (2024), which defines vulnerable persons as "*...segments of society that are at a higher risk of experiencing harm, discrimination or marginalisation……These individuals often face barriers in accessing resources, service and opportunities that can further exacerbate their vulnerability*". The presence of these negative outcomes could essentially hamper access and delivery of services, and the general efficacy of the policy outcomes. While the policies do show awareness related to the vulnerability and experiences of victimisation amongst the homeless, the issue of inclusivity would depend on

whether or not the policy and its interventions consider and accommodate the diverse needs and circumstances of the affected individual(s).

Defining and conceptualising key terminology

The conceptual layout differs significantly between policies; for instance, some policies include an executive summary, a preamble and introduction, while others are not as detailed (see Table 2). Similarly, some policies provide an extensive glossary, while others only have a few key terms. The use of these introductory tools could prove useful as it enhances the impact, readability and useability of the document. In a complex environment such as this, it may be useful to standardise the introductory tools used in policies related to homelessness. Thereby, ensuring that there is no misinterpretation or misalignment regarding important concepts related to the phenomenon itself, service providers and the range of services offered across different regions. It is to be expected that some regional or contextual differences may influence the definitions slightly – but the standardisation process can accommodate flexibility, without being overly static.

Moreover, the inclusion of causal theories, the Gauteng Strategy (2021-2024), masterfully debunks common misconceptions associated with homelessness, which often perpetuate negativity, blaming and ill-treatment. By outlining that "…*these people need neither blame, nor special treatment. What they urgently need is not mercy, but respect to their right to housing and social protection*" underscores the need to reframe current policy responses, not to offer special treatment but to simply provide inclusionary, protective and accessible services to people experiencing homelessness. For the purposes of the current discussion and alignment of the policy content, the conceptualisation of the following key terms will be approached: home, homelessness (including street homeless person, street people and rough sleepers) and vulnerable persons.

In a critical appraisal of the previous version of the Tshwane Policy (2013), Mashau (2017) highlights the need to include the definition of a 'home' in homeless policies, and five of the six policies have made provision for its inclusion. It is further argued that the definition should extend beyond the idea of a physical shelter or the fulfilment of basic human rights (Mashau, 2017). Towards the development of a more suitable definition for homelessness, it is useful to highlight what the individual is essentially lacking, with reference to the concept of having a 'home' and what it means to the individual. The Johannesburg Policy (2024), for example defines a home as "… *a place where one lives permanently, especially as a member of a family*

or household and embodies the ideas of comfort, belonging, identity and security". In addition to this, the Stellenbosch draft Policy (2018), contends that *"…we cannot understand homelessness by only focusing on the concept of home or shelter. It is important that we also consider the psycho-socio economic drivers and outcomes of homelessness…".*

Based on these statements it is evident that the static definitions employed in the policy documents are mostly inadequate, due to the central focus on the concept of lacking a home or shelter. The formulation of a universal definition is a persistent and recurrent issue in research, policy formulation and the intervention space. The analysed policies reflect the contextualisation gap discussed previously, as the static and restrictive definitions perpetuate the homogenous stereotype commonly misattributed to people experiencing homelessness, which has significant implications for the intervention space and deciding who is eligible for support (Obioha, 2022; Pophaim & Peacock, 2021). The main theme across the policy documents, with reference to the formulation of a definition includes *"…those that live on the street",* with a list of alterative areas, *"…such as pavements, under bridges or any area that cannot be regarded as a home".* The basic definitions include "*…people who fall outside of the viable network of assistance and therefore cannot provide themselves with shelter at a given time or place".*

By emphasising street homelessness and rough sleeping, the policies perpetuate a conceptual 'othering' and exclusion based on how the definitions will be interpreted to determine the scope of the policy and its interventions. While acknowledging the link between street homelessness and informal housing, the policies do not aim to address all categories of at risk and absolute homelessness, thereby rendering the preventative stance obsolete. Three of the documents define homelessness as the "state of being", while also referring to a street homeless person or a rough sleeper, which intersects with the definition of homelessness already provided. Generally, the distinction would serve as clarification in terms of the scope of the policy and its intended beneficiaries. However, the similar, yet problematic nature of the definitions, could become confusing for stakeholders in the enforcement of the policy directives and the development of departmental mandates. The extant definitions would have to be integrated and holistically formulated to include all relevant aspects in relation to the scope of the policy, which will also remove any unnecessary confusion.

The Tshwane Policy (2015) includes the categorisation of homelessness, referring specifically to a large group of near homeless individuals, living on the verge of homelessness – but

remained selective with who will be covered by the policy and its intended interventions, as it explicitly excludes the inadequately housed. Given the nature and complexity of homelessness, a more inclusive policy lens is required – one that recognises the fluidity between housing insecurity and actual homelessness. If interventions only target those who are visibly homeless, the escalating vulnerabilities of near-homeless populations may go unaddressed, increasing the likelihood of street-based homelessness. The identified inconsistencies can be attributed to the inadequate contextualisation of homelessness compounded by the broader systemic inadequacies. In the categorisation of homelessness, the Tshwane Policy (2015) makes mention of factors such as the legacy of the past, unemployment rates, political displacement, housing backlogs and the destruction of family units, which contribute to the changing face of homelessness and leads to their marginalisation. The statement directly influences the definition of homelessness and the scope of the intended policy. It is concerning that these aspects do not appear in the other policies, as it implies that the directives will not consider factors that are bound to increase systemic barriers reinforced by the invisibility, marginalisation and social exclusion of people experiencing homelessness. While a principled line must be drawn to distinguish homelessness from broader housing issues, the boundary should be informed by a nuanced and inclusive contextualisation – one that anticipates and adequately addresses housing insecurity as a pertinent pathway to absolute homelessness.

The Johannesburg Policy (2024) refers to homelessness as "… *the state of being displaced and includes displaced persons who lack housing, a fixed, regular and adequate night-time residence*" and then proceeds to define a street homeless person as "…*a displaced person, and is an individual who lacks housing, a fixed, regular and adequate night-time residence. These are people who live on the streets or pavements or open spaces, under bridges, in carports, plastic containers, bushes or next to rivers or spruits, who fall outside the viable social network of assistance and are unable to provide themselves with shelter at any given time or place*".

The conceptual convergence is problematic, through its interpretation, according to the policy, homelessness will only be based on the absence of a fixed, regular and adequate night-time residence and street homelessness will only be linked to one of the alternative spaces included in the definition. Similar to the Street People policy (2013), the Stellenbosch draft Policy (2018) refers to street people as *"...people who for any reason use the outdoors as a place of abode for a lengthy period of time".* Referring to the use of the outdoors as a place of abode, would as a standard interpretation, exclude the use of auxiliary structures such as tents, bridges, carports and plastic containers, which essentially provide cover as cited in the Gauteng Strategy

(2021-2024) and Johannesburg Policy (2024). These inconsistencies highlight the necessity of constructing less static, more dynamic definitions for the purpose of policy formulation.

The Cape Town Strategy (2024) argues that homelessness is often defined broadly "…*by including people who lack access to adequate housing conditions as being homeless*" and by using a narrower approach *"…referring to people who live on the street and engage in rough sleeping, only".* While acknowledging the varied approaches, the strategy aims to "…*define homelessness in a way that is meaningful across the world, resonating in both the Global South and the Global North*". The strategy further considers that the United Nations defines homelessness as "…*a material form of deprivation; homelessness refers to an inability of people to enjoy permanent accommodation*". It is further highlighted that being homeless often means that individuals lack access to other human rights such as work, healthcare, social security, privacy and education. Based on these discussions, the city defines homelessness as "… *a concept referring to people without a regular, safe, secure and adequately sheltered place to live in*". Cognisant of the housing challenges and extent of informality in Cape Town, the strategy narrowly focuses on addressing 'rough sleepers', which refers to *"…Individuals regarded as people without accommodation, often nomadic, more specifically people sleeping on the streets or open spaces, buildings not intended for habitation, people sleeping in vehicles or the like and pavement dwellers in makeshift structures. Further included in this definition are people living in temporary accommodation such as sleeping in night shelters, safe spaces or similar temporary accommodation*".

Following public comment, the term rough sleeper was identified as being dehumanising and a negative label which perpetuates stigmatisation. It was further criticised for reflecting an uncaring disposition to the vulnerable by the city. The term was later changed to 'sleeping rough' (Booysen, 2024). The Cape Town Strategy (2024) further explores the classification of rough sleepers and uses it to support the notion that rough sleepers are not homogenous and that a one-size-fits-all approach is unlikely to have any real impact. Individuals tend to experience rough sleeping differently and are in this position for various reasons. While the city acknowledges that they do not have accurate data on how many people fall within the various categories of rough sleeping, these contextually specific classifications are an essential step in developing more accurate policy responses, as it portrays a deeper understanding of why people are on the street and how best to assist them. While considerable progress has been made, there are still additional elements that can be considered towards the development of a more holistic working definition for homelessness. Historically, perceptions of homelessness

have been shaped by socio-cultural and political trends. The process of social construction, which is the creation of meaning, has contributed to definitions in policy that is based less on empirical knowledge and more on public perceptions of homelessness (Cronley, 2010). As a result, the definitions formulated thus far embodies a more top-down approach and does not reflect the narratives of homeless people, thereby inadequately capturing the full extent of their lived experiences and immediate needs. These static definitions often draw more attention to the state of homelessness, which is the lack of shelter, while neglecting the conditions or circumstances that characterise and often prolong the experience and which would be conceptualised, contextualised and prioritised alongside the provision of a stable and adequate shelter.

The common definition of vulnerable persons currently used in the policies "…*refer to segments of society that are at higher risk of harm, discrimination or marginalisation due to various factors such as age, gender, persons with disabilities, homeless and service users recovering from substance abuse. These individuals often face barriers in accessing resources, services, and opportunities that can further exacerbate their vulnerability".* Highlighting vulnerability in the context of homelessness is extremely important and it should be included in all of the policy documents as it reflects the required progress towards inclusivity (De Beer & Vally, 2021b). In the context of the policy documents, the term vulnerability is also often used to refer to those segments of the population who can be categorised as at risk or near homelessness. To avoid confusion, it is suggested that the concept refers to the degree of vulnerability within the context of homelessness but clearly distinguishes between the associated risk of becoming homeless and the vulnerability of experiencing victimisation, stigmatisation, harassment, discrimination, exploitation and social exclusion.

Regulatory contextualisation

Homelessness exists within a vast policy and legislative environment, while there are not many international or local frameworks that directly mention or respond to homelessness, most of them do possess the ability to address related issues such as psychosocial services, poverty and the lack of shelter. However, concerns have been raised regarding the constrained application and implementation of the existing frameworks (Naidoo, 2010; Pophaim & Peacock, 2021). All of the documents under review have dedicated sections in which the regulatory considerations are mapped out in relation to the purpose and plans for implementation. Notably, the Constitution of the Republic of South Africa (1996) features in all of the policies, while

others allude to the consideration of human rights principles, only the Johannesburg Policy (2024) explicitly cites the Universal Declaration on Human Rights. The absence of a national policy framework is evident, as there is no coherence regarding the regulatory considerations cited in the policy documents, which was well articulated in the Cape Town Strategy (2024) *"…an overarching national framework to fully address homelessness, including rough sleeping and its effects, has never existed in South Africa. This constitutes a large policy deficit, which has led to incoherent homelessness policy and strategy at all government levels".*

"… Apart from this policy gap, National Government's response to homelessness can also be characterised as being bureaucratically constrained and lacking in innovative and proactive measures as well as funding to address the issue. It is within this context that the city, has spent significant effort, as well as funding, to address rough sleeping".

"…This policy deficit has also resulted in uncoordinated approaches of service providers, NGOs and government departments in dealing with homelessness.".

Therefore, it would be useful to establish a level of uniformity with regard to the regulatory considerations, to ensure that all associated aspects of homelessness are considered and addressed comprehensively. A crucial consideration would be to establish a balance between frameworks that address the criminogenic elements of homelessness and those that cater to the victimogenic and protective needs of the population. The policy documents refer to the municipal by-laws relevant to their respective geographies which are read against the Criminal Procedure Act (51 of 1977) and gives effect to penalties for 'any offences' that are in violation of the law, which perpetuates the use of the dominant punitive and oppressive measures to address homelessness (Killander, 2019; Owadally & Grundy, 2023). With the improved contextualisation of the experiences of victimisation discussed previously, policies need to be reframed and aligned to cater to the victimogenic needs of this vulnerable population. The Johannesburg Policy (2024) and the Gauteng Strategy (2021-2024) are the only ones that refer to the indigent status of homelessness, while the Johannesburg Policy (2024) is the only one that refers to the Promotion of the Equality and Prevention of Unfair Discrimination Act (4 of 2000), while references to the Service Charter for Victims of Crime or the Prevention and Combatting of Hate Crimes and Hate Speech Act (16 of 2023) remain absent. This is a concerning issue, considering the purpose of the policies and how it is reflecting a rather oppressive orientation, instead of one that is centred around the well-being and upliftment of this vulnerable population.

Outlining the strategic intent, stated purposes and problematic phrasing

The following section refers to the purpose and strategic framework of the policies, which serves as the foundation element of a policy document, since it establishes focus and guidance, thus ensuring that the policy is aligned with its intended aims. The purpose of the Tshwane Policy (2015) is to "…*ensure the effective implementation of integrated mechanisms to address street homelessnes*s". The Gauteng Strategy (2021-2024) under its vision and mission commits to creating a *"…Gauteng City Region free of street homeless and everyone has a safe place to call home and is self-reliant".* With its mission *"…to prevent and eliminate street homelessness through* [the] *provision of integrated services to affected persons and families*".

The Stellenbosch draft Policy (2018) outlines its purpose and focus as to "…*manage street people as part of an integrated and holistic approach to community development*" and to define how the municipality can play a meaningful, enabling, collaborative and facilitating role in managing the social and economic challenges that currently confront people experiencing homelessness. The Cape Town strategy (2024) provides an executive summary which highlights the purpose of the policy as primarily to reduce *"…Rough sleeping and to ensure the constitutionally enshrined right of human dignity and facilitate an all-of-society approach through partnerships and collaboration".*

Although the more recent policies appear more detailed, an inherent flaw identified in the critical appraisal of the previous version of the Tshwane Policy (2013) by Mashau (2017) remains apparent in all of the analysed documents. The overall purpose of the policies advocate for the enhancement of the lives of the homeless through achieving the positive elements outlined in the policy directives. However, the phrasing used in the documents represents a critical gap and may be indicative of the negative perceptions towards people experiencing homelessness. Much of what is presented in the purpose statements, which is meant to guide the action of the policies, can be perceived as oppressive, criminalising and often counterproductive (Mashau, 2017). The Tshwane Policy (2015) contains an ambiguous purpose statement as it does not specifically delineate what the integrated mechanisms are and what actions would constitute effective implementation. Furthermore, the restricted focus of the policy on street homelessness only, implies that the policy scope and reach will be limited to those already experiencing homelessness and perhaps only include individuals who reside on the street.

Realistically, a policy on homelessness should be holistic and broad enough to address the entire spectrum of homelessness in all of its forms, stages and categories – extending to those living in egregious conditions and on the verge of homelessness. Similarly, the Johannesburg Policy (2024) presents an ambiguous and slightly repetitive list as it outlines the policy purpose:

- Serve as an overarching policy framework for homelessness within the City of Johannesburg.
- Promote respect for the homeless and their inherent dignity.
- Provide a broad outline of the responsibilities and accountabilities for various stakeholders including practitioners,
- Provide homeless people with reasonable solutions including accommodation for effective governance,
- Promote, protect, and ensure the equal enjoyment of human rights and fundamental freedoms for homeless people in the City.
- Allow for data collection mechanisms to enhance future policy interventions.

The first statement lacks clarity regarding the characteristics that make it an overarching policy. The policy goals and objectives that follow are detailed, but do not represent an exhaustive list of all challenges associated with homelessness, therefore it cannot be considered an overarching policy. The second and fifth points are redundant, the fifth point is more detailed, and one would assume that *"the promotion of respect and inherent dignity" should be included as part of the "enjoyment of human rights and fundamental freedoms".* Cognisant of the current treatment of the homeless, the document, as part of its purpose, should detail how punitive and criminalising strategies will be avoided, which are in direct contravention to the current nature of the purpose statement, as most of the strategies to reduce the visibility of homelessness (punitive and criminalising measures) can and should be regarded as a gross violation and disregard of the human rights of people experiencing homelessness.

In general, the policies superficially build their purpose on the known shortcomings around capacity and resources in the country. The point to provide reasonable solutions including accommodation for effective governance, is problematic, while cognisant of the housing shortage nationwide (Marutlulle, 2021). The purpose statement further aims to provide an outline of the responsibilities and accountabilities for various role players and stakeholders. Based on several contextual flaws and amidst uncertainty within government, regarding who the custodians of homelessness are (Waters, 2020). It is unclear how the policy aims to avoid

the misalignment of roles, overlooked and excluded sectors, wasted resources and ineffective actors, all of which will hamper the effective implementation of the policy. Lastly, the Johannesburg Policy (2024) allows for data collection mechanisms to enhance future policy interventions, which is already inherently flawed due to the constrained policy approval and implementation process. Using the Johannesburg Policy (2024) as an example, the draft to approval process took approximately two years (2022-2024), with minimal, to no changes to the contextual information. The implication of the delay is that the approved policy is based on outdated information, and given the dynamic nature of homelessness, the proposed interventions will most likely be obsolete, within an already altered landscape, as it would not have been designed to address any new developments. However, as the critique relates more to the policymaking process, it is further expanded on and concluded under the process dimension.

The inappropriate phrasing in the purpose of the Stellenbosch draft Policy (2018), problematically states that it aims to *"…manage street people",* which could inadvertently be interpreted as the homeless are to be viewed as a problematic group, who lack agency and have to be managed to alleviate the burden on the rest of society in order to achieve community development. The interpretation of the statement could lead to stakeholders and service providers disregarding the fact that people experiencing homelessness are human beings, with rights, needs and the potential to do and become more. Finally, while addressing the omission of a policy purpose in the 2013 version, the Cape Town Strategy (2024), based on the purpose, is primarily geared towards reducing "…*rough sleepin*g", which can be regarded as another conceptual limitation within the homelessness policy space.

The Cape Town Strategy (2024) acknowledges the complexity of rough sleeping and how it extends to other categories of homelessness. By virtue of inappropriate phrasing, the policy and its subsequent interventions are bound to exclude other categories of homelessness. For example, those who are at risk of or marginally street based, who may eventually end up in the "rough sleepers" category if not provided equal support, which the strategy claims to be cognisant of. Furthermore, none of the policies overtly mention considerations for protection, safety, and security against victimisation as part of its purpose, thereby inadvertently perpetuating the silence around the vulnerability to victimisation of the homeless and reducing any formal acknowledgment and action for redress. Although a purpose statement does not have to be overly prescriptive, it should be holistic, realistic, mindful and adequately structured so that it captures all of the problem areas associated with the intended beneficiaries. Any

policy document that fails to do so, will in all likelihood, along with its subsequent interventions remain constrained and largely ineffective. Based on this appraisal, one can clearly see that most of the policies resort to default and generic purpose statements, which are reflective of the flawed conceptual and contextual influences identified in the current appraisal.

The impact of the constrained contextual influences is further evidenced by the inclusion of narrowly defined scope and parameters, which effectively restricts the reach and dilutes the broader strategic intent of the majority of the policies. While many policies cite proactive and preventative solutions as their primary aim, the scope statements often limit the application to individuals already experiencing (street-based) homelessness. This inadvertently excludes those at risk of homelessness, thereby undermining the preventative objectives set out in the respective policies. For example, the Tshwane Policy (2015) states that its vision is to "*…complete integration of street homeless people into the city of Tshwane's mainstream society through activities and interventions aimed at the prevention and management of street homelessness and the facilitation of sustainable pathways out of street homelessness*". To address this, broader scope and parameter sections are required in policies. However, the Tshwane Policy (2015) simultaneously clarifies that *"…this policy is focusing on street homelessness and not on people living in informal settlements or sub-standard housing, although there are close links between these living conditions"*. The narrowing of scope reveals a tension – not necessarily a contradiction, but it could be regarded as a misalignment – between the preventative aspirations and the operational parameters of the policy.

Similar issues appear in the Street People policy (2013) and Stellenbosch draft Policy (2018), both of which refer to the prevention of at-risk segments but set parameters to only include street people and exclude street children (who could potentially end up becoming street adults if no interventions are made). In contrast Cape Town Strategy (2024) offers a more integrated approach, acknowledging the need to support those at risk and currently in need "*…this strategy is trying to address the existent problem of homelessness, its applicable to those who currently engage in rough sleeping as we as communities who are at risk of migrating to the street. In order to prevent the expansion of rough sleeping*". While the revised Cape Town strategy (2024) is not without limitations, it does appear to better align its contextualisation, conceptual framing, strategic focus and plans of action. A characteristic that should feature in all policies developed in the future.

Actors

The actor dimension delineates the influential figures who have contributed to the formulation of the policies and are expected to actively participate in its implementation (O'Brien, 2020; Walt & Gilson, 1994). The analysis of the six policies revealed that the Gauteng Strategy (2021-2024) was developed by the Gauteng DSD and the Johannesburg Policy (2024 was prepared by the Social Development Integrated Policy, Planning and Research (IPPR) Unit. In both cases, no additional contributors were listed. The Tshwane Policy (2015) was developed through a collaborative effort between the city, the University of Pretoria (UP), the University of South Africa (UNISA) and the Tshwane Homelessness Forum. In the Western Cape, the City of Cape Town Policy (2013) was authored by an official from the Social Development and Early Childhood Development Department. The Stellenbosch draft Policy (2018) does not specifically identify the responsible author but does include the contact details for the manager at the community development, planning and economic development at the municipality of Stellenbosch. The DSD initiated a review of the Cape Town Policy (2013) and the revised Cape Town strategy to reduce rough sleeping (2024) was developed by the Community Services and Health directorate (GroundUp & Hirsch, 2024). Furthermore, as part of the development process, in the background and purpose section, the Tshwane Policy (2015) reports that through a rigorous research process there were "… *focus group discussions with officials, politicians, NGO leaders, private sector, police and street homeless people".* The Johannesburg Policy (2024) highlights public participation as an integral part of the policy development process, which included "…*beneficiaries, community members, and representatives of community and appropriate support organisations in the CoJ regions were among the invited stakeholders, who eventually constituted a specific reference group for consultation*".

The Western Cape policies and strategy do not provide information regarding the consultation with the public or the intended beneficiaries. A major critique is that the policy documents do not clearly demonstrate how these consultations, especially with people experiencing homelessness have been integrated into the policy and its subsequent interventions. As mentioned in the context section, information of this nature is lacking, and it is opined that the quality of the policies will greatly benefit from the better integration of this information. The importance of the homeless as stakeholders and actors in the development of policy responses is reflected in the argument that states that the stark increase in homeless numbers can be attributed to the fact that *"…the voice of homeless people has not been used in policy formulation and development"* (Jadezweni, 2021). The observation that the policy documents

are rigidly informed through secondary information is in line with the sentiments that homelessness and its dynamics appear to be documented based on the perspectives of government officials, academics and politicians and do not reflect the lived experiences of people experiencing homelessness. Consequently, this means that potentially important information is often overlooked by policymakers (Jadezweni, 2021), which explains why policies tend to adopt a broad, systemic lens instead of a flexible and nuanced approach.

With reference to stakeholder roles and responsibilities, given the complex nature of homelessness, it is of no surprise that the policies call for a multi-sectoral collaboration between actors to assume joint responsibility for the implementation of the policies. However, the convergence of several interrelated factors stemming from the evident policy vacuum has resulted in the inability to mobilise the correct team of stakeholders as well as identify the leading agency, which has consistently exacerbated the lack of collaboration between various sectors. The pressing ambiguity has led to the lack of accountability and an easy cop-out for stakeholders who have not been explicitly mentioned (De Beer, 2021; De Beer & Vally, 2021c). Considering the social orientation of homelessness and the core mandate of the DSD, which emanates from section 27(1)(c), section 28(1) and schedule 4 of the Constitution[3], it has been indirectly identified as the lead actor, as most of the interventions are currently being filtered through them. However, the current approaches are widely criticised for being uncritical, welfare orientated services that further perpetuate the notion that homelessness should only be viewed and addressed as a social welfare issue, inadvertently disregarding the several other challenges that amount to gross human rights violations (De Beer, 2021; Muleya & Mlilo, 2023), thereby further constraining the mobilisation of diversely skilled stakeholders and restricting the much needed collaboration across sectors.

Furthermore, the documents provide sufficient information with regard to the expected roles and responsibilities of stakeholders during the implementation of the policy. The Gauteng Strategy (2021-2024) provides extensive information regarding the roles each stakeholder is expected to fulfil in line with short, medium and long-term goals. The Johannesburg Policy (2024) clearly demarcates the roles and responsibilities of stakeholders, in matters relating to homelessness. The Stellenbosch draft Policy (2018) provides detailed information for the 'lead' stakeholders, but simply lists the additional internal and external stakeholders, which can be

[3] Sec 27(1)(c) provides for the rights of access to appropriate social assistance to those unable to support themselves; Sec 28(1) sets out the rights of children with regards to appropriate care and schedule 4 identifies welfare services, population development and disaster management as functional areas of national and provincial legislative competence.

improved for more clarity. The Cape Town Policy (2013) followed the same structure, but this was greatly improved on in the revised Strategy (2024) as each strategic focus area in its implementation plan is clearly aligned with the responsible stakeholder(s). The last element, which was mentioned in most of the documents, but should be emphasised is the provision of training and capacity building for all actors. Service delivery to the homeless is already strained and to compound the issue, it has been reported that general social workers are not equipped to deal with the complexities of homelessness, especially in cases where several social issues intersect and where interventions are required that extend beyond the scope and capacity of social workers (Muleya & Mlilo, 2023). Therefore, to facilitate the promotion of inclusivity, sensitivity, awareness and the alignment of roles and services, more training is required.

Process

The final dimension includes how the policies were initiated, developed, communicated, implemented and evaluated (O'Brien et al., 2020; Walt & Gilson, 1994). With reference to the implementation and action plans of the respective policies, most of the older documents have, for the most part, been ineffective. One can verify this claim using the latest recorded increase in the South African homeless population, which compares the estimates from the 1996 Census (13 135) to that of the 2022 Census (55 719) (Maluleka, 2025). Furthermore, it would be unjust to critique the recently approved Johannesburg Policy (2024) and the recently drafted Cape Town Rough Sleeper Strategy (2024) using the same baseline. However, based on the underlying thread established in the preceding discussions, it becomes evident that the historic generic, one-sized fits all approach, that lacks the required contextual sensitivity, will reign supreme (Desmond et al., 2017; Groenewald et al., 2023). In other words, policymakers will persist in disregarding the individual complexities embedded in this heterogeneous population and continue to foster the production of uncritical, fragmented and overzealous policies that fail at the implementation stage.

Based on the findings of the policy analysis, it is important to note that the identification of challenges faced by people experiencing homelessness has only been included in the Gauteng Strategy (2021-2024), which means that the remaining policies are formulating and intend to implement plans without due consideration of the potentially debilitating impact these challenges can have on the policy outcomes, where in some cases it could render it obsolete. Failure to account for these challenges, would further perpetuate the assumption that people experiencing homelessness do not want to make use of services or are showing resistance to

support, while not acknowledging the packaging and delivery of these services and how the challenges they experience may act as systemic barriers, inadvertently blocking access and usage to the several interrelated and often overlooked contextual, conceptual and structural factors.

The lack of accountability is another concerning factor, which has been outlined as an institutional challenge in the Tshwane Policy (2015) "*…the absence of a regulatory body to keep service providers accountable*". Furthermore, the importance of this sentiment has been reinforced by its inclusion in the Cape Town Strategy (2024) "*…additionally, service providers in the sector have not been held legally accountable to deliver on their mandates and to provide much needed services to their beneficiaries – rough sleepers*". Paving the way for ensuring accountability, the Johannesburg Policy (2024) is the only document which includes a section on the contravention of the policy to ensure accountability from all stakeholders involved, the main concern would be its implementation and enforcement and whether this will become standard practice across geographies and with the introduction of the impending national policy on homelessness.

To summarise, the policies, for the most part, reflect the intention to improve the lives of people experiencing homelessness. However, the standardised and rigid structure is illustrated by a logical, yet generic connection between the contextualisation, directives and subsequent plans for intervention and implementation. Given the current nature and extent of the homeless population in South Africa, the policy documents will have to be reframed in such a way that reduction becomes a priority before progressing to the overly ambitious plans for presentation as presented in the respective documents. Based on the contextual and conceptual shortcomings identified under the content dimension, it is important to emphasise the refinement of policy content, in such a way that its influence is regulated and correctly interpreted and implemented at grassroots level. To illustrate, one can consider the Johannesburg Policy's (2024) approach to prioritise vulnerable groups within the homeless population, as an example.

Since vulnerability is inaccurately contextualised and conceptualised, the policy outcomes of the prioritisation of certain vulnerable characteristics could lead to the inadvertent exclusion by a homelessness policy, of an already vulnerable population, with already restricted access to services. By proposing the prioritisation of vulnerable groups within an already vulnerable population demonstrates the poor contextualisation of the local policy responses as it has been suggested without considering the current landscape of the homelessness service sector. Given

the limited availability of shelters, bed spaces and resources, it would not be feasible to expect certain members within a vulnerable population to be prioritised above others who are in a similar position, but do not conform to the generally accepted vulnerable categories of the elderly, women, children, people with disabilities and members of the LGBTQI+ community. The misalignment presented demonstrates the importance of accurately conceptualising key terms such as vulnerability and victimisation and then appropriately contextualising for the more targeted operationalisation in policy outcomes. Amidst some positive strides, the discussion demonstrates that the formulation of the policies appears to follow a rigid and structural top-down approach, leaving very little room for flexibility or the visible inclusion of the cited stakeholder and beneficiary consultation. Furthermore, the discussion highlights the importance of accurate conceptualisation and contextualisation to ensure that it is correctly interpreted and actioned, to avoid these practical inconsistencies that could erupt into potentially volatile situations.

The final aspect concerning the process dimension, is the constrained implementation, monitoring, review and updating of the respective policy documents. The drawn-out implementation of contextually and conceptually flawed responses is of particular concern, considering the human element associated with addressing homelessness and how the success or failure of the policies can impact the well-being of people experiencing homelessness. The lack of direct policy responses is further perpetuated by the observable procedural delays in the formulation, approval, implementation and funding of the policies. For example, the Stellenbosch Draft Policy (2018) has retained its draft status since 2018 and has not been revised or updated in recent years. Similarly, the Tshwane Policy (2015), after revising the 2013 version, was only approved in 2019, alarmingly, without an allocated budget (De Beer, 2021). The Johannesburg Policy was drafted in 2022 and approved in 2024, which might not seem like a long time, but because the conceptual and contextual factors had not been markedly updated, concerns are raised regarding the effectiveness of a potentially outdated policy in the context of an ever-changing homelessness landscape. The Cape Town Policy (2013) was only submitted for review in 2020 and its revised version only released in 2024 for public commentary and subsequently approved later that same year.

Concerningly, the constrained implementation of the analysed policies indicates that the analysed documents have all lapsed in terms of their review and revision period. The Gauteng Strategy (2021-2024) has a five-year implementation plan, with no clear details regarding its review or revision. Four of the policies indicate that reviews will be conducted within a

specified timeframe, as the need arises or as per the instruction of the relevant authorities. Furthermore, another concern is the implementation of the national policy, which could suffer a similar laxed roll-out as its provincial and municipal counterparts. The implication would be that the uncritical, uncoordinated and ineffective approaches will most likely continue for the foreseeable future, and the constrained outcomes will remain a reality even when policies are absent, outdated or lapsed. The current reality cannot be considered beneficial for the required reduction or even the seemingly farfetched prevention and distant eradication of homelessness in South Africa.

Recommendations and conclusion

Following the analysis of the six policy documents and the alignment with the dimensions of the HPT, it can be deduced that these documents were indeed developed to fill the void left by absent national structures and governance around homelessness. Amidst some strengths, several shortcomings were identified and based on the nature of the analysis, valuable recommendations can be proposed by focusing on three distinct areas. The first set of recommendations includes general aspects that can be considered for the reframing of existing and future policy responses to homelessness. Secondly, based on the challenges that exist at a grassroots level, stakeholder specific recommendations have been proposed for future consideration. Lastly, the third section will focus on the silence of the policies, around the experiences of victimisation, towards the development of a victim-inclusive policy framework for people experiencing homelessness.

General policy recommendations

Data scarcity and the inability to accurately contextualise homelessness are among the most prominent challenges identified across the analysed policies. To address these shortcomings, comprehensive research on homelessness in conjunction with the identification of the strengths, weaknesses, resources and capacity available within the South African society is required. To better position policies and their intended interventions, more support for the development of a national research agenda, as proposed by the National Homeless Network is required. The agenda can be aligned with government departments and academic institutions to encourage collaboration and emphasise the shared responsibility to address the dearth of local research. To promote the relevance and urgency of research, incentives and seed money for emerging research fields related to homelessness can be used to enhance interest and participation among scholars. Through fostering a collaborative approach, mobilising the

required expertise, innovation and versatile research methods, participating stakeholders and organisations can ensure the collection of comprehensive data to aid in the development of evidence-based policies.

With a consistent influx of reliable, contemporary local research, an opportunity presents itself to refine, contextualise and accurately conceptualise homelessness within the policy space. Once a thorough understanding is established, the next logical step would be to overcome the shortcomings that stem from a lack of a universal definition. Through the exploration of viable alternatives, it is important to consider the creation of a range of definitions (Kriel, 2017; Tenai & Mbewu, 2020), that reflect the individual's orientation regarding how they are experiencing homelessness. The information, based on their lived experiences, can provide insight to stakeholders and service providers, who can use their knowledge and expertise to use the key aspects provided by the beneficiary to formulate policy and shape interventions more accurately. By promoting the use of a flexible definition, a primarily stigma driven sector could experience a significant reduction in the harmful and exclusive implications of socially constructed definitions that have been formulated based on perceptions, instead of the lived experiences and empirical data (Cronley, 2010) To guide this process, it is recommended that a more nuanced approach to defining homelessness be developed and tested, before it can be adopted in practice.

The proposed conceptual framework for the formulation of an experiential definition of homelessness will be person centred, guided by an integrative checklist which comprises the most prominent pathways into homelessness. From a practical perspective, the checklist will include the most simplistic expressions of homelessness, which is the absence of a home or adequate shelter (Obioha, 2022; United Nations, 2025). Furthermore, the checklist will include emotive responses related to feelings of safety and belonging, which are commonly associated with the notion of having a home, while also considering the elements a person experiencing homeless usually lacks within the physical, social and legal domains (Mashau, 2017). Considering the elements associated with a home, the traditional European Typology of Homelessness and Housing Exclusion (ETHOS) can be used to outline the physical elements of homelessness (FEANTSA, 2005). Moving towards a more individualised, humanistic approach which is based on the person's lived experiences, the conceptual framework will include the recognition of homelessness as an outright violation of human and constitutional rights, while extending to feelings and practices associated with navigating life as a person experiencing homelessness (De Beer, 2021). There will also be consideration around how their

homelessness experience is shaped by systemic discrimination, social exclusion and stigmatisation (United Nations, 2025). The primary motivation for the formation of an experiential definition would be to challenge societal perceptions of homelessness and initiate the process of destigmatisation in both policy and service delivery. Finally, by demonstrating the practical value of this process, the word homeless will be used as a noun, referring to the experience, instead of as an adjective which ascribes it as a state of being, ultimately defining the person based on their circumstances (Iwata, 2021). Framing homelessness as an experience emphasises that with adequate support, individuals can escape it, which could ultimately change the way homelessness is perceived and addressed.

Once the contextual and conceptual issues have been addressed, the next aspect within the homelessness policy space would be to outline and remove the use of negatively phrased and potentially harmful language used in the current policy documents. Considering the vulnerability and position of the intended beneficiaries, formal responses should adopt the use of sensitive diction. Which will allow stakeholders to remain cognisant of the power dynamics, avoid inadvertent stigmatisation and ultimately promote inclusivity in the delivery of services. Furthermore, there should be advocacy for the removal of punitive and criminalising measures from the policies, which are intended to assist and improve the lives of homeless individuals. The presence of hyper-criminogenic information and by-law considerations has the tendency to overpower the positive intent of the responses. The criminal elements can be dealt with separately and should not interfere or distract from the goal of assisting individuals to find viable and sustainable pathways out of homelessness. In as much as punitive measures are counterproductive, awareness should be created around the disadvantages of compassionate responses. Furthermore, for this area of intervention, there should be greater emphasis on the development and support for the creation of developmental and sustainable solutions (Hopkins et al., 2024). Once the inaccuracies have been addressed with regard to policy writing and planning, focus needs to be shifted to the regulation of the implementation phase. Although it is a recurring suggestion to establish regulatory and oversight boards, this will have to be reinforced and should be introduced on a national, provincial and municipal level. This will ensure that there is transparency, that stakeholders remain compliant and are held accountable to perform their intended functions within the policy space. Stakeholders should receive continuous, targeted, homelessness specific training, with rigorous alignment in terms of their core functions and the circumscribed policy directives. Furthermore, regulatory boards should be used to encourage constant communication and collaboration, which will eliminate the

detrimental silo-effect between stakeholders (Powell et al., 2021), at various levels within the homelessness sector.

With the impending introduction of a national homelessness policy framework in South Africa, there exists a need to facilitate policy coherence to ensure that existing responses are not undermined and rendered obsolete. The coherent and complementary nature should remain a priority to ensure that homelessness is addressed cohesively and concurrently. The laxed policy development, review and adoption processes will have to be addressed and streamlined, within the South African context. This was another major shortcoming identified through the analysis of the existing responses. To remain relevant, active and present within the fight against homelessness is of utmost importance.

Stakeholder specific recommendations

Albeit limited, existing research does identify problematic areas within the provision of essential services to people experiencing homelessness (Muleya & Mlilo. 2023; Weng & Clark, 2018; Wentzel & Voce, 2012). Accordingly, as part of the appraisal process, several operational considerations and recommendations have been formulated to aid in the improvement of stakeholder engagement and conduct within the homeless sector. In terms of the Department of Correctional Services (DCS), the Cape Town Strategy (2024) and the Gauteng strategy (2021-2024) are the only documents that refer to the DCS as stakeholders, who are required to assist with de-institutionalised individuals, training families of ex-offenders and tracking offenders who lack support systems prior to release. Additional considerations include:

- To investigate the number of homeless individuals who have been incarcerated for minor offences, such as those related to the violation of by-laws or the inability to pay a fine.
- To investigate the number of homeless individuals who are unable to serve non-custodial sentences due to the lack of community resources (no residential address) and the implications thereof.

The Department of Community Safety is primarily tasked with ensuing safety in shelters. Additional considerations include:

- Increase safe zones on the street, for those who are unable to access or afford shelter spaces and in areas where there are no shelters or constrained capacity.

- Mobilise SAPS, neighbourhood watch or security companies to increase street patrols, to ensure the safety of those on the street or to provide direction to safe spaces and zones.

The Department of Health should assist in streamlining mental health care services, given its emphasised and often synonymous relationship with homelessness (Pophaim & Peacock, 2021). The services, roles and responsibilities need to be carefully articulated, and the referral pathways and procedures should be clearly established. Specificity in this regard will assist in avoiding releasing someone impacted by mental health challenges back to the street or to other inappropriate spaces where their needs cannot be met and are at an increased risk for victimisation. Moreover, an additional consideration for the Department of Employment and Labour would be to establish a realistic, attainable and sustainable job market for people experiencing homelessness.

The Department of Justice and Constitutional Development (DoJ&CD) is only mentioned in the Cape Town Strategy (2024) where it is listed to "…*review application of parole conditions and addressing gaps*". With regards to vulnerability, as mentioned previously, the department can work towards including the homeless as part of the promotion of the rights of vulnerable groups and facilitate their inclusion in victim's rights and protective frameworks. Given the criminal component associated with homelessness, incurring a criminal record could be detrimental to policy outcomes, whether it was due to "survival crimes" or more serious offences. The department could intervene and provide much needed assistance for expungement applications which may lead to some relief, especially with housing and employment opportunities.

Lastly, in terms of practical considerations, effective mechanisms will have to be put in place and monitored to ensure the effective collaboration and communication between the various stakeholders, which should entail rigorous and regular reporting structures to maintain effective and accountable actors. Considering the nomadic and transient nature of the homeless, main service providers could consider the creation of mobile departments to promote the accessibility of services. Additionally, the costs involved in the provision of services by the respective actors, in the Gauteng Strategy (2021-2024), the Department of Home Affairs is the only stakeholder that provides information related to the cost of making an identity document (ID). These costs should be reevaluated and weighed against the implications of not having the financial means, which may be the case for many people experiencing homelessness.

Recommendations for the development of a victim inclusive policy framework

Based on the analysis of current policy responses to homelessness, the general silence around victimisation among people experiencing homelessness in South Africa is evident in both academic discourse and policy. To support the scant and limited local research, contemporary and holistic research is needed to offer critical insights, which highlight the urgency of the issue and encourages the pursuit of social change, to address the many injustices faced by the homeless, the formulation of more inclusive policies and interventions is necessary. To facilitate the development of a victim-inclusive policy framework, research exploring the experiences of victimisation, service needs, service use patterns and challenges related to access is a central requirement. In addition to this, engagement with relevant stakeholders, currently working in the homeless sector will assist in advocating for the need for victim-inclusive policy responses and guide in the formulation of the proposed framework. Through the processes outlined above, it will be possible to develop a contribution that facilitates the creation of more inclusive policies, services and general practice regarding people experiencing homelessness.

Conclusion

While considering the positive strides, the state's response to homelessness requires a considerable amount of reflection and subsequent reframing. Based on the analysis, it is evident that a shift towards victim inclusive and protective policy reform, that not only addresses the pathways into homelessness, but also prioritises alleviating the negative experiences associated with the condition, is required. Effective policies should be outlined by accurately contextualised and conceptualised directives, which encourage integrated and collaborative stakeholder contributions. By redefining the currently reactive policy space, one can envision moving towards successfully reducing, preventing and ultimately eradicating homelessness in a more systematic way. To reiterate, tackling homelessness is not about the reduction in visibility and provision of a shelter or advocating for special treatment. Addressing homelessness holistically is about acknowledgment, respect, dignity, protection and implementing the constitutional guarantees of a democratic country.

Appendix A:

Table 2: Thematic representation of the content in the South African policy responses to homelessness

	Theme 1: Conceptualisation of key terms	**Theme 2:** Contextualisation, background and problem statement	**Theme 3:** Strategic framework	**Theme 4:** Regulatory context	**Theme 5:** Policy parameters and scope	**Theme 6:** Relevant actors' roles and responsibilities and institutional arrangements	**Theme 7:** Implementation and action plans	**Theme 8:** Monitoring and evaluation (M&E) and policy review
Presentation of information in the policy documents								
The Gauteng City Region Strategy on Adult Street Homelessness (2021 – 2024)	Designated section titled "Definitions". The strategy conceptualises 29 key terms in a glossary list. List of acronyms.	Homelessness is contextualised in seven sections in the document. • Background • Situational analysis • Current interventions • Causes • Challenges • Patterns • Types The strategy refers to three theoretical models that explain homelessness.	The strategic framework is outlined in four sections: • Vision and mission • Objectives • Principles • Pillars of the strategy	8 legal frameworks and policies are cited.	No reference made to the scope of the strategy or parameters.	Calls for a multi-sectoral, integrated and strong coordinated structure to bring stakeholders together. Local municipality and 11 government departments/ agencies and NPOs are listed stakeholders with assigned roles and responsibilities.	As part of the "service package for the homeless", seven key areas in intervention services are identified. Outlines its implementation plan through an intake process flow diagram.	Implementation and monitoring vests with the Gauteng Homelessness Forum, guided by provincial and regional DSD and Health. Five-year implementation plan. M&E involves continuous data collection, reporting and evaluation of all activities at all levels. No set review period.

The City of Johannesburg Policy on Homelessness (2024)	Designated section titled "Glossary of terminology" conceptualises 36 key terms. Contains a preamble. List of abbreviations and acronyms.	Homelessness is contextualised in the introduction, in the context and background section. Homelessness is further contextualised as a policy problem under the strategic intent and desired outcomes section.	Outlined in the "Strategic Intent and Desired Outcomes". After the policy problem statement, the section provides additional details relevant to the strategic framework in three sections: • Purpose • Goals • Policy Statement and Intent – Desired Policy Outcomes	23 international, national, provincial and municipal frameworks are referred to under the "Regulatory Framework" section.	The policy scope and application are outlined with reference to the implementation cohort and intended beneficiaries of the policy and its subsequent interventions.	The Policy identifies the DSD and 6 other departments, with 3 sub-divisions under public safety as the key stakeholders and assigns their roles and responsibilities in the context of the policy implementation. Another 8 external stakeholders and their roles and responsibilities are outlined. Public consultation was outlined as an integral part in the policy development process.	The DSD will be responsible for developing implementation and action plans. In line with its implementation, 13 directives and interventions are listed and described. An additional 12 critical factors are listed to ensure the successful implementation of the policy. Only policy that deals with "delegation of authority" and "the contravention of the policy".	M&E framework aligns with national standards. Evaluation will be based on 7 key areas to assess the annual performance. Set for review every 3 years or when instructed by political principals.

The Street Homelessness Policy for the City of Tshwane (2015)	Designated section defines homelessness, its categories, and "home". Glossary list indicated on the content page, but missing from the publicly available version. No list of abbreviation and acronyms.	Homelessness is contextualised in two sections: • Introduction, background and purpose • Statement of Issues (context of homelessness and institutional challenges)	Three sections dedicated to strategic framework: • Purpose (included with introduction and background) • Points of departure and guiding principles • Vision, mission, aim, objectives and priorities	The Points of departure and Guiding principles section refers to the Constitution and the Tshwane 2055 Strategy. Policy analysis and its legal framework consulted an additional 32 plans, policies and legislative frameworks.	Designated section referring to the parameters or scope of application, but it does refer to key exclusions under its definition section, which is indicative of its intended scope and application: *"…This Policy is focusing on street homelessness and not on people living in informal settlements or sub-standard housing, although there are close links between these living conditions."*	Proposes institutional arrangements involving local government, civil society, private sector and institutions of higher education to facilitate successful implementation. Stakeholders include Tshwane partnership for the homeless, an interdepartmental task team: City of Tshwane, Tshwane Homelessness Forum, Academic community, private sector and the 5 government departments.	The policy action plan flows from the policy directives (priorities). It sets out 5 priority areas and tabulates the programmes, strategic indicators and responsible actors for implementation. Proposes a methodology for implementation of 7 elements to ensure effective responses rooted in a community of practice model. Provides detail on resources and funding for implementation.	Quarterly, annual and biennial reviews in consultation with other stakeholders. Policy review 2 – 3 years, informed by the methodology and shared learning that takes place within the Community of Practice. Aims to assist in the development of coherent provincial and national frameworks.

The City of Cape Town's Street People Policy (2013)	Designated section for definitions. 20 key terms in a glossary list. List of abbreviations and acronyms.	Contextualises homelessness in a section titled "Problem Statement".	Three sections related to its "Strategic Framework": • Desired outcome • Strategic intent - Integrated Development Plan - City Development Strategy - Social Development Strategy • Policy directives	Cites 4 instruments in a section titled "Regulatory Framework".	Section titled "Policy Parameters" that provides details regarding its exclusions, intended scope and application.	Provides key responsibilities for the Street People Programme, SDECD Directorate and the Displaced People's Unit, Safety and Security as stakeholders. Provides a list of 10 internal stakeholders and 8 external stakeholders who will be consulted.	Guided by 7 broad policy directives; implemented in collaboration with stakeholders. MOUs will be signed and put in place to ensure quality service delivery.	Annual implementation plans to track achievement of objectives over short, medium and long-term intervals. Tools will be used by the internal monitoring team to regularly report on policy performance. Stakeholders can initiate efficacy checks. Policy review and updated every 2 years or if evidence is provided that the outcomes are not being met.

The Stellenbosch Municipality Draft Street People Policy (2018)	Designated section for 13 definitions. "Home" is defined in the problem statement section. List of abbreviations.	Contextualises homelessness in a "Problem Statement".	5 sections relate to its Strategic Framework: • Purpose and focus • Desired outcomes • Declaration • Policy and strategic intent • Policy directives	Cites 5 instruments in a section titled "Regulatory Framework".	Includes a section titled "Policy Parameters" which provides detail regarding its exclusions, intended scope and application.	Roles and responsibilities provided for the Community Development section, Community and Protection Services Directorate (main implementer) and Protection Services Department. An additional 6 internal and 10 external stakeholders (without roles and responsibilities). Roles and responsibilities of 7 categories of stakeholders provided.	No designated section that outlines implementation or action plans; however, in the policy directives section it provides detail regarding 4 strategies, guided by possible actions and a blank column intended to indicate the relevant role players for the specified actions.	No detail regarding M&E. To be reviewed and updated every 2 years or if evidenced that the outcomes are not being met. The Community Development Section may be consulted regarding the efficacy of the policy and the extent to which it is reaching its aims.

City of Cape Town Draft Strategy to address Rough Sleeping (2024)	Designated section for 11 definitions. Additional definitions provided in the background section for: homelessness; rough sleepers (categories and demographic factors). List of acronyms. Executive summary.	Homelessness and more specifically rough sleeping contextualised in 4 sections: • Introduction • Background • Contextual issues Problem statement" subdivided into 5 domains: • Legal and regulatory alignment • Institutional responsibilities • Socio-economic and community issues • Data scarcity • Funding and resources	The Draft Strategy has four sections related to the strategic framework, which includes: • Strategic context • Desired outcome, principle and objectives, further subdivided: - Vision - Principles - Objectives • Strategic shifts • Approach of the strategy	Legal and Regulatory Context refers to constitutional guidance on provisions related to homelessness and lists a total of 27 considerations which fall within a national, provincial and local government context.	Demarcation of policy intent, further providing detail of what actions fall within and outside of the scope of implementation.	No designated section for stakeholder identified and role allocation. However, as part of its implementation plan it outlines its strategic focus and aligns it with specific departments and stakeholders, clearly demarcating their roles and responsibilities.	Three strategic focus area that involve prevention, support and reintegration, and utilisation of non-city actors. Each focus area deals with the problem areas identified in the problem statement; the document outlines its intended measures to address the problematic areas and aligns each area with the relevant stakeholders and their required contribution.	Plans to develop M&E component. Regular evaluations and reporting will ensure that the strategy is fulfilling its intended purpose. To be reviewed every 5 years, or as deemed necessary.

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Data Availability

Data sharing not applicable to this article as no datasets were generated or analysed during this study.

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ORCID iDs

Jean-Paul Pophaim https://orcid.org/0009-0001-8765-5485

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Navigating adversity: Homelessness, victimisation and systemic barriers

Abstract

The relationship between homelessness, violence and crime is often depicted as closely intertwined, however the specific nature and extent of victimisation in the lives of people experiencing homelessness remains significantly under-researched. This is particularly true in South Africa where scant and small-scaled research dominates exploring vulnerability to victimisation among homeless populations, resulting in a large contextual gap, minimising the consideration and prioritisation in mainstream legislation, policy and subsequent interventions. The present study aimed to determine the experience of victimisation and service needs of individuals by employing a survey research design with a quantitative approach, a questionnaire was used to collect data from 150 individuals, which allowed for the extraction of descriptive statistics and personal accounts to illustrate the lived experiences of respondents. The identification of unique pathways into homelessness allowed for the improved understanding of the prevalent root causes that could potentially manifest and present itself as risk factors, altering the level of vulnerability among the exposed individuals. The results revealed that a substantial proportion of the sample had experienced victimisation (59.7%). Furthermore, through an emancipatory and empowering approach, the paper incorporates valuable personal accounts from respondents based on their lived experiences facing homelessness, victimisation and the barriers they may encounter with regards to access to services.

Key words: Homelessness, adversity, victimisation, vulnerability, risk factors, systemic barriers

Introduction

Homelessness represents one of the most widespread, profound and enduring manifestations of rising inequality, which is a significant contributor to the broader societal malaise often associated with this phenomenon. Drawing on reports from the United Nations (2005) and the World Economic Forum (2021), the global homelessness population is currently situated between 100 and 150 million people, with as many as 1.5 to 1.8 billion people currently residing in egregious and inadequate housing conditions, perpetually at risk of absolute or chronic homelessness (Awad, 2023; Homeless World Cup Foundation, 2022; Olufemi, 1998,

2000; United Nations, 2025). In South Africa, there are no official estimates that fully document the true nature and extent of homelessness. Consequently, researchers and policymakers primarily depend on unofficial and voluntary estimates produced by individuals and organisations (Obioha, 2022). In the late 1990's it was estimated that there were three million people experiencing homelessness and in 2000 approximately 8 million informally housed individuals, which is most likely a reflection of the application of broad definitions, the lack of homogeneity in the homeless population and the many pathways into homelessness (Makiwane et al., 2010; Olufemi, 2000). The Human Sciences Research Council (HSRC) provided estimates on the South African homeless population, which placed it between 100 000 to 200 000 individuals (Cross et al., 2010). These figures have since set the precedent and have subsequently been widely cited in several academic and policy publications (Desmond et al., 2017; Obioha, 2022; Pophaim, 2021; Rule-Groenewald et al., 2015; Stonehouse et al., 2023; Tenai & Mbewu, 2020). Notably, both global and local population estimates remain widely contested and are considered stark underestimations, as many experts are of the opinion that the accuracy needs to be tested because conclusions in homelessness research are often based on assumptions, largely due to the high mobility of people experiencing homelessness (Awad, 2023; De Beer & Vally, 2021; Tenai & Mbewu, 2020). The obstacles associated with counting people experiencing homelessness, are characterised by several definitional challenges and the fact that the homeless are considered a 'hard-to-count' population (De Beer & Vally, 2021; Pophaim & Peacock, 2021). Within these opaque parameters, the 2022 South African Census reported a combined total of 55 719 people experiencing homelessness (Statistics South Africa, 2023), which is still considered a significant underestimation considering prior estimates, the fact that only roofless and shelter-based persons were counted, the current dire socioeconomic condition, and the sheer visibility of poverty and street homelessness in South Africa.

Although homelessness is primarily the visible manifestation of being without shelter, it is often exclusively defined as an individual who does not have access to shelter, services and basic needs (Obioha, 2022). Such reductive definitions are inadequate, as homelessness is a far more complex and harmful experience that defies the simplistic extant definitions and categorisation (De Beer & Vally, 2021; Mahlangu & Kgadima, 2021; Tenai & Mbewu, 2020). Homelessness is arguably one of the most complex concepts to define with very little consistency and universality in both its understanding and application across various contexts,

regions and countries (Frazer & Kroll, 2022; Obioha, 2022). In the absence of a universal definition, different governments and organisations apply different understandings of homelessness, which, by default, impacts the level, type and quality of interventions, as well as who is eligible for support (Obioha, 2022). Importantly, the experience of homelessness is not fully captured without a definition that considers factors beyond the deprivation of physical shelter (United Nations, 2025). By reducing the matter to a lack of shelter, any policy and intervention that stems from a narrow definition will not only perpetuate dominant views of homogeneity but also fail to establish a realistic baseline and reflect a clear understanding of what homelessness entails (De Beer & Vally, 2021; Sadiki & Steyn, 2021). To counter the significant shortcoming, the leading proposition is that a single definition may be inappropriate and to respond to this a range of definitions may be needed (Kriel, 2017; Tenai & Mbewu, 2020).

With a considerable dearth of local research at the forefront (Pophaim & Peacock, 2021; Pophaim, 2021; Sadiki & Steyn, 2021), the notion of the homeless victim continues to evade inclusion in mainstream definitions, frameworks and academic discourse. This is largely due to the fact that it falls outside of the socially constructed interpretation of the 'ideal' victim, resulting in insufficient attention and acknowledgment for the plight of the homeless victim, thereby significantly excluding certain individuals and hampering the application of mainstream frameworks and the development of inclusive and protective responses (Pophaim & Peacock, 2021; Pophaim, 2021; Scurfield et al., 2004). In an attempt to better understand homelessness, pathway research is a critical source of information with regards to how an individual ended up homeless, the experiences they may have to endure which prolong the episode and most importantly, what could possibly be viewed as viable pathways out of homelessness.

As with many other factors associated with experiencing homelessness, there is no single pathway and each individual presents with a unique factor or combination of factors that shape their developmental trajectory toward the onset of homelessness (Desmond et al., 2017). Most pathway research tends to be rather isolated and limited in scope, as it mainly focuses on one category of pathways, while failing to demonstrate the complex interaction and inextricable link between the various factors (Piat et al., 2015). Several local reports (Moloi, 2025; Mthembu et al., 2025; Pophaim & Peacock, 2021; Statistics South Africa, 2023; Tenai &

Mbewu, 2020), highlight the common pathways associated with homelessness, which include unemployment, poverty, mental and physical health challenges, childhood adversity, family dysfunction and abuse and other more systemic factors such as apartheid capitalism, poorly implemented policies and housing insecurity. A valuable consideration lies in the importance of understanding how these factors shape the experience of homelessness, not only as initial causes, but how it is expressed and the negative outcomes that manifest as a result of their exposure to shared risk factors for both homelessness and victimisation (Charlton & Rubin, 2021; Tong et al., 2021). Homelessness, by its very nature, should be regarded as a form of extreme victimisation, which constitutes a *prima facie* violation by subjecting affected individuals to gross human rights violations, encompassed by the denial of their basic human and constitutional rights (United Nations, 2025). The experience of homelessness is fraught with complex, interrelated pathways which, amongst others, determine causality and influence experiences within the homelessness episode (Pophaim & Peacock, 2021). Violence and crime are daily challenges, and as risk factors, these pathways often render a person experiencing homelessness particularly susceptible to criminal involvement and vulnerable to harassment, discrimination, stigmatisation, exploitation and victimisation (Tenai & Mbewu, 2020). The criminal component of homelessness is often overemphasised and as such the population is overly criminalised and regarded as problematic, subjected to a variety of punitive measures that further ostracise and perpetuate their vulnerability, marginality and social exclusion (Hopkins et al., 2024; Owadally & Grundy, 2023; Pophaim, 2021). The dearth of local research on homelessness and its related conditions (Pophaim & Peacock, 2021; Pophaim, 2021; Sadiki & Steyn, 2021), is considered a major hinderance in the development of inclusive and protective evidence-based policy and interventions.

While offering only a preliminary examination, notable South African studies on homelessness, consistently reveal the presence of a circular definition, which highlights homelessness as an extreme form of victimisation and at the same time, recognises victimisation as a high-risk outcome commonly associated with experiencing homelessness. In 2016, Sadiki reported on experiences among rural and urban homeless persons, revealing that 52.9% (n=70) of the sample reported experiencing victimisation, with a higher percentage from the urban sample (n=24; 60.0%). In 2019, Pophaim reported on the experiences of 17 homeless individuals, revealing that 13 participants (76.5%) experienced victimisation since becoming homeless. More recently, Mthembu (2023), among 17 homeless individuals found similar proportions of

extreme physical abuse and violence (58.0%), verbal harassment (29.0%), property theft and damage (24.0%) and sexual harassment (12.0%). Building on these findings, the current study aims to determine the trends of victimisation in the context of a larger sample, while offering a holistic perspective of the interplay between pathways, risk factors and inevitable negative outcomes related to homelessness. In terms of vulnerability, it is generally accepted that the homeless should be categorised as having an absolute sense of vulnerability and defencelessness by virtue of being overly exposed to proximal risks (De Beer & Vally, 2021; Pophaim, 2021). Compared to members of the general public, prominent research, albeit dated, reports that people experiencing homelessness are 13 times more likely to experience violent crime and 47 times more likely to be a victim of theft (Scurfield et al., 2004). Additional research confirms this disparity, as violent victimisation among the homeless was estimated to range between 14 and 21% in comparison to 2% of the general public (Meinbresse et al., 2014). An interesting comparison can be drawn with regards to the latest local trends reported in the Victim of Crimes Survey (2023/24), which indicates that over a 5-year period, 2.8 million individuals experienced theft of personal property, 1.1 million individuals experienced street robbery, 700 000 individuals experienced consumer fraud, 650 000 individuals experienced assault, 287 000 individuals experienced hijacking, and 116 000 individuals experienced a sexual offence. Although the report does cite a concern regarding underreporting and an increase in most categories (Maluleke, 2024), the percentages of victimisation (4.64 to 0.19%) are comparatively low when considering a population size of 63.21 million people.

Based on these experiences, an additional concern that remains unresolved is the lack of inclusive and protective responses to homelessness in South Africa (Pophaim, 2021). Among the many challenges faced by people experiencing homelessness, their inability to navigate mainstream systems contribute to their persistence of their vulnerability (De Beer & Vally, 2021). Accordingly, any intervention directed at addressing homelessness should be cognisant of the persistent threat of vulnerability to victimisation, to develop mechanisms that both address and overcome such vulnerability (De Beer & Vally, 2021). The current study aims to provide justification for the consideration of vulnerability and the contextualisation of the experiences of victimisation within the homelessness policy domain and beyond.

Another crippling effect of a heightened vulnerability and ineffective policies is the presence of a variety of systemic barriers related to the provision and accessibility of services among

people experiencing homelessness. A common misconception, fuelled by the neoliberalist notion of *responsibilisation,* which shifts social responsibility to the individual, perpetuates the idea that homelessness is a choice (Weng & Clark, 2018). It reduces homelessness to an issue of personal mismanagement, implying that if an individual ends up homeless, it is due to their own resistance or inability to engage in behaviours that lead to productivity (Weng & Clark, 2018). However, not much is known about the patterns of service use, shortage of services and compounding systemic barriers confronting the homeless, especially within the post-victimisation context. As a result, it is essential to investigate the patterns of access and engagement with services for the duration of a homelessness episode to determine the nature and extent of potential systemic barriers. Through this approach it can be determined to what extent stigma and negative stereotypes defines the interaction between client and service provider and whether this has an impact on service delivery and the willingness to seek and utilise services (Weng & Clark, 2018). With this information it becomes possible to facilitate the foundational elements to support the creation of holistic, inclusive, anti-oppressive responses in both policy and practice.

Methods

The study aimed to determine the experiences of victimisation and service needs of individuals experiencing homelessness. Guided by a survey research design with a quantitative approach, a questionnaire was utilised to collect from 150 respondents. Personal accounts, from open-ended questions were used in conjunction with the descriptive statistics to illustrate the lived experiences of the respondents. Due to the transient, mobile and elusive nature commonly attributed to the homeless population, location sampling was used, which is a popular sampling choice for hard-to-reach sample populations (Schepers et al., 2017). Shelters and service centres in Bloemfontein (Free State) and Cape Town (Western Cape), South Africa, were approached to act as a central space where the researcher could identify and recruit respondents when they are there to make use of the various essential services offered by the respective organisations The inclusion criteria were that individuals had to be 18 years or older, could communicate in English and were currently homeless, previously homeless, or seeking shelter assistance while on the verge of homelessness.

The questionnaire consisted of 100 questions (dichotomous, scale and open-ended questions) that were divided into four sections: biographical information, information related to the onset

and experience of homelessness, experiences of victimisation (childhood and during active homelessness), access to services and treatment by service providers, and lastly, service needs following victimisation. Before the main data collection phase, the researcher conducted a pilot study with ten respondents to test the questions and make any changes if necessary. The respondents, with the researcher present, had no problems understanding and providing answers for the questions, therefore, no revisions were necessary. The research sites were a place where respondents felt comfortable and safe and it was easy to see that they are open and trusting to anyone who is introduced to them by the service providers who they engage with daily. The researcher built a level of rapport with the prospective respondents to ensure that they are comfortable and feel safe to engage and provide rich information.

At the Bloemfontein site, respondents were approached on days they would come for Bible study or for those who wanted to make use of the shower facilities. At the Cape Town site, clients who came to make use of essential services and those who came to attend programmes were approached and recruited for the study. Respondents were informed about the purpose of the study, after which informed consent was obtained before each questionnaire was completed. Respondents were informed that participation was completely voluntary, with no direct benefits. They could refuse to answer questions that made them feel uncomfortable and they could withdraw at any point in time, without any consequences. The respondents were allowed to read through the information document and ask the researcher questions, if anything was unclear. The researcher would pause and allow respondents to compose themselves in cases where questions made them emotional. One participant started to participate but decided halfway through that she wanted to discontinue, due to the nature of the questions about childhood adversity. The respondent stated that the information provided thus far could be used, but she would prefer not to talk about her childhood or her time on the street. After explaining the nature of the study to a few prospective respondents, they also decided that they would rather not participate as they were not comfortable talking about their experiences. The withdrawal and refusal rate for the study was relatively low (n=5).

The data gathering methods allowed for the collection of complete and comprehensive information and potential developmental/educational/literacy challenges were averted by actively facilitating the completion of each questionnaire. In survey research, respondents often venture into storytelling to motivate their responses, which was true and extremely important

to most of the respondents. Even in cases of dichotomous questions, respondents felt the need to explain and share a story to justify their response. To capture the information, a voice-recorder was used in some cases (permission requested and obtained first) and in other cases, where respondents were not comfortable with the recorder, extensive notes were made to ensure that the entire statement of the respondent was documented. The inclusion of this flexible element allowed respondents to feel heard as many expressed that the freedom to talk and share their experiences was therapeutic. Additionally, the personal accounts from the open-ended questions enriched the study by amplifying the voices of people experiencing homelessness and addressed a primary shortcoming of survey research by providing in-depth insights to inform more targeted and nuanced interventions.

The questionnaires were completed based on what made the respondents feel comfortable. The researcher acted as facilitator in cases where respondents felt that they preferred to complete the questionnaires themselves (self-administered), which empowered respondents to know that they were able to contribute independently. In cases where respondents were not able to complete the questionnaire (either because they did not understand or had literacy issues), the researcher would treat it as a face-to-face interview and read each question with the respondent. For those who requested to complete the questionnaires on their own, the researcher would go through the document to make sure that all questions were answered before the session was concluded.

The data was analysed using the Statistical Package for Social Sciences (IBM SPSS (v29.0.0.0 (241)). The responses were captured in SPSS and an analysis was run to provide descriptive statistics for questions relevant to the aim of the study. The data and set variables were checked and data cleaning was performed to ensure that there were no missing data. The data are presented in nested frequency distribution tables to illustrate the results. In addition to the ethical considerations described above, the study adhered to the standard ethical considerations that ought to be considered when gathering information from human subjects, namely gatekeepers' access, informed consent, voluntary participation, no harm and deceptive practices, confidentiality and the availability of debriefing services (counselling psychologist and a social worker). To ensure confidentiality, questionnaires were assigned numbers and pseudonyms were allocated for the purposes of presenting selected responses to the open-ended items provided. All information and consent forms containing personal information were stored

in hardcopy in a secure location. Full ethical approval was provided by the University of the Free States' General/Human Ethics Committee (GHREC) with ethical clearance number UFS-HSD2023/1848.

A total of 150 respondents participated in the survey, the sample was diverse and the majority was made up of persons from Cape Town (n=121; 80.66%). To align with the focus of the study, emphasis will be placed on factors that are dynamic and modifiable (situational and spatial, cumulative, individualistic, criminogenic and other contextual factors) within a policy space, instead of static demographic characteristics. Therefore, it was decided to only present the relevant demographic traits as part of the sample description, which could be used to draw comparisons at a later stage. In terms of gender, males constituted the majority (n = 98; 65.3%) while females were less represented (n=52; 34.7%) (see Table 1). The skewed gender-representation aligns with the 2022 South African Homelessness Census, which revealed that males made up 70.1% of the population, compared to females who were at 29.9% (Statistics South Africa, 2023). The respondents ages ranged from 18 to 74 years old, with an average age of 35.6 years (standard deviation 7.8 years). The language profile included five of the 12 official languages, with English being the highest ranked in the sample. With reference to population group (race), the sample does not reflect the national population profile of people experiencing homelessness. 'Coloured[1]' (n=110; 73.3%), was substantially higher than the other population groups recorded in the study, which is understandable given the groups representation in Cape Town (35.0%) (City of Cape Town, 2023), where the majority of the sample was drawn. In terms of nationality, the vast majority were South African citizens. Most respondents were single, and the majority completed secondary school grades.

Table 1: Sample description

	n	%
Gender		
Male	98	65.3
Female	52	34.7
Age (per 5-year category)		
18 – 22	8	5.3
23 – 27	12	8.0
28 – 32	24	16.0
33 – 37	45	30.0
38 – 42	42	28.0

[1] Denotes persons from a mixed-race heritage in South Africa

43 – 47	10	6.7
48 – 52	6	4.0
≥53	3	2.0
Language		
English	81	54.0
Afrikaans	39	26.0
Sesotho	15	10.0
isiXhosa	11	7.3
Setswana	4	2.7
Population group		
Coloured	110	73.3
African	34	22.7
White	5	3.3
Indian	1	0.7
Nationality		
South African	149	99.3
Non-South African	1	0.7
Relationship status		
Single	136	90.7
Married	7	4.7
Divorced	5	3.3
Separated	1	0.7
Widowed	1	0.7
Highest level of education		
Primary education	13	8.7
Secondary education	123	82.6
Tertiary education	13	8.7

Results

The following section presents the results of the survey, which includes the various pathways and prominent factors identified within the context of the respondent's lived experiences as an individual at risk of, previously or currently experiencing homelessness. The results further expand on the service usage experiences and barriers encountered by respondents. Where the data for open ended responses are provided, it should be noted that the examples are merely illustrative and not proportionally weighed, therefore the n-values and percentages are not consistently included.

Experiential definition of homelessness

In constructing an experiential definition of homelessness, there was a high level of reporting on all factors provided on the 'generic' checklist (Table 2). Struggles with substance abuse and

unemployment were recorded as the most prevalent factors (n=120; 80.5%), followed by feelings of hopelessness and loss of identity and dignity (n=114; 76.5%)

Table 2: Factors that define the respondent's homelessness experience

	n	%
Struggles with substance abuse	120	80.5
Unemployment and poverty	120	80.5
Feelings of hopelessness	114	76.5
Loss of identity and dignity	114	76.5
Disconnection from the community, family and friends	113	75.8
Lack of stable housing	112	75.2
Isolation and loneliness	105	70.5
Lack of access to basic needs	103	69.1
Insecurity and fear	102	68.5
Feels excluded, like an outsider, hated by society.	96	64.4
Barriers to education and employment	85	57.0
Invisible to society	84	56.4
Limited access to services	82	55.0
Struggles with mental and physical health	66	44.3

Pathways into homelessness

Pathways into homelessness represent the reasons or causes of homelessness. Table 3 presents these most prevalent causes with alcohol/substance use (n = 102; 69.8%) featuring as the main pathway, followed by employment (n = 79; 53.0%) and family conditions (n = 64; 43.0%).

Table 3: Pathways into homelessness[2]

	n	%
Alcohol/Substance use	104	69.8
Unemployment	79	53.0
Domestic/Family conditions	64	43.0
Childhood adversity	51	34.2
Parental death/abandonment	51	34.2
Poverty	41	27.5
Lack of housing	40	26.8
Incarceration	13	8.7
Mental health challenges	10	6.7
Physical health challenges	4	2.7

[2] Respondents were able to indicate more than one pathway; the percentages represent the total number of responses and not the total number of respondents.

Risk factors for victimisation

The following section reports on the results related to elements within the lives of the respondents' that could potentially influence their vulnerability to stigmatisation, discrimination, harassment, exploitation and/or victimisation.

Situational and spatial vulnerabilities

Situational and spatial vulnerabilities refer to elements related to the respondent's current 'residential' status, level of sociality, sense of community and places where they feel/felt safe and unsafe. The places reported on are elucidated using through open-ended responses. Most respondents are currently shelter based (n=87; 58.0%), with a smaller proportion still on the street (n=24; 16.0%) and back home (n=20; 13.3%). With regards to their level of sociality, most of the respondents spend their time alone or with a group of people (n=58; 38.9%, respectively). More than half of the sample reported feeling a sense of community, where they seek refuge/reside (n=77; 54.2%).

Table 4: Situational and spatial factors identified by respondents

	n	%
Current 'residential' status:		
Shelter	87	58.0
Street	24	16.0
Back home	20	13.3
Transitional shelter	18	12.0
Safe house	1	0.7
Time spent:		
Alone	58	38.9
With a group of people (more than two people).	58	38.9
With another person (two people only).	33	22.1
Sense of community	77	54.2

In response to the open-ended questions, respondents provided a variety of places where they feel/felt the safest, which broadly included public and semi-public places such as the gardens[3], shopping centres and garages[4]; service-linked spaces such as shelters, churches and transitional homes; social spaces such as with friends, family and group affiliations (gangsterism) and some

[3] Refers to a public or city park or botanical gardens.
[4] Refers to a petrol or gas stations.

mentioned private spaces such as at home, in tents or alone and hidden. Due to the nature of homelessness, some reported that they never really cared about safety, as mentioned by R30: *"…I never really cared about safety, mainly drugs".*

When asked where they feel/felt unsafe, the respondents mainly mentioned criminal related contexts, such as while selling drugs, gang zones (turf wars and enemy territory) and at drug houses/dens. While others identified specific danger prone areas or activities such as on the street, under a bridge, in the city centre, traveling to different parts of the city and being around strangers or the police. One response in particular, is illustrative of the daunting nature of homelessness, R62: "*everywhere, to live like this is not safe*".

Socioeconomic and coping vulnerabilities

Socioeconomic and coping vulnerabilities are defined by the respondent's employment status and the nature of the activities they would engage in to find food and money, which was further elucidated through open-ended responses. Most of the respondents were unemployed (n = 101; 67.3%) or had piece jobs[5] (n = 29; 19.3%), while the remaining respondents indicated having contract employment (n=11; 7.3%) or being permanently employed (n=6; 4.0%). Very few respondents selected other (n=3; 2.0%), which provided or currently provides sustenance during their respective homelessness episodes.

The following open-ended responses provides contexts for the type of activities the respondents engaged in, which includes piece jobs such as packing, parking and guarding cars, cleaning houses and yards, washing cars and taxis, plaiting and cutting hair, working in shops and running errands and being a messenger for shop owners. The street-based strategies included begging, 'skarreling'[6] and scratching in refuse bins. The respondents reported to engaging in informal trading and recycling scrap and even selling some of their personal belongings (valuable items), while it was mostly retrospectively reported, some respondents shared that they would often engage in criminal or high-risk activities such as gangsterism, sex work, robbing people, stealing, shoplifting and breaking into houses. The vast majority reported to rely heavily on social and institutional support, which includes support from family and friends,

[5] Refers to informal and odd jobs
[6] Refers to the set of survival strategies used and often includes begging and scavenging.

government grants, some had boyfriends that provided for them, while on the street, shelters, soup kitchens, service centres and the church.

Some of the respondents provided more detail regarding how they would find food or obtain money on the street, as reported by R34: "…*I used to sell copper in large amounts, but money was never a problem to support my addiction, the gang used to provide*" and R124: *"Selling items, stealing, robbing, soup kitchens, begging, manipulation and so many other things".*

Cumulative, social or relational, individualistic and criminogenic vulnerabilities

The following section includes cumulative risk factors, such as Adverse Childhood Experiences (ACEs), social or relational vulnerabilities, which refers to their contact with relatives. Individual level factors included health status, presence of challenges and the presence and frequency of alcohol consumption and substance use. Lastly, the presence of criminogenic factors that lead to their arrest and/or incarceration as well as the nature of their criminal engagements which resulted in an arrest or incarceration. Most of the respondents experienced some sort of adversity during their childhood years (n=132; 86.6%). The greater proportion of the respondents perceived their health status as 'good' (n=59; 39.3%). More respondents indicated that they use substances (n=119; 79.3%), with the highest frequency being multiple times a day (n=87;73.1%), compared to those who reported consuming alcohol (n=83; 55.3%) A high proportion of the sample had been arrested (n=114;76.0%), more than once (n=47 ;41.2%) compared to a lesser proportion who have been incarcerated (n=70;47.3%) at least once (n=27; 38.6%).

Table 5: ACEs, family contact, health, substance use and Criminal Justice involvement

	n	**%**
ACEs	132	88.6
Contact with relatives	111	74.0
Health status:		
Excellent	42	28.0
Good	59	39.3
Average	37	24.7
Below average	12	8.0
Physical health challenges	66	44.0
Mental health challenges	22	14.7
Alcohol consumption	83	55.3
Frequency of consumption		
At least once a day	12	14.6
Multiple times a day	7	8.4

Once a week	33	40.2
Multiple times a week	11	13.4
Once a month	14	17.1
Multiple times a month (not weekly or daily)	4	4.9
Infrequent consumption	2	2.4
Substance use	119	79.3
Frequency of use		
At least once a day	18	15.0
Multiple times a day	87	73.1
Once a week	7	5.8
Multiple times a week	4	3.3
Once a month	3	2.5
Multiple times a month (not weekly or daily)	0	0
Infrequent use	0	0
Arrested	114	76.0
Frequency of arrests		
Once	24	21.1
More than once	47	41.2
More than five times	43	37.7
Incarcerated	70	47.3
Frequency of incarceration		
Once	27	38.6
More than once	24	34.3
More than five times	19	27.2

The nature of the criminal activities varied appreciably and included which can be broadly clustered as interpersonal crimes: murder and attempted murder, rape, assault with intent to do grievous bodily harm (GBH), common assault and intimidation, domestic violence and gangsterism (turf wars and fights). Economic offences: armed robbery, hijacking and motor vehicle theft, housebreaking, shoplifting, possession of stolen property, cable theft, drug dealing, sex work (including public indecency), trespassing and vandalism, outstanding fines and loitering. Substance-related offences: possession of drugs, drunk and driving (linked to hijacking offence), high and under the influence in public and other offences related to the violation of COVID lockdown regulation, disturbing the peace and possession of firearms, ammunition and dangerous weapons.

Contextual vulnerabilities

The following section reports on context specific, interconnected vulnerabilities commonly associated with homelessness. The results indicate that the majority of respondents consider themselves vulnerable (n=83;55.7%) with high feelings of discrimination (n=111;74.5%). The

respondents show a limited amount of knowledge and awareness about their rights (n=66; 44.3%) and the existence of by-laws (n=53;35.6%). While many of them report to know where to go for assistance, post victimisation (n=100; 67.1%), only a few feel that there are enough support services available (n=46;30.9%). Notably, perceptions related to the acknowledgement of their constitutional rights (n=37; 24.8%), sufficient protection (n=23; 15.4%) and general empathy (n=19; 12.8%) were considerably low.

Table 6: Vulnerability, discrimination and support

	n	%
Perceptions of vulnerability:		
Vulnerable	83	55.7
Neutral	35	23.5
Not vulnerable	31	20.8
Feelings of discrimination	111	74.5
Knowledge on where to go post-victimisation	100	67.1
Comfortable and safe to access services	92	62.2
Information and knowledge about rights	66	44.3
Awareness of existing by-laws	53	35.6
Enough support services post-victimisation	46	30.9
Respect and acknowledgment of constitutional rights	37	24.8
Enough protection for the homeless	23	15.4
Perspectives on general empathy	19	12.8

Prevalence and trends of victimisation experienced by respondents

Central to the focus of the current paper, more than half of the respondents confirmed that they had been victimised while experiencing homelessness (n=89; 59.7%). The types of victimisation differed considerably, with physical (n=64; 43.0%) being the most prevalent typology. Nearly one in four respondents indicated that they experienced victimisation daily (n=21; 23.9%).

Table 7: Experiences of victimisation[7]

	n	%
Experiences of victimisation	89	59.7
Types of victimisation:		
Physical	64	43.0
Verbal	58	38.9
Multiple victimisation	41	27.5
Sexual	14	9.4
Other	1	0.7
Frequency of victimisation:		
Daily	21	23.6
Multiple times a day	8	9.0
Weekly	19	21.3
Multiple times a week	6	6.7
Monthly	5	5.6
Multiple times a month (not weekly or daily)	9	10.1
Occasional/Infrequent	21	23.6

For additional insight with regards to victimisation experiences, with a series of open-ended questions, respondents were requested to share information that could contribute to the development of a perpetrator profile for their experiences of physical, sexual and verbal victimisation. Additionally, they were asked how they felt afterwards, if they told anyone or asked for help, how they coped and if they adopted any risk avoidance strategies after experiencing victimisation. For this line of questioning, the response rate was somewhat limited, which was largely due to the degree of reluctance to re-engage with traumatic experiences and risk having the associated negative feelings resurface. Physical victimisation (n=65) by males (n=58), as the most frequent perpetrator; perpetrators were usually older than the victims (n=36), most frequently identified with the 'coloured' population group (n=32) and were mostly romantic partners (or exes) of the victims (n=15). With regards to sexual victimisation (n=13), all the perpetrators were male (n=13), mostly older than the victims (n=9), from the 'Coloured' population group (n=9) and have a romantic history with the victim (boyfriend, ex-boyfriend or a child's father) (n=4). Verbal victimisation (n=48), males were

[7] [7] Respondents could select more than one option to demonstrate the type of victimisation they experienced (therefore, responses do not equal 100%)

the most common perpetrators (n=37), older than the victim (n=31) and identified with the 'coloured' (n=28) population group. Most of the perpetrators of verbal victimisation were from the community, family, friends or an acquaintance of the victim (n=13).

Table 8: Perpetrator profile[8]

Physical victimisation (n = 65)							
Gender	**n**	Age	**n**	Population Group	**N**	Relation to you	**n**
Male	58	Older	36	Coloured	32	Romantic partners (including exes)	15
Female	2	Younger	9	African	12	Gang related	14
Male & Female	2	Same age	3			Community, family, friends and acquaintances	14
		Young & Old	6			Strangers/No relation	13
						Security/Law enforcement/Police	3
						Another homeless person	2
						Clients (sex work)	1
Sexual victimisation (n = 13)							
Gender	**n**	Age	**n**	Population Group	**n**	Relation to you	**n**
Male	13	Older	9	Coloured	9	Romantic partners (including exes)	4
		Younger	1	African	2	Strangers/no relation	3
		Young & Old	1			Friend/acquaintance	2
		Same age	1			Gang related	2
						Clients (sex work)	1
						Drug dealer	1
Verbal victimisation (n = 48)							
Gender	**n**	Age	**n**	Population Group	**n**	Relation to you	**n**
Male	37	Older	31	Coloured	28	Community, family, friends and acquaintances	13
Male & female	7	Younger	6	African	7	Romantic partners (including exes)	12
Female	4	Young & Old	6	White	1	Stranger/No relation	7
		Same age	2			None identified	6
						Gangsters	3

[8] Responses in table 8 to not equal the total n-value as some respondents did not provide information, while those who did provided additional information.

				Another homeless person	2
				Clients (sex work)	1
				Law enforcement and police	1

Respondents who experienced victimisation (n=89; 59.7%) were asked how they felt after the experience, a range of responses were provided (n=80), which can be broadly categorised under anger, aggression and frustration; sadness, numbness and feelings of hopelessness (including suicidal ideation); fear, vulnerability and insecurity; pain, betrayal, violated and guilty and other forms of emotional responses, such as R38 who said "*I felt like a criminal*". Among those who provided responses (n=80), some respondents simply indicated yes (n=35) or no (n=44) and one respondent (R129) stated that *"I was the lesser person. I had nowhere to go".* The support mechanisms included the police, shelters, rehabilitation centres, hospitals, case workers, family, friends and gang associates. Some of the respondents received formal assistance R29 "*...the police arrested them*", while others did not, R113 "*yes, I went to the police, but they did nothing*". The respondents who did not tell anyone, or ask for help also mentioned feelings of fear, guilt and embarrassment. Coping mechanisms identified (n=77) mainly included alcohol and drug use (n=37), reaching out to family (n=1), turned to religion (n=3), resorted to acceptance and avoidance (n=22) as communicated by R3: *"...told myself its part of life on the street*" and R124 "*...part of the lifestyle, life of survival*". Others resorted to retaliation or joined a gang for protection (n=2) as reported by R123 "*..I became affiliated with the American gang*", while others started going for therapy and the shelter or joined programmes to cope. Some respondents did not cope at all, such as R95 "*...not so well, just keeping a happy face for my kids*".

Respondents were requested to share whether they adopted any risk avoidance strategies, post victimisation (n=71). A few of the respondents reported to doing nothing (n=14), R134 stated that "*...I am too afraid to leave him*", in response to how she could possibly reduce her experiences of victimisation and R92 reported that he "*...dealt with it and just got used to it*". Some indicated that they tried to hide away, move or simply avoid the perpetrator(s) (n= 7), as reported by R135 "*...I tried to avoid them. When its war its hard*" [gang fights] and R128 "*...avoided them and that places. Just for a little bit*". Other respondents reported more advanced strategies that involved becoming more selective, vigilant and observant (n=7) such

as, R114 "*...once I found a proper sleeping spot, it became easier*"; R35 *"...woke up earlier, hid my belongings and move to a different area"* and R21 "*...leave the drugs, when you have to walk*". Others resorted to seeking assistance from service providers (n=4), which included going to a shelter, counselling, law enforcement and the police.

In addition, some respondents adopted negative strategies, including, substance use, robbing people (crime), retaliation and defiance (n=10), illustrated by R124 "*…I became the 'ice-queen', men couldn't touch me anymore*"; R59 "*...they tried but I always defended myself*" and R123 *"...I became affiliated with the American gang* [protection]*"*. Some victimisation experiences had a more personal component, where the perpetrator(s) were the partners of the victims. In such instances, respondents reported to 'break up' with the perpetrator to reduce exposure to victimisation (n=4). In line with some of the positive shifts (n=3), R90 stated that she "*…decided to change my life*"; R112 *"...I tried to get out of the gang, I even burnt the tattoo out while I was high"* and R27 stopped *'selling herself'* and moved in with her partner. The remaining two responses did not fit into any of the categories, R111 stated that getting away from the risk was challenging *"...I ran my own gang, so it was difficult to leave"* and R110 *"...I tried doing everything they asked of me, but it was never enough"* [referring to the hostile living conditions while at risk of becoming homeless].

Respondents were asked who they thought victimised people experiencing homelessness the most (n=98), the responses included intra-group violence (n=21), as reported by R119 *"...homeless victimises homeless"* and R25 *"...homeless bully one another"*. Other common perpetrators include law enforcement/security guards/police (n=30) and gangsters (n=30), as reported by R3 *"...gangsters are the most dangerous"* and R9 *"...gangsters like the BTKs* [Born to Kill[9]], *they have no mercy"*. Some of the respondents categorised their perpetrators as authority figures or those who are privileged and wealthy (n=13) with specific reference to family members, shop owners and members of the general public and the community (n=21). The remaining responses included drug dealers, people who do not care, understand or are ignorant about what homelessness entails or those who are arrogant toward people experiencing homelessness (n=10), as reported by R84: *"...people who think they are better than you and think we can do nothing, because we have nothing*" and R64*"...people that*

[9] South African street gang

doesn't know what we go through". Another respondent who was victimised by her clients (sex work), R27 simply said *"…men"* and R37 *"…anyone, the homeless are desperate"*.

The main reasons why others target people experiencing homelessness were revealed to be related to the lack of protection, vulnerability and exposure to gangsters (n = 58). The following responses reflect each element of the theme in terms of the lack of protection: R131 expressed that people experiencing homelessness are the *"…most vulnerable, no protection or home to lock the door";* and R43: *"…no protection, we have nowhere else to go".* Vulnerability: R65 *"because we are so vulnerable"* and R35 *"…we can't really complain, don't know our rights and we are easy targets with some property from skarreling".* Exposure to gangs, R33 *"…gangs skarrel and prey on the vulnerable, easy targets"*; R125 *"…we are on the street, where they come looking for trouble. I was always alone, and they were always a lot"* and R102 *"…they think you got money, from begging".*

The next set of reasons relate to the perception and treatment of the homeless, rooted in prejudice, social exclusion, stigma, discrimination and misconceptions, which can be reflected through the following personal accounts. R34 *"…some are weak, don't know their rights, police don't like you, due to gang affiliation and they make you wash vans"*; R91 *"…they see us as less. We've got nothing. You can do whatever you want with us"*; R69 *"…I don't think they target us. I think it's because they are not well informed"* and one simple response from R29 *"…because we are homeless".* Some respondents provided justification related to precipitative activities they engage in, ranging from begging to more serious activities such as being deceitful and committing crime. R64*"…the way we think and how we throw ourselves away. Drugs and gangsterism"*; R36 *"…push away people that cares for us"* and R26 *"…they hurt me for revenge".* Lastly, with reference to intragroup violence (n=5) respondents reported that it was mainly about survival, as evidenced in the following responses, R130: "…*survival of the fittest, weak and vulnerable, homeless have to fight for survival* [for food and where to sleep]" and R128 "…*when you are new on the street…they also hurt* [you]".

Service use, accessibility and systemic barriers among people experiencing homelessness

Roughly one in three respondents received government support (n=44; 29.5%), while slightly more than two thirds expressed positive feelings towards shelters (n=106; 71.1%). The majority of respondents reported that they will not report victimisation to the police (n=74; 49.7%), which was met with critically low feelings of safety (n=28; 18.9%) and disproportionately high

knowledge (n=100; 67.1%) and experiences (n=82; 55.0%) of ill-treatment and victimisation by the police. While the majority of respondents attempted to access health care (n=114; 76.5%) a relatively similar proportion, reported opposing views of easy access (n=69; 46.3) and challenging to access (n=50; 33.6%). Unlike with SAPS, although respondents reported low feelings of safety at healthcare service providers (n=39; 26.4%) and equally low levels of having knowledge of (n=43; 28.9%) and personal experience (n=30; 20.1%) of ill-treatment and victimisation were reported.

Table 9: Service use and barriers

	n	%
Social support services		
Government support	44	29.5
Government interaction	54	36.2
Feelings of safety (social welfare)	87	58.4
Feelings towards shelters		
Negative	6	4.0
Neutral	37	24.7
Positive	106	71.1
Legal, protective and safety services		
Likelihood of reporting victimisation to SAPS:		
Very likely to report victimisation	38	25.5
Not sure if they will report	37	24.8
Will not report at all	74	49.7
Feelings of safety (SAPS)	28	18.9
Knowledge of ill-treatment and victimisation (SAPS)	100	67.1
Personal experience of ill-treatment and victimisation (SAPS)	82	55.0
Health care services		
Attempted to access healthcare	114	76.5
Degree of accessibility:		
Easy to access	69	46.3
Neutral (depends on the circumstances)	30	20.1
Challenging to access	50	33.6
Feelings of safety (Health care services)	39	26.4
Knowledge of ill-treatment and victimisation (Health care services)	43	28.9
Personal experience of ill-treatment and victimisation (Health care services)	30	20.1

Building on the evidence provided by the descriptive statistics in Table 9, the following personal accounts assist in contextualising the nature of the engagements between various service providers and the respondents, thereby offering deeper insight into their individual experiences. With reference to the nature of interactions with the government

(departments/officials), in line with the minimal support and interactions reports, respondents provided both positive and negative accounts, which can be seen in the responses by R33 *"…I've been to home affairs, social welfare (SASSA), they helped me*" and R15 *"…I asked social workers for help with a place to stay, they never came back to me".* The respondents were requested to reflect on their perceptions of police offices and in line with the low responses regarding the respondent's willingness to report victimisation, feelings of safety and high levels of witnessing and experiencing victimisation by the SAPS, there was once again a mixture of positive and negative perceptions, as reported by R39 *"…they are good at doing their jobs. Yes, there corrupted ones, but I never had a bad experience with any of them"* and R92*"…I believe they are like a gang themselves. They f*** you up and say it's their job. Take your stuff"*. To gain a better understanding of the initial responses, respondents were requested to elaborate on the reasons for reporting and not reporting victimisation, which was captured in the responses received by R13 "…*I trust them, I will open a case. They caught the boy that raped me"* and R131 *"no they usually laughed at me when I asked for help. Thought I was crazy"*, respectively.

To expand on the nature of the experiences, respondents were requested to provide examples of both negative experiences with the police, which can be seen in the responses by R124: *"…I was at a guy in Grassy Park. The police saw me, stopped the van, picked me and up with the drugs. They took me to a secluded place and forced me to have sex with him"* and R91: *they won't move people nicely; they just start hitting people. Break tents and structures, take belongings"*. In addition to this, positive experiences included R127*"…sleeping at the police station and they would come to us. Talk to us, give food and encouraged us to go to shelters"* and R35*"they tried to help me with my addiction. Allow you to sleep in the cells if you feel unsafe. One officer used to buy us cold drinks".* Similarly, respondents were requested to provide examples of negative experiences with healthcare services providers, which was captured by the responses received by R130: *"…some of them think it's their hospital. Shout and chase people away, one even said yho*[10] *you stink"* and R72: *"…they made me feel humiliated. They take your dignity, pride and self-worth".* In addition to the negative experiences, examples of positive experiences can be seen in the responses by R125*"…I was*

[10] Used to express a strong emotional reaction, in this instance it is used to express shock or disgust in the appearance of R130, which was experienced during an interaction with a healthcare provider.

shot in my back on the street, it was painful, but they helped me at the public hospital" and R123: *"…they were the only people to help me even though I was homeless".*

Lastly, to better understand the nature of discrimination among people experiencing homelessness and service providers, the respondents were requested to provide examples of interactions that were rooted in discrimination while seeking assistance, which was captured by responses such as R149 "*…just the fact that they know I am homeless, I can see that they don't want to help me*" and R117: *"…I was coming home, but didn't have much money and I was begging. There was a lot of judgement. The one said, get yourself home, the way you got here. I didn't feel worthy".* In contrast to experiences of discrimination, respondents were requested to provide examples of interactions that could be considered normal, without the experience of feelings of discrimination, which was captured in responses such as R91: *"…people treated me normally"* and R75: *"…I came to U-turn*[11] *service centre I was helped immediately, was treated with dignity".*

Moving beyond traditional proxy-based needs assessments of vulnerable and marginalised groups, the study incorporates personal accounts related to the respondent's identification of service needs and ways in which service delivery can be improved. When asked what can be done to improve post-victimisation services, some of the most insightful responses included R134 *"…awareness. Make sure we know where to go and don't just give handouts, help us";* R127: *"…they need to get the information to the homeless. Very little of us know about it"* and R71 *"…not advertised well. It needs to be spread like the popular brands. People should be more open, help the homeless People who do the work needs to be sensitive and spiritually in check*". With reference to the specific needs, post-victimisation, the following responses capture generally reported needs, R124*"…safe space, a place to heal, medical attention and someone to talk to and understand";* R68 *"…I think people who are going through trauma really needs counselling and a strong support system"* and R63 *"…legal assistance, knowledge and influence to ask for help".*

When asked about their immediate safety needs, the following responses were particularly illustrative R124 *"…more shelters and services, like transitional homes. Find out more about the persons journey, before pushing them through the system";* R71 *"…places like U-turn. Shelter and to feel part of something. Outside of this persona and no stigma"* and R59 *"…build*

[11] Cape Town (South Africa) based organisation, assisting people experiencing homelessness.

safe places that can lock, for people to sleep, who can't find shelter. Safety from the drug dealers, they are like animals when they smoke". Lastly, before concluding, the respondents were requested to provide any additional comments they may have related to the subject matter covered during the survey process and the following insightful comments emerged, R130 *"…charity is dangerous. The more you give the less people can do for themselves. We need skills and help out of this. To uplift ourselves";* R92 *"…use ex-homeless people to come up with stuff. Not someone who assumes they know"; R*39 *"…treat the homeless equally because homelessness isn't a house thing, it a belonging issue" and* R3 *"…people on the street have different problems, ages and mindsets. People need to talk to us to understand".*

Discussion

The following discussion considers the findings in relation to the broader aim of the study, which was to determine the experiences of victimisation and service needs of people experiencing homelessness. By contextualising the data, the discussion highlights the value of nuanced information on the vast, yet complex experiences of homelessness. By unpacking and attaching meaning to the data, the findings hold significant implications for the improved understanding of homelessness and demonstrates how the patterns that emerged from the study can be used to inform theory, policy development, practice and future research. The findings demonstrate that homelessness is indeed context bound and that it defies the use of singular definitions (De Beer & Vally, 2021; Mahlangu & Kgadima, 2021; Tenai & Mbewu, 2020). The majority of the responses provided regarding the definition of homelessness indicate that respondents are emotionally attuned to their homelessness experience, with struggles with 'substance abuse' and 'unemployment and poverty' being the most prominent factors in their constructions of an experiential definition of homelessness. Interestingly, emotive responses associated with the experience, including 'feelings of hopelessness', 'loss of identity and dignity' and the 'disconnection from the community, family and friends' were prioritised above the more structural factors such as the 'lack of housing' and 'limited access to services', that would otherwise take precedence, in the context of a more universal or standardised definitions of homelessness. The findings demonstrate that defining homelessness using a single definition may be inappropriate and that a range of definitions, reflective of the individuals experience, may be more suitable to underpin interventions and policy development (Kriel, 2017; Tenai & Mbewu. 2020). With this finding, it becomes possible to advocate for the use of an experiential

definition to adopt more individualised approaches with tailor-made interventions and outcomes.

In a similar vein, pathways are another priority area towards the improved understanding of where the respondent's homeless journey began, which will aid in the development of evidenced-based solutions to address homelessness holistically. As with the experience of homelessness, pathways into homelessness differ considerably from one person to another, meaning that there is no single pathway responsible for the onset of homelessness. Different individuals report a variety of combinations that shape their trajectories, which often lead to complexities in identifying viable pathways out of homelessness (Desmond et al., 2017). The findings confirm this, as the respondents expressed experiencing the interplay and interrelated nature of the various pathways, which is further evidenced by the fact that many of them selected multiple pathways to try and explain their individualised combinations and trajectories. Most of the respondents demonstrated the inextricable link between individual and structural factors (Piat et al., 2015) and described the onset of homelessness as a 'domino effect', meaning that if one of these factors were to emerge, it would eventually lead to a culmination of several other factors which would inevitably lead to homelessness. The findings again demonstrate that the individuals experience should be acknowledged, as the systemic, political or structural lens through which homelessness is viewed often fails to account for and prioritise the individual level pathways. The respondents identified alcohol and substance abuse as the leading pathway, followed by unemployment which was usually because of their addiction. The findings further reflect the fractured, fragmented and unequal condition of a contemporary South African society, placing domestic/family conditions, childhood adversity and parental death/abandonment in the top five pathways into homelessness. Most of these familial challenges led to the use of alcohol and substances to cope (Tenai & Mbewu, 2020), which were considered the actual reasons for homelessness, although preceded by other obstacles. With most of the emphasis on individual level factors, the lack of housing was surprisingly situated in the lower percentile range, which goes against the dominant perspective of homelessness and its portrayal in mainstream definitions.

Poverty was an interesting factor to observe in the context of the study, as it is mostly placed alongside unemployment as one of the main characteristics of homelessness (Pophaim & Peacock, 2021). Upon reflection, many respondents shared that people experiencing

homelessness (particularly in Cape Town) are extremely resilient and resourceful and often do not struggle to find money or food while on the streets. Some respondents had strong gang affiliations which meant that their monetary needs were taken care of, albeit to a limited extent, and mostly to secure their drug of choice. Most of the respondents shared this sentiment and reported that their primary concern was to find a means to obtain their drug of choice, and once this was achieved, poverty and many other problems became irrelevant. Based on the relationship between mental and physical health and homelessness (Pophaim & Peacock, 2021), it is important to note the considerably low response rate on both mental and physical health challenges as pathways into homelessness. Many factors may have contributed to the low response rate, including, the absence of these factors in the current sample, the lack of knowledge regarding their own health status (prevalence of undiagnosed conditions) or that they are unwilling to disclose their health status due to the associated stigma.

Although the precise risk factors are not always clearly understood, homelessness is believed to increase vulnerability to violent victimisation, which may be due to the constant exposure to shared risk factors for both homelessness and victimisation, compounded by the dangerous contexts in which they often find themselves (Charlton & Rubin, 2021; Meinbresse et al., 2014; Tong et al., 2021). It was therefore important to explore the manifestation of the unique risk factors in the context of the experiences of victimisation of the current sample. Optimistically, most of the risk factors identified are modifiable, meaning it can be countered through intervention and a considerable amount of support to avert ongoing experiences of victimisation. Consequently, local policies are largely ineffective in addressing the victimisation of people experiencing homelessness (Pophaim, 2025) and they usually fall outside of the scope of mainstream interventions for vulnerable victims (Pophaim & Peacock, 2021). Victimisation vulnerability is often influenced by aspects related to routine activities, lifestyle or behavioural patterns, and usually function in combination with several other personal and contextual factors (Pophaim, 2022a). With reference to situational and spatial vulnerabilities, the findings demonstrate a concerning level of dependency and potential institutionalisation as most of respondents are currently shelter based. Although being temporarily sheltered does considerably increase their level of safety, compared to being on the street, the inevitable request to leave remains a reality and with the risk of learned dependency from prolonged institutionalisation, sustainable reintegration may never be possible, leading to an endless cycle of homelessness. Most of the respondents are usually alone

or with a group of people and feel a sense of community in the areas they reside or seek refuge. These factors are strong predictors for both protection and victimisation and would ultimately depend on the context and the manner in which these factors manifest. For example, being alone in a dangerous area could increase vulnerability to victimisation and conversely, being alone in a safe space could significantly reduce ones' vulnerability to victimisation. Furthermore, socioeconomic determinants for victimisation are equally important as it would predict the level of engagement in a variety of survival strategies and subsequent exposure to danger. Most of the respondents were unemployed and reported to engage in a variety of activities to earn money or find food, indicative of a variety of potentially risky or dangerous situations that could increase the likelihood of victimisation.

A rather concerning finding was the high prevalence of ACEs, which was reported by more than three quarters of the sample. However, based on the nature of ACEs, it is expected that homeless populations will report high levels of adversity during their childhood (Pophaim, 2022b). Research on ACEs and homelessness consistently place adversity at the forefront of high levels of vulnerability and repeated experiences of victimisation (Pophaim, 2022b). The cyclical nature of risk factors associated with homelessness underscores ACEs as a precursor to several negative outcomes discussed in the context of the risks associated with the current sample. ACEs has been identified as the cause for many developmental, social, physical and psychological challenges, all of which can be aligned with the heightened risk of vulnerability among an already vulnerable population such as the homeless (Pophaim, 2022b). Based on the nature of ACEs, alcohol and substance abuse, as a by-product of adversity in combination with other contextual factors is another prominent risk factor for victimisation (Pophaim, 2022a). With high frequencies of alcohol consumption and substance use present in the sample, higher levels of vulnerability are to be expected. The bi-directional nature of these factors can be observed (Pophaim & Peacock, 2021), as it has been positively identified, in the current study, as both a prominent pathway into homelessness and pertinent risk factor for victimisation. Although the presence of mental and physical health, as a risk factor, was not that prevalent in the study, it is worthwhile to mention how health-related factors can potentially prolong homelessness and increase the likelihood of victimisation (Wentzel & Voce, 2012). The personal nature of the findings demonstrates that the global view that homelessness is mainly a structural problem (Fitzpatrick, 2005; Hopkins et al., 2024), may not be entirely accurate and thereby provides further justification for the acknowledgment, integration and equal

prioritisation of individual factors, alongside the already included systemic/structural factors, in the development of policies and interventions aimed at addressing homelessness.

Intriguing findings emerged regarding the contextual risk factors which are informed and guided by the individual perceptions that predict how the respondents navigate a life of homelessness. The perceptions of vulnerability were particularly high, as more than half of the sample indicated that they felt vulnerable as a person experiencing homelessness. Logically, due to the exposed nature of homelessness, the world is experienced as an unsafe place for many people living on the streets and as a result, they report a higher level of fear of crime, compared to members of the general public (Sadiki & Steyn, 2021). This can be linked back to feelings of safety in specific spaces, where respondents identified several areas where they felt safe, while unfortunately resulting in an over-reliance on shelters and organisations to ensure their feelings of safety. The quality of information and knowledge about rights was another concerning finding, as less than half of the sample could confidently report that they had sufficient information and knowledge about their rights. The extent of their knowledge appeared to be linked to individual experiences, as many of them referred to rights at arrest, but could not recall any of their other basic human and constitutional rights. The limited knowledge reflects the belief that people experiencing homelessness only enjoy four out of 27 rights compared to the rest of society, the denial of these constitutional rights are driven by various barriers including their socioeconomic situation, infringement due to both government inaction and action (Perrier, 2021). The most contemporary example of the gross infringement of the rights of people experiencing homelessness can be observed in the punitive and criminalising practices dominantly associated with the management of homeless populations (Owadally & Grundy, 2023). Unfortunately, even though these practices are widely accepted, initiated and considered to be the most effective, due to the somewhat immediate results. Most of the respondents were unaware of the existing by-laws, meaning that they are being managed and potentially prosecuted on the basis of adaptive or instinctual behaviour they have adopted to survive, which has been deemed irregular and unlawful by unrealistic mainstream standards.

The adoption of these practices further exacerbates the extent of their vulnerability and perpetuates the strained experience of homelessness by ostracising and solidifying the already problematic barriers between people experiencing homelessness and service providers (Hopkins et al., 2024). Central to the aim of the current study and based on the plethora of risk

factors to victimisation identified in the study, the findings reveal a notably high percentage of victimisation experiences. With more than half of sample reporting that they have experienced victimisation, the finding remains consistent with the previously cited international and local studies, confirming that at least half of a particular sample would have experienced victimisation at some point during their homelessness episode (Meinbresse et al., 2014; Mthembu, 2023; Pophaim, 2019; Sadiki, 2016; Scurfield et al., 2004). Of equal concern, underreporting, for a variety of reasons can be considered a potential limitation regarding the accuracy of the data, which implies that victimisation rates could be much higher. Additionally, as observed in the current study, people experiencing homelessness tend to normalise and accept negative outcomes, such as experiences of victimisation and many reduce it to being 'part of the lifestyle', which does not warrant any immediate attention or further action. To further unpack the problematic nature of repeated experiences of victimisation, many of the respondents reported problematic consequences with relatively no level of urgency to seek assistance. The finding implies that there are many victimised and continuously vulnerable individuals on the periphery of society unable to access viable means of assistance. It has been documented that some individuals experiencing homelessness do adapt to life on the streets and adopt survival strategies to reduce their vulnerability to victimisation (Pophaim, 2022a). In the current study, these survival strategies translate to the level of risk avoidance reported, post victimisation. Unfortunately, due to their circumstances and various intersections between homelessness and other societal subcultures, such as gangsterism, many respondents either accepted their situation or could not incorporate any fool proof risk avoidance strategies, therefore victimisation was sometimes unavoidable.

To further complicate the nature of victimisation among people experiencing homelessness, the findings demonstrate that although the perpetrators were mostly male and older than the victims, constructing a standardised perpetrator profile seems unlikely, echoing the sentiment in response to the question of *who is most likely to hurt people experiencing homelessness?*, by R37 *"...anyone, the homeless are desperate"*. Therefore, it is of great concern that, based on their exposure and absolute sense of vulnerability and defencelessness (De Beer & Vally, 2021), the homeless can become victims at any time, at the hands of any perpetrator. Based on the perceptions and personal accounts of the respondents, the underlying motives for most of the offences reflect feelings of prejudice, discrimination and stigma in conjunction to the idea that the homeless are easy or soft targets who cannot do much to defend or garner attention

following their victimisation (Pophaim, 2021). The finding warrants serious consideration and inclusion of people experiencing homelessness as one of the vulnerable victim groups in South Africa, which could lead to the inclusion and protection under various victim-centred imperatives, including, but not limited to, the Service Charter for Victims of Crime in South Africa, the Promotion of Equality and Prevention of Unfair Discrimination Act (4 of 2000) and the Prevention and Combatting of Hate Crimes and Hate Speech Act (16 of 2023).

In terms of addressing homelessness in South Africa, the government remains notably absent, evidenced by the lack of clarity regarding the relevant custodians of homelessness, resources and funding and absent, poorly implemented and largely ineffective policy responses on a national, provincial and municipal level (Powell et al., 2021). The findings support this notion as respondents' interaction with government departments and officials were extremely low. The feelings of safety reported were primarily associated with shelter access and the services provided by non-governmental entities, who generally fill the void in relation to service provision, such as health care services for the homeless (Heese et al., 2021). The limited interaction between respondents and the government included isolated incidents were the Department of Social Development assisted with shelter placement, or the Department of Home affairs assisted with identity documents. As with most of the other service providers, the experiences were still rather divided, with reports of both positive and negative experiences.

With reference to their contact with service providers, interaction between police and people experiencing homelessness seems inevitable. The findings concerningly support the notion of a negative relationship between police, security, law enforcement and people experiencing homelessness. More than half of the sample witnessed or personally experienced ill-treatment and victimisation by the police. There were relatively low accounts regarding feelings of comfort and safety when accessing the services of the police. Moreover, slightly less than half of the sample indicated that they will not report victimisation to the police at all. In terms of the open-ended responses, there were some respondents who reported that they do trust the police and have been assisted positively, but the overwhelming majority has been negatively affected during interactions with police, security and law enforcement. Similarly, it is well documented that the homeless experience problems to access adequate healthcare and when they manage to access available services, they might be subjected to substandard care and poor treatment (Heese et al., 2021:165; Wentzel & Voce, 2012:78). The findings provide marginally

contradictory views, as just under half reported that gaining access was easy, with a relatively similar number of respondents reporting that it is challenging to access. In relation to the treatment received at healthcare institutions, people experiencing homelessness are often reported to be treated with less respect and have access to limited options, poorer level of care and less prompt attention and are often subjected to verbal abuse (Wentzel & Voce, 2012). Again, the findings do not fully support the notion as, on the one hand, there were lower feelings of comfort and safety, but equally low levels of witnessing or personally experiencing victimisation when seeking healthcare. This was supported by the open-ended responses highlighting positive and negative experiences alike. Despite the presence of negative experiences, it is reassuring to see that some respondents do feel comfortable and safe accessing a variety of services, which indicates that experiences would be context specific and differ considerably on a case for case basis.

Some of the respondents reported on the impact of financial constraints, especially when they had to travel to clinics or public hospitals. In such situations, respondents were confronted by a 'survival conundrum' and often had to choose between traveling to access healthcare or staying close to the shelter to gain access for the night with the promise of a shower and a meal. The implications of the barriers identified could result in delays in seeking, accessing and receiving required healthcare interventions (Wentzel & Voce, 2012). Consequently, these delays can have detrimental and longer-term effects, increasing individuals' vulnerability to victimisation and prolonging the duration of their homelessness episode. Of particular concern are the barriers to healthcare services. Respondents who had been incarcerated described easier access to healthcare through the Department of Correctional Services (DCS), while serving their sentence, yet faced substantial challenges accessing services once on the street. This contrast underscores how systemic neglect and inconsistent service provision can exacerbate existing health challenges. Furthermore, the nature of interactions between people experiencing homelessness and services providers reflects broader societal attitudes, often shaped by negative stereotypes.

These perceptions contribute to a lack of empathy and appropriate support, ultimately hindering efforts to address this persistent social phenomenon. The findings highlight the urgent need for intervention – not only to improve services but also to shift the mindset that leaves people experiencing homelessness to survive through instinct, resilience and perceived agency alone.

Continued disregard for their circumstances risks rending policy and interventions obsolete (Meinbresse et al., 2014). Based on the nature of the findings, it is important to extend the conversation to relevant stakeholders to determine to what extent the negative stereotypes and stigma have shaped the social construction of services and its subsequent delivery (Weng & Clark, 2018). Furthermore, the personal barriers such as the fear of child custody issues, stigmatisation and unwanted contact with the criminal justice system due to their own involvement in illegal activities would have to be addressed to facilitate improved service usage (Stonehouse et al., 2023). The invaluable data obtained from the open-ended questions, explicitly underscores the significance and advocates for the promotion of inclusivity and the realisation that beneficiaries should be the main source of information, when it comes to decision-making that has bearing on their own safety and well-being, in the creation of sustainable pathways out of homelessness.

Limitations

Based on the nature and scope of the current exploration, the limited time and resources available for data collection resulted in the sampling of specific locations and populations. The findings were presented in cross-sectional data, which significantly limits the ability to make broader causal inferences or observe changes over time that may have been possible with a longitudinal study. The use of descriptive statistics adequately presented the findings in fulfilment of the broader aim of the study, however, there was a notable limitation in the application of varied statistical analyses and a wealth of useful information that was not reported on as part of the current paper.

While the current study has pointedly exceeded the sample size of most of the existing local studies focusing on homelessness and victimisation, it was revealed that generalisability and studies of this nature may never coincide, given the complex and unique nature of each individual's experience. In hindsight, the importance of continuous and rigorous, national level research similar in scope should be highlighted, focusing on the holistic development of an individual's life course and experiences of victimisation. Such research will promote the contextualisation of the plight and subsequent inclusion of the homeless victim in mainstream victim-centred legislation, policies and interventions.

Conclusion

Within the scope of the current exploration, the paper highlights the importance of widening the lens through which homelessness is perceived and subsequently addressed in theory and practice. The study revealed that homelessness is, indeed, much more than a housing problem and that solutions cannot be reduced to simplistic and superficial pathways out of homelessness. People experiencing homelessness often endure a variety of personal and complex traumas that need to be acknowledged as a major part of their journey toward rebuilding their lives. Considering the dynamic nature of homelessness and its entrenched association with other complex societal subsystems, such as gang subcultures, alcohol and substance dependency and victimisation – it remains crucial to maintain a comprehensive understanding of the plight of people experiencing homelessness and how it is often exacerbated by a host of interrelated factors. While in the same vein, prolonged by the 'distancing effect', which manifests through processes of ostracism, marginalisation and social exclusion – further detaching destitute individuals from mainstream society and limiting access to viable networks of assistance and sustainable pathways out of homelessness.

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Toward a victim inclusive policy framework for people experiencing homelessness: A consultative and participatory stakeholder engagement

Jean-Paul Pophaim

Abstract

Homelessness is a multidimensional phenomenon that intersects with various aspects of life, including social, economic, well-being, safety and access to basic rights and services. The complex nature of homelessness necessitates constant engagement with stakeholders, at various levels, yet the condition itself reinforces barriers, making it challenging for people experiencing homelessness to access essential resources. The dynamics between homelessness, policy and service delivery are constantly evolving, warranting continuous scholarly attention and as a result, the aim of the current qualitative study was to obtain input from stakeholders regarding the development of an evidence-based victim inclusive policy framework. The data was collected by means of semi-structured interviews, with 38 participants from diverse sectors and analysed using thematic analysis. Three broad themes emerged in relation to the aim; theme one reports on the understanding of the dynamics of homelessness, theme two delves into some of the main challenges associated with addressing homelessness, and theme three deals with stakeholder perspectives regarding the current directives and their input for advancing inclusivity among people experiencing homelessness. The findings highlight considerable gaps in collaboration and communication within the broader system leading to several ideological and practical challenges related to addressing homelessness and the provision of essential services.

Keywords: *Homelessness, victimisation, stakeholder engagement, inclusivity, policy reform, service delivery, South Africa.*

Introduction

Homelessness is a dynamic and multifaceted phenomenon that demands a multisectoral and transdisciplinary response – one that intentionally disrupts siloed functioning and prescriptive mandates, to facilitate the creation of innovative and holistic interventions. Due to the nature and range of challenges that confront people experiencing homelessness, such as dealing with substance abuse and poor health, the need to access and engage with stakeholders at various levels appears to be inevitable (Heese et al., 2021; Wentzel & Voce, 2012). Based on the level

of exposure and sheer vulnerability in various contexts, the homeless should be regarded as a constantly at-risk group, in need of specialised interventions (Heese et al., 2021). Drawing from an analysis of local policy responses, the absence of a national framework, among other interrelated factors, reflects the political failure to address homelessness holistically and is cited as a pertinent reason why current responses are failing at the implementation stage (De Beer & Vally, 2021b; Pophaim, 2025a). However, the constrained response to homelessness should not be ascribed to one source, because, similar to many other social issues, homelessness is context bound, which means that how it develops and how it is addressed, is generally influenced by sociopolitical changes (De Beer & Vally, 2021a). The challenges associated with addressing homelessness tend to manifest in a network of contextual, environmental, societal, structural and systemic issues, which extends beyond the control of the homeless person and often amplifies individual pathways, further exacerbating and prolonging the experience through marginalisation, stigmatisation and criminalisation (Hopkins et al., 2021). The dearth of local research on homelessness (Pophaim & Peacock, 2021; Pophaim, 2021; Sadiki & Steyn, 2021), has led to numerous practical and ideological challenges related to counting, defining and contextualising homelessness. Consequently, the feasibility of policy responses depends on a clear understanding of what homelessness entails, which enables stakeholders to establish a realistic baseline to better inform redress (De Beer & Vally, 2021a; Sadiki & Steyn, 2021). Without these measures in place, the risk of stigma and stereotypically driven agendas remains a reality, resulting in ineffective or absent stakeholder responses. After all, it is their level of comprehension that determines how they interpret policies, which is driven by their perceptions of homelessness and whether these perceptions align with the structure and directives of policy and intervention.

Aligning these factors will adequately define the nature of the service provider – client interaction, thereby facilitating inclusive and accessible services (Tracy & Stoecker, 1993; Weng & Clark, 2018). One of the key areas that is often neglected is the experience and ensuing impact of victimisation among people experiencing homelessness, as it tends to exacerbate thriving levels of social exclusion and marginalisation, mainly due to their circumstances, actively compounded by the lack of holistic, inclusive and protective legislation and policy (Pophaim, 2021). In general, victimisation is known to profoundly impact both an individual's well-being and the way in which they navigate life. Accordingly, the nature and patterns of help seeking behaviour are significantly impacted by victimisation and despite the availability of effective services, the utilisation of formal services remains relatively low, with

victims of crime more likely to rely on informal support, such as family and friends (McCart et al., 2010). In contrast, the vulnerability experienced by the homeless is often overshadowed by the inclination to criminalise and blame the individual for societal and structural failures.

However, the reality is that the homeless often live in a state of absolute vulnerability and any intervention aimed at addressing homelessness needs to incorporate mechanisms, in the form of services and infrastructure, to mitigate the negative impact driving their vulnerability (De Beer & Vally, 2021a). Building on the recently explored experiences of victimisation in the context of homelessness (n=89; 59.7%), the study confirms that the impact of victimisation typically extends beyond the physical and psychological bounds of an individual's well-being. More specifically, it significantly disrupts help-seeking behaviours and hampers the ability of service providers to deliver essential services, further compounding the persistent strains confronting people experiencing homelessness (Pophaim, 2025b). Barriers that restrict the use of services by general crime victims often include, but are not limited to, fear, shame, embarrassment, distrust and stigma (McCart et al., 2010). Based on the nature of homelessness and the compounding prevalence of victimisation and its potentially debilitating effects, people experiencing homelessness are also, but even more so exposed. Due to the adverse consequences associated with victimisation, they are often left traumatised and face on-going health problems. They also tend to be extraordinarily marginalised, with weak connections to society and its support structures, systems that could otherwise intervene and provide protection and assistance (Turner et al., 2018). Considering its far-reaching impact, the acknowledgment and understanding of this often-overlooked barrier in both policy and practice is crucial among stakeholders, as it ultimately determines the effectiveness of policy directives and amplifies the already constrained help-seeking behaviour among people experiencing homelessness.

The interconnected network of challenges and lack of action reinforces the reactive, yet passive stance in addressing homelessness in South Africa. It is viewed as an unwelcome cost, while failing to understand the consequences of not urgently investing in its resolution (De Beer & Vally, 2021b). Albeit multiple factors, the lack of policy remains a fundamental driver in the under-prioritisation of homelessness, as the absence of a dedicated, overarching policy means that no budgetary investments will be made by the government toward combatting the issue and civil service organisations are forced to compete for limited resources, further hindering the much-required robust collaboration public and private sectors. In the limited cases where

financial support is provided, it is usually not specifically intended for addressing homelessness; instead, it is generally allocated for all vulnerable or presumed indigent groups (De Beer & Vally, 2021b). Due to the lack of policy guidance and the inability to accurately define and contextualise homelessness, the correct team of stakeholders cannot be mobilised and put to task (De Beer & Vally, 2021b). Additionally, there is a lack of collaboration between sectors, which has led to the inability to agree on who the leading agency is, role ambiguity, and the subsequent misalignment of roles and responsibilities within the policy and intervention space. Most of the interventions are currently being filtered through the Department of Social Development (DSD) and are broadly critiqued for being uncritical, welfare orientated services, further perpetuating that homelessness should only be viewed as a social welfare issue and inadvertently disregarding the several other challenges that amount to gross human rights violations (De Beer, 2021; Muleya & Mlilo, 2023). Narrowly framing the problem to fit the mandate and budgetary allocations of a single department fails to capture the significance of the collaborative, yet nuanced approach required to address homelessness.

It is due to the isolated contextualisation of homelessness that exorbitant amounts of money are spent on criminalising homelessness, where the untransformed minds and practices of institutions fail to acknowledge the systemic failures that persistently exclude and even exploit people experiencing homelessness, instead of investing in developmentally supportive measures (De Beer & Vally, 2021b). Advocacy for the creation of inclusive communities generally strives to protect the rights of all vulnerable populations, including the homeless (De Beer & Vally, 2021b). Homelessness often manifests alongside varying degrees of marginalisation and the blockage of basic human rights. Frequently marked as undesirable, people experiencing homelessness generally endure levels of stigmatisation that exclude them from institutions and services that ought to provide support (Mahlangu & Kgadima, 2021). In order to create environments characterised by humanity and equality, any structure or barrier that prevents this, should be addressed accordingly (Powel et al., 2021). Inclusive communities entail the deliberate creation of infrastructure and services that facilitate access to mainstream networks of support. It aims to encourage the commitment of every institution and stakeholder to acknowledge the homeless as a vulnerable group, prioritising the integration on institutional agendas and budgets (De Beer & Vally, 2021b). This venture presents an ideal opportunity to

infuse the popular African doctrines and philosophies of *Ubuntu*[1] and *Batho Pele*[2] to re-inscribe and restore the human element into responses to homelessness by adopting the spirit of a caring community characterised by harmony, hospitality, respect and responsiveness.

Furthermore, the transformation of service delivery to the homeless should reflect the eight principles of consultation, service standards, access, courtesy, information, openness and transparency, redress and value for money (Mahlangu & Kgadima, 2021; White Paper on Transforming Public Service Delivery (*Batho Pele*), 1997). Considering the harrowing challenges faced by people experiencing homelessness related to victimisation and restricted access to services amongst others, the paper presents the perspectives of stakeholders regarding their expertise related to homelessness and the delivery of essential services. By exploring the perspectives, the aim of the current study will be addressed by identifying and providing valuable policy recommendations to avoid the creation of new competing frameworks or the duplication of resources and dependencies (De Beer & Vally, 2021b). Instead, the desired outcome would be to integrate and strengthen existing responses for the promotion of universal inclusivity, protection and accessibility within the homelessness sector.

Methodology

A qualitative methodological approach was used to guide the current study, as it allowed for a consultative and participatory engagement with stakeholders. The selected approach facilitated the creation of a platform for participants to share their experiences, perceptions, ideas, opinions and perspectives within the context in which they function (Ugwu & Eze, 2023). Using purposive sampling, the participants were selected based on their ability to provide appropriate and useful information (Campbell et al., 2020). The final sample consisted of 38 stakeholders from Pretoria, Durban, Bloemfontein and Cape Town[3], drawn from the following sectors:

- Academics and researchers.
- Officials from the Western Cape DSD office.
- Staff within the Non-Governmental/Non-Profit Organisations (NG/POs)/shelter and service centre space.

[1] Translates to 'I am what I am because of who we all are' and emphasises humanity to others.
[2] Translates to 'People first' and is concerned with transforming service delivery to prioritise the needs and well-being of the public.
[3] Pretoria, Durban, Bloemfontein and Cape Town are four major cities in South Africa.

- Officers from the South African Police Service (SAPS).
- Officials from the Department of Justice and Constitutional Development (DoJ & CD).

Regrettably, representatives from the legislative branch (DoJ & CD) were not available at the time of data collection, which resulted in the inability to include questions related to the development of the Prevention and Combating of Hate Crimes and Hate Speech Act (16 of 2023), to expand on the proposed inclusion of homelessness under this provision (Pophaim, 2021). The researcher was referred to the Parliamentary Monitoring Group (PMG) website but unfortunately, this avenue did not assist in fulfilment of this dimension. Additionally, it would have been ideal to provide more detailed descriptions of the participants' professional backgrounds, to add to the validity of their responses. However, this consideration was weighed against the need to uphold the study's ethical commitments to confidentiality, and as a result more pertinent identifiers were intentionally omitted. Following the selection and recruitment of participants, a request was made to engage in one-on-one interviews, for data collection, which was guided by a semi-structured interview schedule. Before the interview commenced, each participant was provided with an information sheet which explained the purpose of the study and the nature of their involvement, after which their informed consent and permission to record interviews were secured. To ensure trustworthiness of the study, four general criteria were relied on, which include credibility, transferability, dependability and confirmability.

To promote credibility, different sources and methods were triangulated. Furthermore, participants were purposefully selected, based on the nature and scope of their engagement with people experiencing homelessness and related matters. Accordingly, questions for each interview were restricted to the stakeholders' expertise and how they could assist in advancing the contribution of the study. During the interviews, the researcher made use of member checking, constantly making sure that accurate responses were recorded. Each interview was treated as a conversation which allowed for constant clarification and the credible documentation of the information shared. With reference to transferability, the aim of the study was not to generalise; however, to create trustworthy and transferable accounts, where thick descriptions were used and linked to relevant literature (Stahl & King, 2020). The findings were thematically analysed from the interview transcriptions (verbatim) and categorised to provide a better understanding and context regarding the nature and scope of the interactions between various stakeholders and their clients, to identify potential gaps and formulate an evidence-based justification for the development of a victim inclusive policy framework.

Ethical considerations

The study was underpinned by the main ethical principles which included: informed consent and gatekeepers' permission; voluntary participation; no harm to participants; no deceptive practices; confidentiality; the availability of debriefing services (counselling psychologist and social worker), and the dissemination of findings. Before the data collection process could commence, gatekeepers' permission was requested and obtained from the relevant government departments and organisations, followed by an application for institutional ethical clearance from the University of the Free States' General/Human Ethics Committee (GHREC), which was subsequently approved[4].

Presentation, analysis and discussion of findings

A summary of the themes and subthemes is presented in the table below, followed by a discussion of the thematically analysed data in accordance with the aim of the study. The findings are structured and supported by personal accounts from participants, and where applicable, integrated with relevant literature. Given the participatory nature of the study, recommendations are provided alongside the presentation of findings, which will allow for the immediate contextualisation of each insight, linking the evidence directly to the suggested action.

Table 1: Overview of themes emerging from the study

Theme	Sub-theme
Understanding the dynamics of homelessness.	• Perceptions of homelessness. • Contextualisation of homelessness. • Conceptualisation and operationalisation of homelessness.
Challenges related to addressing homelessness.	• Meeting the rights and needs of people experiencing homelessness. • Practical challenges confronting individuals experiencing homelessness. • The criminalisation and victimisation vulnerability of people experiencing homelessness.
Current directions and advancing inclusive policy reform.	• Stakeholder perspectives on the current policy and legislative environment. • Stakeholder perspectives on the quality, accessibility and delivery of services to people experiencing homelessness. • Stakeholders' contribution towards a victim-inclusive policy framework for people experiencing homelessness.

[4] Ethical clearance number UFS-HSD2023/1848.

Theme 1: Understanding the dynamics of homelessness

The comprehensive understanding of homelessness is a critical requirement for all stakeholders who provide services and contribute to addressing homelessness. A lack of understanding is usually at the forefront of oppressive, punitive and ineffective strategies, whereas feasible and targeted approaches usually reflect a clearer understanding of what homelessness entails (De Beer & Vally, 2021a; Sadiki & Steyn, 2021). The logic behind this theme is to illustrate how, through a process of social construction, stakeholders ascribe meaning to certain concepts, which is often impacted by their perceptions, experiences and expertise and generally directs their ability to accurately contextualise homelessness.

Subtheme 1.1: Perceptions of homelessness

Historically, perceptions of homelessness are shaped by socio-cultural and political trends. The process of social construction allows for the creation of meaning, which has led to the creation of definitions, usually found in policies, that often align with perceptions, instead of empirical knowledge on homelessness (Cronley, 2010). The dominant perception tends to ignore larger systemic and social problems by placing all the blame on the individual and ascribing elements of personal choice, failure and mismanagement to the experience. The individualistic orientation generally underpins public views of homelessness, which tends to reduce the level of empathy and increase the likelihood of victim blaming. These negative responses typically manifest in oppressive and punitive measures which diminish the support of public policies that seek to address the needs of marginalised groups (Turner et al., 2018; Weng & Clark, 2018). In this regard Participant 14 shared "…*when I first came here and saw them, I didn't look deep into it and I blamed them, I looked down on them and it was like, you didn't listen to your parents, you didn't want to go to school and now look at you*".

Driven by mainstream perceptions, stereotypes generally portray people experiencing homelessness as more likely to engage in crime, untrustworthy, a public nuisance, more likely to have troubled families and should be seen as potentially dangerous and unpredictable (Weng & Clark, 2018). As reported by participant 7 *"Due to the profession that I am doing, first things first when you see a homeless person, your mind clicks straight to the drugs, first, because there is an abuse of the drugs and most of them, if you check, they are involved in the drugs, you see"*. The homeless are usually negatively portrayed, as they are regarded as reluctant or unwilling to engage in interventions leading to productivity. These negative perceptions and

stereotypes tend to constrain service delivery and frequently extend beyond the oversimplification of homelessness, and these biased overgeneralisations usually lead to the creation of stigma (Mahlangu & Kgadima, 2021; Weng & Clark, 2018). The presence of stigma can be rather harmful in the context of homelessness, as outlined by Participant 34 *"…I think people still feel quite stigmatised in trying to access a range of services, particularly health services…you also hear it in the way that people speak of people who are experiencing homelessness…stigma and that othering, kind of comes across for people and they are not willing and could become quite resistant to seeking support…even if the support is available"*.

Stigma is commonly rooted in socially constructed stereotypes that tend to overlook complexity and diminish individuality by creating general categories into which individuals are arbitrarily grouped, with the added effect of socially excluding those who possess one or more of these 'flagged' characteristics. With reference to homelessness, stigma does not only devalue individual identities, but instead it collectively categorises individuals as being inferior and not deserving of equal rights and opportunities (Weng & Clark, 2018). Perceptions towards homelessness appear to be based on familiarity and contact, as some participants who did not have much experience with homelessness did not have a particular viewpoint to share. Fortunately, within the context of the study, perceptions do appear to be malleable, as Participant 14 reported that her perceptions changed over time *"…now when I look into it, I feel for them…they didn't have support, family support and probably poverty…that is why they have to be homeless…I have a better understanding and now I have this in me to want to assist. I look at it very differently, these people are broken, and they need help"*. The viewpoint highlights the malleability of perceptions and how, overtime, views and understandings can change, based on new experiences, information and engagements. Therefore, the impact of these negative perceptions needs to be mitigated through continuous awareness raising and positive exposure, at all stakeholder levels, to reframe and reduce the negative perceptions toward homelessness. With the envisioned positive perceptual shift, the acknowledgment that the causes and consequences of homelessness are usually out of the individual's control could lead to more effective responses (Turner et al., 2018). As expressed by Participant 35 *"…I think a lot of education still needs to happen within this sector, within the communities as well, to understand that not all people that are homeless or living rough on the street can be viewed with that kind of demeanour, obviously the person still has value, they can still contribute to society, it's something that happened in the person's life, if the person is assisted"*.

Summative note: The subtheme explores the impact socially constructed perceptions have on the delivery of services to people experiencing homelessness. It demonstrates how negative perceptions foster the creation of stigma and stereotypically driven barriers that are often used to justify the inaction or absence of formal support structures. In contrast, the findings highlight the malleability of perceptions, which provides a basis for the need for awareness raising initiatives to disrupt the harmful perceptions, reduce stigma and improve the outcomes of available services for people experiencing homelessness.

Subtheme 1.2: Contextualisation of homelessness

Well-informed stakeholders are central to creating and implementing effective responses to homelessness, which should translate to targeted, human-centred interventions characterised by inclusivity and the development of holistic and sustainable services. As mentioned previously, the effectiveness of policy responses and interventions requires a clear understanding of what homelessness entails (Mahlangu & Kgadima, 2021; Sadiki & Steyn, 2021). The ability to empirically contextualise a problem, free of negative perceptions, is essential toward the development of evidence-based and contextually sensitive responses that are both flexible and able to address the diverse needs of people experiencing homelessness (Desmond et al., 2017). However, often homelessness is *"both very visible and invisible at the same time. We all see homelessness, yet we see through them, we are not aware of what it really means"* (Participant 37).

Central to the poorly framed contextualisation of homelessness, is the dearth of local research, as explained by Participant 38 "…o*ften our work with homelessness is not intelligent…it's not driven by the facts and the figures, we are in the space and there we recycle what we do…the data is not reliable… it's once off and then it disappears…we've seen during COVID, what really works is when you have reliable day-to-day data… having the right data, on a daily basis so you know where people are and what are the gaps and addressing that through a plan that has a will behind it".* Therefore, the accurate contextualisation of homelessness at a local level is significantly compromised, as it is frequently based on assumption. Attributable to the high rates of mobility among people experiencing homelessness and the marked absence of comprehensive, longitudinal research, ultimately poses a great challenge for policymakers who are responsible for the formulation of evidence-based responses (Tenai & Mbewu, 2020).

In the South African context, the policymaking process is guided by the National Policy Development Framework (2020), which aims to guide all government departments in drafting public policies (The Presidency of the Republic of South Africa, 2020). Without sufficient contextual knowledge, the historical trend of adopting generic responses to homelessness (Groenewald et al., 2023), will most likely continue, as the policies will simply be developed to meet the standardised criteria and fulfil international obligations, once again failing to capture the unique, individual complexities. This concern is shared by Participant 34 "…*the policies at a local level are useful but there are still some gaps, in terms of how people live their lives…. there is a lot that needs to be done , there is a lot of consultation that still needs to happen, to get us to a point where we are at a uniform level…the gaps are not related to recognising the problem, rather what we are going to do about it…..a lot of these policies follow a step wise approach ….we can think of it in that way and I think that complexity is missing in our policies...it's the way policies are set up, policies are supposed to be these short, but kind of very focused documents, that don't always allow for depth in many ways".*

Accordingly, the inaccurate contextualisation of homelessness means that the correct team of stakeholders cannot be identified and mobilised (De Beer & Vally, 2021b). In this instance, the lack of knowledge and information could lead to exclusion of homelessness from the agenda of some stakeholders, as reported by Participant 32 "…*I think that one probably doesn't really know enough about the homeless, the group itself, they might comprise women, older persons, people with mental disabilities, we don't know. You sort of just group them as this homogenous, homeless group, but not going into the actual composition…how do you contact them, if one were to consult or engage, even have a workshop, how would you go from one street corner you know, walk the streets. How is this group represented, because that's also a real aspect of stakeholder engagement and consultation. With homelessness it's just difficult, it's a number of people, really, so it just makes the practical engagement much harder".*

While the complexity of homelessness evades many individuals, organisations and government departments, it remains fundamentally important to have a sound understanding of homelessness and recognise that *"…the way the world works and how we are engaged and connected to different people, is very different"* (Participant 34). The sentiment conveys the importance of moving away from the historical static, one-size-fits-all approach generally used to address homelessness (Groenewald et al., 2023). By acknowledging and promoting the notion of heterogeneity within the context of homelessness, to foster the creation of

contextually specific and targeted solutions that are able to address the root causes, instead of only remedying the visible symptoms: *"…if we don't recognise those nuances, around how people's lives are, it means that our interventions we put into place is not going to be complex enough and fitting enough for people's stories"* (Participant 34). The dynamics of homelessness present differently across geographies, as noted by Participant 37 *"…smaller cities tend to be those socially triggered homeless and the ones in the bigger cities tend to be economically triggered and yes some are socially triggered, but they are proportionately much smaller, they are not the main examples we see"*. The variation in experiences of homelessness in rural and urban spaces has been documented by Sadiki (2016), highlighting the need for a more particular contextualisation, which demonstrates how understanding the unique circumstances can allow for targeted and more effective responses. Interestingly, Participant 37 provided an international perspective related to homelessness as observed in the United Kingdom (UK) and New York "…p*eople became homeless because they left a mental institution… prison…the army…a care home or they had some kind of mental breakdown…it was those kind of things which led to people falling out of the system and becoming homeless…very different experiences*".

However, the risk of victim blaming and attributing the onset of homelessness to personal mismanagement or a matter of choice remains problematic when emphasis is placed on understanding the individual's reasons for becoming homeless and how that fits in with the broader contextual factors. As participant 18 confirmed *"there is a lot of miscommunication with why people end up on the street, often people think that it is a choice, but there is a lot of factors that contributes to a person actually ending up on the street"*. In the midst of miscommunication, negative stereotypes, stigma, and discrimination could impact the degree of contextualisation, which would result in negative experiences and ineffective interventions (Weng & Clark, 2018). Fully understanding and accurately contextualising homelessness requires a delicate balance, one which demonstrates cognisance of the complex interplay between individual and broader social and systemic factors. This can be observed in Participant 16's view "…t*here are various factors, the predominant factor, out of the many reasons is underlining substance abuse that is there and because when you understand substance abuse or addiction, you will find the first phase, or first step is that your life becomes unmanageable. And due to that you basically give everything up for your drug addiction, which means your job, your family and you become homeless. It is the domino effect"*.

Most of the participants were able to specifically recall the prominent causes they have dealt with during their engagements with people experiencing homelessness, while also mentioning structural and systemic causes. A delicate balance was maintained to also incorporate individual level explanations that are frequently overlooked in policy. Participant 22 provides an insightful approach to gaining a better understanding *"…addiction is a very strong point, and it's something I am fully versed in, but I was quite shocked coming into the programme, I didn't know, I know about homelessness, but compared to addiction, it probably looked like that* [used fingers to show the comparable size of homelessness and addiction]*....so I had to put myself in a homeless persons shoes…and then realise who I am dealing with, and the mindset I am dealing with, addiction is one thing, homelessness is another thing, combine the two and you have got a very unique individual.* Based on the preceding discussion, a uniform understanding is not forthcoming as each participant attributes the onset of homelessness to the factors they have been exposed to, within the context of their client base. This indicates the need for a policy framework that acknowledges the debilitating impact of the interaction between individual and socio-structural factors. In as much as guidance and structure are required, due to the dynamic differences and interpretations of homelessness, policies need to be context-sensitive, allowing for the mobilisation of resources and stakeholders which depend on the individual needs of the respective beneficiary.

Summative note: The subtheme highlights the critical importance of reliable and evidence-based information required for the contextualisation of effective and inclusive responses to homelessness in South Africa. The findings highlight the impact of the dearth of local research and how evident it is among stakeholders at various levels of service delivery. The information presented in this section emphasises the need to embrace the heterogeneity in homelessness and to move away from the generic interventions that fail to address the diverse realities of the population. By doing this, stakeholders can gravitate toward more context sensitive approaches developed from a nuanced understanding for more sustainable, human centred responses.

Subtheme 1.3: Conceptualisation and operationalisation of homelessness

Defining homelessness remains one of the most prominent challenges in the homeless arena, as there is very little consistency and universality in how it is understood, interpreted and applied in practice (Frazer & Kroll, 2022; Obioha, 2022). Without a universal definition, various stakeholders use different understandings which tend to impact the accuracy, type and quality of interventions, as well as who is counted and considered eligible for support (Obioha,

2022; Weng & Clark, 2018). As Participant 34 notes *"…the definitions that are provided are useful, but it's not always uniform, in the way that we operationalise what we will do".* The importance of a working definition remains relevant as it will ensure that clear policy directives are created in terms of what homelessness is and, most importantly, what it is not (Groenewald et al., 2023), to avoid wasting already scarce resources. Building on the findings presented thus far, it is important to emphasise that a working definition, due to diverse contexts and experiences, should defy the singularity of reducing homelessness to the lack of shelter and basic needs, proposing that it comprise a range of definitions to underpin interventions and policy development (Kriel, 2017; Mahlangu & Kgadima, 2021; Muleya & Mlilo, 2023; Tenai & Mbewu, 2020). Accordingly, the creation of a constructive definition requires constant consideration as Participant 33 highlighted "…*in the past, we just used to define it as someone without a place to go… just using the term family, 10 years ago, we had a very short definition, and now it's grown to the point where we include friends, lifelong partners and I think the same development and growth needs to happen with homelessness, where we do a brainstorm to say what are all the things linking back and I think once we do that, we will have a good definition, to be able to give us a definition that is inclusive of everyone and not marginalising anyone*".

Based on an engagement with people experiencing homelessness, building policy interventions around an experiential definition could prove useful, as it allows for the realistic grounding of perceptions and supports a contextualised understanding of the problem and what needs to be addressed, both directly and indirectly (Pophaim, 2025b). Through this process, stakeholders will be able to obtain client specific information and formulate their own working definitions on a case-to-case basis, which reflects the nuanced experience of the client linked to their professional orientation of identifying and solving the problem at hand. Through a more specified contextualisation, stakeholders may be able to generate a higher buy-in from government, in terms of funding and support, as their requests will now be more specific and targeted in terms of what resources are needed and how it will be distributed more efficiently.

Some of the conceptual gaps perpetuate the use of inadequate interventions, as it is primarily formulated based on poor understandings that view homelessness almost exclusively as an issue of individual failure and do not consider systemic and institutional failures, alongside other contextual factors. Narrowed views of homelessness also categorise issues inappropriately, which aids in misinterpretation, misalignment and general inaction from stakeholders, which can be observed in Participant 35's response "…*if we sort out the definition*

in terms of how we gear our services, in terms of street people versus homelessness. It's a fine line in terms of how you articulate it and how you position it, in terms of the definition, if it's clearly stipulated in the definition and legislation, it makes it easier for the partners to kind, of fall into line and provide services. So now, everybody is saying no it's not my responsibility".

The participants duly acknowledged the difficulty in defining homelessness; however, many were able to construct detailed definitions, reflective of their expertise and experiences, providing further evidence that it is indeed a complex term that defies singular definitions (De Beer & Vally, 2021a; Mahlangu & Kgadima, 2021; Tenai & Mbewu, 2020). Although there were many, the following interpretations insightfully capture the intricacies of defining homelessness. It is important to note *"that it's just someone, not just without a home, but someone needing more, something else is happening, there is a bigger problem at play"* (Participant 21) and *"homelessness is an experience. I think it's when life happens at people, and they are forced to make decisions about their lives… it is someone without safety and security of either physical or social structure that allows them to navigate the world in a good way"* (Participant 34). With these sentiments in mind, perhaps a working definition is not one that is broadly focused, but rather one that is informed and collaboratively created by the person experiencing homelessness and the engaged stakeholder. Such an approach will ensure that a flexible definition is used for a dynamic population, promoting inclusion and ensuring that no one is excluded based on characteristics that do not align with narrowly standardised definitions.

Summative note: The section addresses the long-standing challenges associated with defining homelessness and how the lack of a universal definition has led to limited and varied interpretations by stakeholders. The existing challenge has also resulted in the misalignment of responses and inadvertent exclusion of certain groups who do not fit the criteria of the current, more prescriptive definitions. The section advocates for the adoption of an experiential definition, constructed based on lived experiences and interpreted by trained stakeholders to develop a range of flexible and context specific definitions that promote targeted, inclusive and holistic interventions.

Theme 2: Challenges related to addressing homelessness

People experiencing homelessness face a considerable number of challenges as they navigate a life characterised by vulnerability, marginalisation and strife. The following discussion

outlines the most prominent challenges acknowledged by stakeholders with regard to service delivery.

Subtheme 2.1: Meeting the rights and needs of people experiencing homelessness

Despite the presence of limited and to an extent forced resilience, autonomy and independence among people experiencing homelessness, there are still multiple individuals who have no choice but to rely on the assistance of stakeholders (De Beer & Vally, 2021a). International obligations embedded in Article 25(1) of the Universal Declaration on Human Rights (UDHR) cater for the provision to ensure that "*everyone has the right to a standard of living adequate for the health and well-being of himself and of his family…*" (Mahlangu & Kgadima, 2021). South Africa is a democratic, constitutionally driven society, outlining several of its duties around the fundamental values of human dignity, the achievement of equality and advancement of human rights and freedoms, non-racialism and non-sexism, supremacy of the Constitution and the rule of law, democracy and social justice, equity and respect (Fredman, 2023). Participant 32 shares the importance of ensuring that all citizens live a dignified life, with full access to their constitutional rights *"in terms of the constitution, section 7(2), it's quite clear, in terms of the obligation of the state to promote, respect and fulfil human rights. …we all have the Bill of Rights, chapter 2, which guarantees a number of rights including dignity, life and those socioeconomic rights, which for example, includes housing in the context of homeless persons".*

Moreover, emanating from the Constitution of the Republic of South Africa (1996), the guiding principles of *Ubuntu* and *Batho Pele* provide for the promotion of equitable and humane service delivery and based on the diverse stakeholder feedback, is seldom the case. In terms of an optimistic account regarding upholding the rights and needs of people experiencing homelessness, participant 15 shared *"I think the government or the service providers do a lot, I think about a lot especially here in Cape Town, how many safe spaces are open. So, there is access to services and access to social workers and mental health"* and similarly, *"I see the Western Cape government is probably making the most progress when it comes to homelessness, they are doing what they can, but obviously, certain people will say we could be doing more"* (Participant 22). Participant 21 provided an insightful response, while raising some valid concerns, which reflects the orientation of having both good and bad scenarios "*…there's obviously people in the know, who are working with homelessness, there are policies that govern homelessness, there is funding that is made available, but often the*

sustainability of that….is it working as effectively as we would hope? Are there services there? Are there social work services? Cause just giving someone a bed is only one part of a very big problem… So, I think that is just a big struggle, we often just treat the immediate problem in the city and that's what they have in place at the moment. But they don't have a bigger strategy as to how to get people out of homelessness".

Conversely, the government remains absent, with recurrent issues related to the level of uncertainty around the rightful custodian of homelessness, funding, absent and often poorly implemented and ineffective policies on a national, provincial and municipal level. As mentioned previously, very few government departments allocate funding for homelessness, and due to the limited extent of contextualisation, this is regarded as especially problematic for the Human Settlement Housing and Health or Economic Development Departments. However, if the scope were broadened, the reality would likely reveal that many more service sectors are affected by restricted capacity, the lack of support and constrained funding, which essentially infringe on their ability to adequately respond to homelessness (De Beer & Vally, 2021b). These challenges are further compounded by concerns related to the lack of political will in government, which is often characterised by limited support and follow through on interventions aimed at addressing homelessness (Batchelor-Hunt, 2023; Powell et al., 2021). Participant 37 shared that "*the biggest problem that homeless people have is the government, so either because government actively does things that harms people, or because it sets things up that make it hard for homeless people to access*".

Out of the twenty-seven rights listed in the Bill of Rights, the homeless only enjoy four. Thirteen of these rights are infringed upon based on their socioeconomic circumstances, twelve due to government inaction, and eleven due to government action (Perrier, 2021). With this comes an even greater concern that would likely render any policy or intervention obsolete, which is that people experiencing homelessness often do not have sufficient knowledge regarding their own rights and what they are entitled to. The concern was confirmed with findings from engagements with people experiencing homelessness (Pophaim, 2025b) and with stakeholders, observed in Participant 34's response *"…people who are experiencing homelessness and people who experience vulnerabilities and marginalisation in general are neglected but seen and it's weird because you know, we know that all of these challenges exist, we try and address what is happening but people are still neglected in terms of what their rights are. I don't think that people who are living on the streets or people who live in severe poverty*

always know that they have rights and so I think that there's that element and besides that particularly vulnerable group, I don't think as a society we really know what our rights are".

In the absence of government action, Participant 30 highlights the importance of NGO's "*people don't really know their rights at all, that is the first issue that I saw and they don't know how to stand up for themselves, and I think that is where we play the vital role, is because we advocate for them….we always say every human has a right, but there is certain things that they don't know that is actually also applicable to them, because they are still a human being. Because of the way they are treated on the streets and being homeless, they lose that of being a human being, because they are constantly in survival mode…if there were no NGOs, because the NGO is the body that actually helps the homeless people and there is a lot of NGOs that run without government money"*. The statement aligns with the existing literature (De Beer & Vally, 2021b; Muleya & Mlilo, 2023), as issues related to homelessness are usually led by municipalities, religious organisations and NP/GOs in their limited capacity. The COVID-19 pandemic exposed the fault lines and forced the government to re-evaluate its position in addressing homelessness, but as Participant 38 mentioned *"…at the end of the hard lockdown, people said the disaster is over"* and action against homelessness seemingly regressed and returned to its intermittent state.

Summative note: The section outlines the current challenges associated with meeting the rights and needs of people experiencing homelessness and how it contradicts international obligations and the local constitutional values of South Africa. The section also addresses the impact of government inaction and how it further impedes the already constrained rights of the vulnerable. The crucial role of NGO's is highlighted in the section but essentially demonstrates the need for longer-term, sustainable solutions to address the gross human rights violations and improve the well-being of people experiencing homelessness.

Subtheme 2.2: Practical challenges confronting individuals experiencing homelessness

Apart from the broader systemic challenges, people experiencing homelessness are confronted by a myriad of personal challenges that perpetuate and exacerbate their homelessness episode. As expressed by Participant 17 *"…it would depend on whether they want to access it, but I suppose isolation in that sense, their well-being is at risk, so they tend to get really sick or they in danger, so whether that's gang related or just the culture of the homeless community"*. The homeless are susceptible to a variety of chronic mental and physical health challenges,

including addiction, which can act as precursors to and by-products of homelessness (Heese et al., 2021; Hodwitz et al., 2022). The diverse service needs also tend to complicate matters as reported by Participant 15 *"I am thinking of a heroin client; it is very difficult. You first need to start the whole process; you know putting the client first on medication and all those kind of stuff…..the withdrawals can be a challenge and gangsterism as well"*.

The issues around perception and stigma mentioned previously significantly impact the ability to access services as Participant 19 reported *"…because of them being untidy, they are not taken into consideration and not having a home address"* and Participant 34 *"…a few of our participants was just talking about that othering and I know that I am stinky, I know that I don't look good, I know all of these things and I know when I go there no one is going to want to sit next to me in line, people are going to throw me out, they going to ask me why am I there"*. This level of treatment also reinforces resistance to accessing services, and it is not always considered when evaluating and establishing networks of assistance for people experiencing homelessness. Securing employment is another challenge, with some variability between educated and uneducated persons and the ability to secure temporary employment. Many fail to secure permanent employment due to practical constraints, such as the lack of education, identity documents, qualifications, criminal records and other physical challenges (Tenai & Mbewu, 2020), confirmed Participant 21, to some extent *"…some of the challenges accessing employment opportunities, one, because sometimes with homelessness it's also criminal activity that they resort to"*.

Without steady income, people experiencing homelessness usually do not have the required funds to procure their basic needs, apart from those frequent service centres or resort to begging for the bare essentials. As Participant 22 confirmed *"Ja*[5]*, definitely, access to basic services, obviously shelter and accommodation, obviously facilities such as toilets, you know the basic needs, running water, clothing, pretty much all of those is a challenge, living on the streets is definitely not easy, but it's a survival. You know, there is a lot of challenges, and obviously a lot of it is, if I have to sum it up, basic needs"*. Some participants also mentioned that many homeless people are rather resourceful and might not struggle as much to secure their basic needs. However, Participant 34 raises and important concern, which highlights the simple lack of humaneness when engaging with people experiencing homelessness *"…I think people who are experiencing homelessness, probably have more access to food, than people tend to think,*

[5] Afrikaans term which translates to yes.

it is much easier for them to get a place where someone is going to give them food and that sort of thing. But still we had people speak about the quality of the food they would receive; it's almost like you're giving the leftovers to the dogs in many ways and that was horrible for them to experience". It is therefore to be expected that access to cost-based services remains a challenge, compounded by the limited availability of public transportation in South Africa and the stigma around the use of these services for those who are othered, perceived as a dirty, criminal or drug addicts, traveling is another practical challenge experienced by the homeless (Perrier, 2021). The inability to travel due to associated costs or other practical barriers, usually means that the homeless are relegated and restricted to certain areas and usually have to walk everywhere. With this practical obstacle, their ability to access a variety of networks, including employment and other public services is extremely restricted (Perrier, 2021). The example provided by Participant 21 captures this experience *"…services are available to them. They don't access services, one, because sometimes it's the distance that they need to travel to get to these places, it costs money to travel and the long waiting there and then getting back to where they need to sleep at the end of the day, so that commuting back and forth, often it doesn't happen, because you need to secure your place to where you are sleeping, so you can't afford to be away from your space the whole day, to go sit at the clinic for example"*. The participant shared a similar example *"…Home affairs is a big struggle, a big challenge in our community, I think now it's getting a little bit better with the systems that they are putting in place, but in the past it used you used to wait extremely long and I mean you had to be at home affairs very early in the morning, to even be helped because they help the first 50 people, so I mean if you come even at 8, you may not be helped for that day, and you have to return and like I said it's again about traveling to these facilities".*

The geographic positioning of people experiencing homelessness can be another significant burden with reference to accessing services. Indicative of the poorer quality of life in rural areas, pathway research notes the movement of people from rural to urban spaces to seek employment to escape poverty, consequently, due to limited and even the lack of opportunities, many of them end up displaced and street bound (Tenai & Mbewu, 2020). The challenge of service delivery within rural communities is largely attributed to broader systemic issues that consistently result in the tainted and ineffective delivery of basic and quality services (Shongwe & Meyer, 2023). The reality is that not everyone leaves these areas and therefore continues to be confronted by egregious living conditions and limited, or no access to essential services. As Participant 38 reported *"…there are areas of concentration for homeless people, that even the*

conventional services, I am now talking about health, banking and all of that and even conventional services, we all give to homeless people, psychosocial support, outreach programmes, shelters, don't exist in those places and so there are also these areas of concentration where there are no services or shelter facilities". This was also evident during the pandemic, where smaller regions did not present with clear or sustainable solutions to address homelessness, many smaller cities do not have formal policy, strategies or budgets allocated for addressing homelessness, which is of great concern to those who are even more isolated and marginalised due to their geographic location (De Beer & Mashayamombe, 2021).

Summative note: The section unpacks the level of awareness demonstrated by stakeholders regarding the practical challenges confronting people experiencing homelessness related to access to services. The challenges identified include health and well-being, social, economic and other practical challenges that translate to restricted access reinforcing cycles of homelessness, particularly in underserviced areas.

Subtheme 2.3: The criminalisation and victimisation vulnerability of people experiencing homelessness

The homelessness paradigm is fraught with uncertainties and controversial decision-making practices, particularly those related to the criminalisation of homelessness, which often stems from a very rigid, top-down systemic approach. Driven by the negative connotations discussed previously, societal support from criminalisation of homelessness stems from the belief that people experiencing homelessness threaten public safety (Owadally & Grundy. 2023). As Participant 34 explains *"I think we have to understand this within the context of our crime space in South Africa, we have a very big issue with trust of people, because what is placed on us. I think the intention of the by-laws were to protect people, it's about protecting the citizens, that's fair enough but it's not as simple as what the by-laws are making life out to be".* There was a general consensus and Participant 21 eloquently explained this point *"I am pretty sure it's not always ideal places that people tend to set up the makeshift housing and stuff like that…I mean that's not a good place to be, it doesn't attract our tourists, it impacts things on a bigger scale, but I think it just needs to be more humane…we need to figure out how we move people out of spaces, how do we restrict them, where do they go, give them options, then as to where they can go…..Often times* [these places]*, it's outlying areas, again this is going to impact how they access services, because if you are going to put me far out of the city, how am I going to keep my clinic appointment, how am I actually going to come into the city to do what I want. I*

think the main concern would be, if you are moving them to outlying areas, they actually can't access the healthcare system because it's in the city centres".

Punitive approaches do not solve the problem, instead, it further ostracise people experiencing homelessness, reinforcing marginalisation and exacerbating their vulnerability in spaces of extreme poverty on the street, creating further distance between the homeless and the networks of support within society. Due to the negative treatment, their experiences are often made worse by victimisation and the perception that they have less access to police protection due to their fractured relationship with the enforcers of these criminalisation practices (SAPS and other law enforcement agencies) (Hopkins et al., 2024). Although these practices are concerning, it is not uniform, as Participant 7 explained *"…most of the time when we come across complaints like that we explain to the complainant, also the complainant lacks knowledge, let's say this person, for example, is urinating against somebody's wall, that is illegal, you cannot do that, but as a police official, dealing with this kind of complaint, you need to make the complainant understand that this person is homeless, number one, this person also lacks knowledge, he is just doing what he needs to, knowing nothing, make them aware that this one has a problem".* Therefore, with adequate insight and initiative, stakeholders and service providers can integrate a humane approach in cases where their respective duties and homelessness intersect. Adopting this level of understanding would go a long way towards bridging the access gap and promoting help seeking behaviour among people experiencing homelessness. As Participant 34 shared, humanity goes a long way *"…Oh, I saw you last week, how are you doing, have you come here and this and that…then they would start going to the services, okay this guy is nice to me, then they'll go and then they'll get support".*

The prevalence of victimisation and its debilitating and marginalising impact, although significantly under-explored and prioritised, has been identified as a pertinent risk factor with regard to the well-being and help-seeking behaviour of people experiencing homelessness (Turner et al, 2018). Susceptibility to victimisation is considerable as Participant 16 shared *"…I think it comes back from the environment they grew up with, it comes from how they have been marginalised, it comes from where and how they have been labelled and it all stems from there. So, it's easy to be bullied, it's easy to victimise, it's easy being downtrodden upon and it's all down there, because their value and worth as a human being have been stripped in a sense".* Accordingly, an increase in awareness of victimisation is required amongst support and care providers when working within the homelessness sector. Therefore, awareness should

translate to a better understanding that "…*there are different layers to victimisation, kind of components of it. I mean, I think that I would agree that homelessness is in itself a form of victimisation"* (Participant 34) and the ability to accurately contextualise these experiences of victimisation. Furthermore, the complex relationship between homelessness and mental health features strongly in victimisation literature, as those with mental health challenges are more likely to be victimised and at the same time, experience more difficulties in asking for help from support services (Boyle, 2023; Turner et al, 2018). Based on the prevalence of victimisation and the high risk of exposure, Participant 21 shared *"…if you on the streets long enough, like they say if you go to the barber long enough, you'll eventually get a haircut".* It is imperative to increase the local knowledge base regarding the experiences and impact of victimisation on people experiencing homelessness in order to contextualise these challenges holistically and produce informed and effective policies and interventions.

Summative note: The section explores the dynamic impact of criminalisation practices and the experiences of victimisation, which reinforce challenges associated with social exclusion and the deepening vulnerability of people experiencing homelessness. The participants advocate for the urgent reframing of approaches to reestablish the required level of trust between stakeholders and beneficiaries, moving away from the punitive and oppressive approaches to more humane and inclusive models of support.

Theme 3: Current directions and advancing inclusive policy reform

Obtaining the perspectives of stakeholders regarding the current legislative, policy and service landscape is an important area of consideration prior to the development of a victim inclusive policy framework for people experiencing homelessness. Building a holistic evidence base to remain contextually sensitive within policy and practice remains a guiding principle (Desmond et al., 2017). Considering the dearth of research on homelessness in general, compounded by the limited literature on more specific areas such as the services provided to the homeless, these perspectives are expected to provide invaluable guidance (Muleya & Mlilo. 2023).

Subtheme 3.1: Stakeholder perspectives on the current policy and legislative environment.

At the forefront of the legislative and policy challenges, is the absence of a national framework on homelessness, which has left an undeniable policy vacuum in which a large portion of the country continues to function (De Beer & Vally, 2021b). Participant 33 explains *"the biggest*

gap, is there's no legislation governing homelessness and I think that we find that NGOs are not following the norms and standards that were set out by the department and the main reason for that is that there is no enforcement of it because there is no legislation". In the absence of a national policy, local governments are expected to craft their own policies and guidelines, which results in little to no coordination in addressing homelessness, as Participant 34 highlights "…*national policies are supposed to drive how we do things, that's why we were doing the work now, because we are trying to understand what would that look like and how can do we do that".*

In the absence of a national policy, many cities, that do not have their own policies on homelessness are likely to consult existing legislation and policies for guidance, which presents with its own set of challenges. Although slightly dated, the appraisal on current statutory responses to homelessness were found to be inadequate in addressing the associated complexities, with the suggestion that national legislation such as the Constitution or the Social Assistance Act (13 of 2004) amongst others, while not dealing directly with homelessness, should otherwise respond to the overlapping conditions or circumstances associated with homelessness (Naidoo, 2010). Participant 35 reports that *"…a lot of policies are silent on homelessness, what further limits us is the absence of legislation, that kind of binds and commits and mandates certain departments to step up and come to the forefront and make these services available".* In support of this, it is evident that most of the existing frameworks are not adequately implemented and, as a result often fail to meet the needs of people experiencing homelessness (Pophaim & Peacock, 2021). As Participant 34 confirmed *"…we did a policy analysis, considering a framework around the pathways and how people's experiences are currently and so on the pathways out, to identify which policies should have an impact around homelessness, should mention it in some way, and the vast majority of the policies don't. Even the housing policies doesn't speak about homelessness and it's because I don't think that it as prioritised as we think it should be".*

Mindful of the above, the Revised White Paper on Families in South Africa (2021) has recently included homelessness. However, rather than offering an in-depth engagement, it highlights the well-known lack and inaccuracy of available data on homelessness, overlooking the critical role of families as a social institution – both as a pathway into and out of homelessness. Participant 38 elucidates at length *"…there are very good policies, but in the implementation it often falls through… there seems to be a need for people to make deliberate connections, so*

sometimes it's the guys in non-profits doing the work, most of them haven't read the policies, so there might be amazing policies and resources out there that can be brought to bear, and it's not done because we don't know what the policies say. It's also the way in which policies speak to each other. If your homelessness policy doesn't deliberately connect to special needs housing and say we can actually, through that mechanism fund physical facilities or housing interventions, it won't happen. It's both, some policies might not accommodate homeless people well enough, some might have everything but we have not translated it to the homeless community and sometimes collaborations between policies don't exist".

Homelessness is inextricably linked to South Africa's socio-political history and the way in which it is addressed is severely impacted by the tendency to minimise the problem and only focus on the publicly visible segment of the population. As Participant 34 reported *"…when you read those policies, you notice how it is coming from a very particular perspective and a particular way of thinking around homelessness".* Moreover, it is seen as a politically sensitive subject, and how it is addressed ultimately depends on how it is interpreted (Sadiki & Steyn, 2021). As Participant 35 explains "…*most of the time, these policies are influenced by our political sphere, if you say national policy, you're already saying it's not something I need to do, but if its legislation, it's something else, because then I can be held accountable if I don't fall in line".* The perspective helps explain the general lack of urgency that is spurred on by the fact that officials are not held accountable, which is visible in how frameworks are created, implemented, monitored and reviewed. Many frameworks become outdated and are eventually superseded by the contemporaneity of the issue. The matter is reaffirmed by Participant 33*"…we still have a norms and standards of 2015, in the Western Cape, and we are currently reviewing it, to update it and do a full overhaul, because we found that, yes, even though the 2015 one was a big improvement of the previous one, a lot changed in the last 9 years, I mean the LGBTQ+, GBV, all those things were never included in the previous one".* Essentially, the factors discussed have a detrimental impact on the delivery of services, but ultimately on the well-being of the intended beneficiaries, as Participant 33 further explained "…*we found things prior to 2010 that's never been updated… where stuff is not actually capturing what needs to be captured and it's not due to them, actively excluding, but just never updating to include all the new things….But as a government, we should be speaking to one another, within the documents, there should be referral pathways. Currently, what health and social development documents are saying, if you read both of them, it will sound like you are speaking the same language, however, just to get a referral to them, is the biggest headache".*

The origin of the concerns highlighted above, goes back to the development process, without comprehensive knowledge base, policies cannot be contextually sensitive and stakeholders will default to generic interventions, which will not reach the spectrum of needs confronting people experiencing homelessness. As explained by Participant 38 *"…these policy outcomes are usually unrealistic and unattainable to the homeless. Often, the process of policymaking, is something one should be interested in, in terms of who makes the policies and who writes it and who is at the table. If it is only officials in a room who has never dealt with homelessness and never experienced it, it is one thing, it gets better maybe if you have researchers who have worked with homelessness, non-profits who have worked with it and you have people who have lived experiences, who have come through it, so the more inclusive, participatory and critical".*

The policy vacuum significantly hampers the concerted efforts and collaboration between government agencies, which is often required to adequately address homelessness (Sadiki & Steyn, 2021). As participant 36 reported *"…with regards to working in silos as government, I don't know how we going to break that, but that thing needs to be broken",* these silos further constrain interdepartmental collaboration, as participant 33 indicated "…*I can't give too much detail on all the policies, because we work in very isolated silos in the department, everyone has their own programme, so I have my own and GBV will have their own".* The void left by the policy gap has a knock-on effect on service delivery, which is compounded by concerns related to the lack of political will and support by the South African government (Batchelor-Hunt, 2023; Powell et al., 2021). Correspondingly, societal values are often revealed, not through stated ideas, but through the actual allocation and distribution of funds (Hopkins et al., 2021). Lastly, the costing of policies and how it impedes on the reach of subsequent interventions is another concern, as Participant 38 shared *"…the Tshwane policy took four years to be adopted and it was adopted without any budget, that makes no sense, because you need the budget…there are protocols that are almost killing the intention of the policy".*

There remains a considerable amount of work to be done at a policy level, as Participant 34 explains "…*now with the national policy, how do we make them align, because they are established already, the ones that are there"*, referring to establishing the required connections between new and existing frameworks. Furthermore, grassroots stakeholders have expressed how the policy gap has hindered sustainable and effective service delivery, which fail to embrace local guiding principles of *Ubuntu* and *Batho Pele* that promote humanistic values and inclusivity in service delivery. To echo Participant 35's concerns "…*a national policy,*

won't cut it in my opinion, yes it will be a nice framework to have, but it won't cut it for where we find ourselves now, the problem of homelessness becoming a pandemic at the end of the day and the country doesn't know how to deal with it". Therefore, there is an urgent need to introduce a policy intervention to streamline services and communication between departments, that addresses the lack of understanding some government departments (outside of social development) have, which presents as a challenge, especially in those cases where the homeless require interventions beyond the scope of work and capacity of social workers (Muleya & Mlilo, 2023).

Summative note: The section deals with the knowledge and perspectives of stakeholders regarding the existing legislative and policy frameworks they have at their disposal to perform their required tasks. The findings reveal that the absent national framework is evident at a grassroots level as there are widespread reports of a lack of coordination, collaboration and cohesive approaches to effective policymaking and implementation.

Subtheme 3.2: Stakeholder perspectives on the quality, accessibility and delivery of services to people experiencing homelessness

Based on the foregoing sections, the multiple and complex challenges that exist within the South African homelessness sector, from a policy and practice perspective, significantly impact the quality, scope and delivery of essential services. With the limited literature on the specific services provided to the homeless, those that do cover this aspect, report a need for improvement in services and support (Boyle, 2023). With people experiencing homelessness, the often overlooked, human element, should be emphasised as Participant 33 reports *"...they look at it from a business perspective, keeping the NGO afloat and I do think that the humanity, the victimisation and the inclusiveness gets lost"*. It is, therefore, important to create environments in which all human beings are acknowledged and receive equal treatment and any barrier that prevents this, should be addressed accordingly (Powell et al., 2021). With the lack of guidance and governance, Participant 33 claims that *"...we try our best, from the constitution to govern and guide, to uphold those rights... Unfortunately we do find that a lot of rights of the clients are not being adhered to, a lot of them would say they are considered like being in jail because they've got time frames, they are advised what they can do and what they can't do, who they can see, who they can't see, education isn't freely available and they get the basics, food, water and shelter, that's it*". Participant 38 also expressed concern regarding how some faith-based organisations force their religious affiliation on clients, before

any services can be accessed. As mentioned previously, the rights of people experienced are already severely constrained, and reports of this nature indicate that supportive structures could be inadvertently infringing on the remaining rights of the clients.

There is a tendency to primarily focus on the interactions of the homeless with health care institutions and police. With reference to health care services, it is known that people experiencing homelessness do face challenges accessing adequate healthcare, and when they do, they might be subjected to poor treatment and have a negative experience (Wentzel & Voce, 2012). Furthermore, the tendency to blame the homeless individual for their ailments further perpetuates the negative experiences and sometimes amplifies resistance to seek assistance, as Participant 33 reports *"...I would say health is definitely a big issue, once someone is in substance abuse, which is in majority of cases for homeless people, they don't get access to healthcare as they should, the clinics would say no because of your substance abuse, you aggravated this concern or that concern, or clashed with your medication and the default on a lot of things like on the ARVs and TB medications".* Typically driven by existing perceptions, stereotypes and stigma, as mentioned previously, the homeless often have to navigate rather complex environments, sometimes unaware of the inherent traits that accompany them.

Given the diverse composition of South Africa's homeless population, the reality is that access to services may become more constrained due to a phenomenon referred to as *stacked stigma.* This is when stigma associated with race, gender or sexual orientation is combined with those of homelessness, thereby intensifying the experience of stigma-induced barriers to equal access (Weng & Clark, 2018). It is, therefore, important to remain mindful of its impact, as Participant 38 confirmed *"...I think because of the stigma of course, sometimes what people look like, and all of that, there's is just a lot of stigma, so healthcare, clinics, people sometimes experiences, it also depends, there are clinics and hospitals where the staff are better, but a lot of times we are just hearing the stories of how people are being treated in these spaces, with great stigma and prejudice".* While not over-emphasising the negative experiences, it is important to highlight that a policy which governs, and guides contextually sensitive and evidence-based initiatives should be implemented or enforced by stakeholders who are not influenced by stigma driven perceptions. The creation of inclusive health care systems is particularly evident in the existing literature; this initiative would ensure the facilitation of accessible services underpinned by respectful and dignified treatment (De Beer & Vally, 2021b). The police on the other hand, represent a critical and complex stakeholder in the lives of people experiencing

homelessness. Due to the intersectionality of their challenges and vulnerabilities with the activities and priorities of policing, this relationship is an important one to expand on within the context of contemporary urban dynamics as the nature of the interactions can have a profound impact on policy outcomes, service access and the subsequent well-being of people experiencing homelessness (Hopkins et al., 2024; Kyprianides & Bradford, 2024). As Participant 31 reported *"…then, due to their position or opinion about it, usually determines how they handle homelessness. So, the police and of the other guys are very punitive in the way they deal with them"*.

The concern was discussed previously, but with the police, as active enforcers of by-laws and other punitive measures directed at managing and dealing with people experiencing homelessness, the other needs around services and vulnerabilities are often overlooked. This reinforces the need for interventions that address the problematic understandings of homelessness, which impact on the nature of services and ultimately impede policy outcomes, rendering the proposed strategies obsolete. Additionally, some social workers are of the opinion that other departments lack understanding and that police, specifically, do not have the required level of comprehension and often believe that homelessness is a social work issue (Muleya & Mlilo, 2023). Participant 7 provided insight into the value of training to assist with this role confusion *"…training is needed, to back you up, at least it is better to do something with the knowledge than trying to do something without that knowledge… training will open up our minds, how to treat them, because sometimes we are careless, not careless because you want to be, but careless, lacking knowledge of how to act, you are confused, you don't know what to do with this person, must I take him and arrest him, why? Is it lawful, must I leave him here?"*.

Furthermore, intervening and establishing a better relationship between the police and people experiencing homelessness, through enhancing the level of understanding, could prove to be useful as many times the police are the homeless persons first point of contact back into society. In terms of policy guidance, Participant 2 expresses "…*there are so many at the moment, so it's difficult to think of ways to accompany them, if I can put it that way"* and the lack of government support "*with no kickback from the state it does make it difficult, what makes it even more difficult is the number, that's what makes it tough to find a way to work around it. But with the support the state is giving to those trying to help, it's not much"*. This confirms the notion that with clearer policy guidance and adequate support from government,

stakeholders might have a better understanding of their roles and responsibilities, with the added value of being supported by resources and funding. However, despite the absence of policy, some stakeholders have taken initiative and assisted people experiencing homelessness. Participant 12 shared his experiences and constant struggles with working with members of the homeless population, but believes *"the biggest thing is, treat them as any other citizen in South Africa, they have got all the rights, all the access to everything out there that everyone else has got. It's just that mindset that you want to treat them less because they tend to get false complaints from them and things don't always stick, but that's a challenge for the policeman, to say this still a human being, with all the rights afforded by the constitution, and you should treat them the same".*

Research on shelters is rather limited within the South African context; however, the prevalence of homelessness remains reflective of various stakeholders' inability to honour their constitutional commitment to protect, safeguard and provide the necessary services to meet the most basic rights of all citizens (Manomano, 2022). Even so, shelters continue to assume a central role as one of the most active stakeholders in the journeys of people experiencing homelessness as they navigate life towards identifying pathways out. Through the provision of temporary shelter, basic needs and limited upskilling, some shelters act as a much-needed anchor for those who find themselves in this peculiar situation (Pophaim & Peacock, 2021). Within the scope of the roles they play, shelters can make or break an individual's road to recovery. It is, therefore, important to determine the potential strengths and gaps that exist with the shelter space, which will aid in better informing the creation of an inclusive framework that aims to address the various practical barriers. As Participant 35 stated *"...you can have all those spaces available, but you don't know if those people really want to stay there, so you can end up with empty spaces".*

Most of the participants from the shelter space were social workers by profession, who represent the grassroots stakeholders within the homelessness sector. Social workers report experiencing a void due to the absence of a national policy, as there have been several gaps that have been identified which make it challenging for them to fulfil their respective duties (Muleya & Mlilo, 2023). In line with this, Participant 23 reported *"...I think because there is no overarching legislation that actually dictates how and what, but I do feel and do believe that service providers are doing the best that they can, it is very difficult and especially if you are in a setting where you don't have the skill and the knowledge especially about substance*

abuse, because most of the population, that is their challenge…I think that service providers are trying their utmost best, in the capacity that they have to provide best practice basically, to their clients". Furthermore, social workers maintain that they are in a good position to provide consultation to the development of a national policy, as they are well versed in issues assisting the homeless and can assist to avoid any gaps in the document (Muleya & Mlilo, 2023). Contrary to this, most participants mentioned not being fully in tune with the regulatory environment as Participant 27 shared *"…we are in crisis management and crisis mode, on the ground running, there is no time to read and be trained and all that, there is not enough time to equip yourself fully"*.

Concerningly, Participant 35 reported that *"…shelters don't have the means and the staff to deal with clients who have mental health challenges"*, which is worrisome given the complex and synonymous relationship between homelessness and mental health; Participant 35 further explained *"…not social workers, definitely not social workers, obviously because of how we were trained, we definitely not equipped, if I look at my teaching, we weren't taught for this, I have approached the psychiatric unit at* [redacted]*, to train some of our social workers, but that's just for screening, that helps a bit, but now when we refer to them, they tell us there is no space*". Participant 33 acts in an oversight role and provided the following perspective *"…young social workers, we find that in the shelters we've got a, quite a quick turn over with social workers, they get burnt out very quickly. I don't think they always realise what type of intervention is needed and it's too much for them, or they not fully equipped because you are released from university, but you don't have all those skills that you will find in the field"*. Policies are not contextually sensitive to handle the intricate nature of providing services to homelessness, which is also indicative of the lack of consultation and that policies have primarily been developed from a top-down approach, as it does not address the basic challenges experienced on the ground. Service providers have to manage the intersection of homeless and many other social and health related challenges, something that current policy responses do not cater for, as Participant 22 shared "…*I think everyone should have access to basic needs, but then again, with the homeless part and addiction, it becomes difficult to categorise those two things, I mean if you're just dealing with the homeless part it becomes a little bit easier, but now if substance abuse is involved, you need more environments, so that you can separate the two eventually"*.

Violence and crime are daily challenges among people experiencing homelessness (Tenai & Mbewu, 2020). Participant 15 shared how street connections can encroach on a client's life, within the shelter context "…*the client was in the safe space and the boyfriend was still living on the streets and because the boyfriend is using his girlfriend for prostitution he jumped over the fence and took her by force out of the safe space and that's when we involved the police".* Challenges such as these are indicative of the extent to which a policy is required to provide support and guidance, especially in terms of a healthy level of communication and collaboration between stakeholders. Participant 15 further explained the constrained environment in which he is expected to provide services "…*challenges include placements, shelter placements as well as doing referrals for in-patient referrals. Because you know, I am thinking of a heroin client, it is very difficult. You first need to start the whole process; you know putting the client first on medication and all those kind of stuff. I also think that is a challenge, but then I also think another challenge is women and children's placements, when a mother comes with here with her children and there is not really a lot of [space] here in the shelter for them".*

Another rather complex task, that has bearing on access, funding and resource distribution, is the categorisation of individuals based on their presenting characteristics and challenges. Participant 35 shared *"...there is a growing need for family shelters, where the whole family ends up on the street…and you find this generational homelessness"*. Many shelters are not equipped to accommodate an entire family, as the participant mentioned that his department was currently funding the first of its kind. Furthermore, Participant 36 shared an emergent finding, and it is worthwhile to quote her at length:

"…Some of them are not in the right frame of mind, because of drugs, because in our shelters and this a very, very big gap…people come into the shelters and then they have Dementia or they have Alzheimer's or some of them, they come into the shelter but they are elderly people and they are actually supposed to be under older persons, where they are supposed to be in the home, but now they are sitting in the shelter….and the reason why I'm saying this to you, in one of the places, someone was killed, by another beneficiary because the beneficiary had a mental disability, but the person that was killed was an older person, so in the shelters, you have every person under the same umbrella, so the problem that we are sitting with is that, that thing of how do we then say to a person with a mental disability you can't stay here, how? We can't, we not allowed to do it, so now you're sitting with older person, mental

disability and all that. So, if we can say, Department of Health, you need to come in here, you need to help us with this, now we also have this thing, the people with mental disabilities need medication and in some instances, it's like, we can't do this, only a registered sister[nurse] *can do this, under this Act and that Act, so where does it leave the shelter, the management, so these are really the challenges that we have been identifying, it's that big gap, having everybody under the same umbrella but unfortunately people with different challenges, and then you have that constant fights and things…. you have the admission policy and processes in places, however, it's very difficult, we see it all the time"*

The information shared in the quote above has a myriad of implications for both policy and practice. There is an urgent need to provide guidance regarding the categorisation of people experiencing homelessness and the establishment of need-specific shelters and services, which will significantly reduce the looming dangers captured in Participant 36's response. The City of Johannesburg's Policy on Homelessness (2024) proposes the prioritisation of vulnerabilities, which is now proven to be even more problematic in light of the information presented above. Given the nature of homelessness and the challenges that confront the entire population, exclusionary criteria have no place in the service sector for an already vulnerable population. Instead, categories need to be established in order for diverse groups to be separately housed and serviced in safer, more conducive environments. Guided by the dominant perceptions and stereotypes, the mainstream notion is that people experiencing homelessness demonstrate active resistance when it comes to accessing services, thereby justifying the punitive approaches taken to address homelessness. Regardless of the growing body of knowledge around homelessness and the barriers they experience in accessing essential services, mainstream ignorance prevails. Participant 34 provides an insightful perspective regarding the packaging and delivery of services to people experiencing homelessness *"…a primary challenge is how services are provided. We often talk about accessibility and availability, that is fair, but we don't have enough services, diverse services around health, mental health and substance abuse, our services are restricted in the type of services we offer, but also how we offer those services".*

One of the more contemporary issues regarding the availability of services relates to how evictions and subsequent shelter or safe space placements are managed, in order to meet the constitutional requirements of the process. Concerningly, Participant 17 reflected on this *"…I do think that we don't have enough facilities and services to assist them. Because realistically,*

no one should be living on the street" which is further exacerbated by the concerns raised by Participant 25 *"...you can place them in a shelter, but if we are not able to help them phase back into society, which our programme is trying to do, they then aren't able to earn an income... if they are not being phased in any programme, how are they going to afford longer term shelter fees, and then at some point the shelter is going to ask them to leave, so they going to land up back on the street, so it stays that vicious cycle, because there is nothing really put in place to help them rehabilitate back into society or reintegrate".*

As mentioned, shelters have a significantly constrained service reach and their ability to outsource services is just as compromised as a result of the lack of communication and collaboration, as Participant 21 explained *"...there are many places that are rendering services, it's not always as accessible, it's about that referral pathway being created, because some do wonderful work with persons with mental health issues, but it's hard to gain access…We've been trying to get three of our clients services there, it's been a year and a half... I think there are services out there, but I mean, it just the referral pathways are not strong, the communication between facilities are not strong, and our public health system, it's just over populated, there's just too many people trying to access services….for psychiatrist you can wait three months, for an appointment, what do you do with a client in the three months that they are trying to wait to see someone, you know there's a problem, and you can't move them anywhere from there, you can't gain access to a grant, or anything until we see the psychiatrist"*. Participant 35's input further intensified the gravity of the challenge "…*the availability of mental health care services, that is a big concern, I heard the day that we just have close to 20 or 30 health care services across South Africa, that's a concern as well, and the limited bed spaces that we have".*

The challenges presented above are among the worst and most complex scenarios; however, some cities do not even have the most basic resources, as participant 20 reported *"it is rather difficult, especially shelters, there aren't many here in Bloemfontein, and those that are there, are already full".* Based on the findings presented thus far, it is evident that a mechanism is required to bridge the ideological, contextual and practical gaps to promote the level of accessibility and inclusivity within the service sector for people experiencing homelessness. The following section documents the participants' views of the necessity and the content that would have to be included.

Summative note: As a continuation of the previous subtheme, the section deals with how the policy gap impacts the quality, delivery and accessibility of services for people experiencing homelessness. The findings indicate that many grassroots stakeholders attempt to meet the most basic needs of beneficiaries, despite the limited government support and funding provided. The participants also identified several practical shortcomings that need to be addressed urgently, including overcrowded facilities and a general shortage of service centres.

Subtheme 3.3: Stakeholders' contribution towards a victim-inclusive policy framework for people experiencing homelessness

Homelessness is arguably one of modern South Africa's most shameful expressions of systemic failure due to the inability to provide sustainable support and viable pathways out to those in need. The mere fact that street or informally housed populations exist disconnects us from the constitutional principles of the democratic vision, where public services were not meant to be seen as a privilege but as a legitimate expectation (White Paper on Transforming Public Service Delivery (*Batho Pele*), 1997). Influenced by the proposed establishment of inclusive communities, the current study builds on the findings from the stakeholder engagements to work toward the development of victim-inclusive policy framework. The framework essentially aims to bridge the gaps identified by the participants in order to facilitate the deliberate creation of equitable and accessible infrastructure and services for people experiencing homelessness (De Beer & Vally, 2021). A similar initiative has been introduced by the United Nations (UN), with other social and health related issues, which aims to reduce stigma and discrimination, sensitise and train service providers, law and policymakers, law enforcement and empower beneficiaries with the required information to promote access to services (United Nations, 2019). Most of the participants were in favour of the contribution, as Participant 32 stated *"…I don't even think it's an option not to do so, we are actually obligated, in terms of human rights obligations and the constitution, everyone is entitled to dignity and equality…in South Africa in particular it is something that is closely linked to our history of institutionalised racism, so dealing with this manifestation of homelessness is, quite critical…with the different policies we have, I have never come across a policy specifically dealing with homelessness and also this approach to dealing with victimisation, concurrently there is the element of criminalisation, because people are generally treated as less than human, all the by-laws and evictions, so definitely there is a need for it"*.

The framework, therefore, aims to address structural barriers that diminish the rights of people experiencing homelessness, restricting the acknowledgment of humanity and equality, by adopting the ideals of *Ubuntu* to introduce social justice elements that work against oppressive structures and the penalisation of behaviour caused by factors external to the individual (Mahlangu & Kgadima, 2021; Powell et al., 2021).

To realise the outcomes outlined by Participant 30 "…*give them the same service as you would give the other civilians. Especially when they walk into a clinic or a police station or where they need help. Just be available and give them the service, without judgment".* The inclusion of *Ubuntu* principles stems from the insightful discussion with Participant 18 *"…I would say, maybe it is because we let the spirit of Ubuntu die. Cause in the olden days, I didn't even know of anyone that was homeless, because you would find that in your family, someone would have been adopted, a whole village would be responsible for raising the child, nowadays it's just people doing their own thing and catering to their own families, what happens next door, is now none of your business".* The adoption of this principle could lead to the mobilisation of community-based resources, to help drive the establishment of inclusive communities. Furthermore, stakeholders should centre their service delivery projections around the eight constitutionally founded principles of *Batho Pele,* to promote the acknowledgment of the human element that is frequently disassociated from homelessness and encourage the inclusion of the homeless as a vulnerable priority group on all institutional budgets and agendas (De Beer & Vally, 2021b). By emphasising a human rights-based approach, the projected outcome of the integration of these principles will reduce the impact of negative perceptions and enhance the promotion of inclusive and stigma free services for people experiencing homelessness.

As part of the developmental process to promote inclusivity for people experiencing homelessness, it is important to establish a basis for what would constitute a conducive context for its implementation. Government buy-in is an essential component to ensure the success of any framework, as Participant 37 said *"….part of the solution is to help government see, that with the things they do, with a small tweak, could be accessible to the homeless".* The government would contribute the political will and determination required to root out stigmatisation in all social, economic and service spaces, to ensure serious repercussions for those who treat the vulnerable with less than the entitled dignity and respect (De Beer & Vally, 2021). With sufficient support the same success reported during the pandemic can be achieved, as outlined by Participant 38 *"…we had 27 shelters opened in 10 days, temporary shelters that*

didn't exist before, resources were provided based on your data, so all these places had to provide on a daily basis, into a central system, data on the names and the number of people, which they religiously did…It worked so well and there's no reason it can't work every day, after lockdown most of the places closed down, it couldn't be sustained without government".

The framework intends to *"…tie the pieces together, to see how a lack of an ID and lack of training connects to the lack of health care* [that way], *you're not only addressing individual symptoms but some of the underlying connects. Hopefully what it does is remind us that this is not an easy problem, this is a very complex and multi-layered problem"* (Participant 37). The policy must *"...give you a framework within which you can work, but it must not be so prescriptive that the nuances and contextual realities, between places* [are lost]*, it can't be overregulated"* (Participant 38). Adhering to the recommendations made by the participants, the framework will incorporate mechanisms in which a flexible and contextually sensitive environment is prioritised. Guided by an evidence-based approach, Participant 35 suggested that the integration of the Individual Development Plan (IDP) be considered, "...*the idea is always individualistic, with the development of an IDP, having certain goals with the social worker to get you to a certain point of reintegration or reunification".* With this mechanism in place, stakeholders, that act as the first point of contact, will be able to formulate an experiential definition supplemented by their expertise in identifying challenges, mobilising external stakeholders/services, and proposing potential solutions.

The concern around collaboration remains a reality *"…I think a lot of work needs to happen on the stakeholder level, to make all those other resources available that is outside the scope and reach of our mandate…without legislation…you can do this by starting a memorandum of understanding or agreement with partners, to make those other services available"* (Participant 35). Another challenge identified by Participant 35 is related to *"…when a client comes in there's other challenges that the client is presenting, for example, there is mental health, there is disability, then there is the criminal element, and the majority of the programmes don't cover all of those specialised needs that the client presents as well, which is also a gap".* The gap identified here and many of the other factors presented throughout the paper call for not only well-trained stakeholders, but stakeholders who are able to demonstrate ingenuity in the way they think and solve problems.

As Participant 38 stated "…*there is no formal course in South Africa to focus on this point* [homelessness]*, there is a need for that, that can just help think people think through,*

theoretically, how do we contribute to stigmatisation, how do we contribute to keep people independent and unfree, what are the policies saying, are there policies we don't use well, what are the things that we shouldn't do". However, as with many ideas, this would work well on paper, but contrary to Participant 38's perspective, Participant 21 shared her views *"...I learnt more of it, just working in the field, I think your training will only get you so far, but it's actually working in the field, hearing from homeless persons, you know, seeing how they live…I think that broadened my way of thinking around homelessness".* Common ground can be reached in this regard, as Participant 17 shared *"...I have got theological training...we can have only so much theory, which is great, because that comes from the research of somebody else, but the practical elements you will need in the space".*

The final consideration for the development of the victim inclusive policy framework includes the involvement of appropriately skilled and trained stakeholders, who are able to demonstrate the required level of ingenuity to develop and utilise a sustainable network of referral pathways. The introduction of this mechanism, as part of the broader framework is intended to facilitate inclusive and accessible service delivery to people experiencing homelessness. Participant 35 shared *"...some shelters do have a kind of a flow chart in terms of what is happening, the client comes in, in terms of assessment. If they present themselves like that, then how do you properly screen and do proper referrals, their policies may be silent around screening and victimisation…additional resources can always be useful, services will need to be broad for clients, when you talk about victimisation, because victimisation can mean different kinds of things".* Moreover, Participant 23 shared the success of their established network *"...I think because we've built so many networks, with local clinics and the day hospitals and with law enforcement and the surrounding shelters, at this point, where we are, it is a bit easier, but only because of the network...if it had not been there it possibly wouldn't be easy to access services, because I don't have a referral letter and I don't have anything else…I think such a framework would assist the client out there that maybe is not ready for this type of service* [shelters], *to actually access other services out there".* The findings presented provide a justification for the development of a victim-inclusive policy framework, one which not only provides a guideline for inclusive practices but calls to task all relevant stakeholders to help people experiencing homelessness navigate and access the service sector space in a more humane and dignified manner.

Summative note: The section highlights the profound systemic failure represented by homelessness. It emphasises the importance of acknowledging and addressing the disconnect between policy and practice in the homelessness arena. The introduction of the victim inclusive framework will serve as a mechanism which mobilises local strategies and principles to navigate and address the intersecting challenge that homelessness presents in a contemporary South African society.

Conclusion

Despite the concerning levels of uncertainty and siloed functioning reported by many stakeholders, the pockets of success shared by participants do provide hope for a more inclusive future in the homelessness sector. One key takeaway from engagements with the respective stakeholders is that South Africa has a diverse, skilled and highly capable group of individuals, who are committed to addressing homelessness. However, among the challenges that were identified, a critical challenge remains in bridging the gap between policy and practice. The evident disconnect has resulted in significant implementation constraints across various service sectors. By integrating the findings from the different phases of the broader study, the aim is to develop a contextually sensitive and flexible framework, one which will empower stakeholders to apply their skills effectively and facilitate the creation of an inclusive environment for one of South Africa's most vulnerable populations. We are naturally inclined to work towards the creation of new mechanisms, or what we think we need, but the reality is that we often don't need more of what we already have, we simply have to become empowered to learn how to do better with what we currently have at our disposal.

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Data availability statement

The participants of the study did not provide written consent for their data to be publicly shared, so due to the sensitive nature of the research supporting data is not available.

Authors contributions

This is a sole-authored paper and there are no co-authors.

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ORCID iDs

Jean-Paul Pophaim https://orcid.org/0009-0001-8765-5485

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Part 5: Discussion, recommendations and conclusion

The concluding section of the thesis considers how the overarching aim of the study was met. The goal of the thesis was to develop an evidence-based victim inclusive policy framework in order to improve local responses to homelessness. Accordingly, a mixed method approach was adopted to explore several key areas within the homelessness domain, including policy, lived experiences, and practices related to service delivery and redress. The section revisits and reflects on the core findings in relation to the objectives formulated in fulfilment of the aim of the study, as it has been presented in Parts 2, 3 and 4 of the thesis. The first objective involved the use of document analysis to conduct a comprehensive appraisal of local and international policy and legislative responses to homelessness. The second objective employed a survey research design with a quantitative approach and used a questionnaire to determine the experiences and service needs of people experiencing homelessness. This method allowed for the inclusion of personal accounts, using open-ended questions, to illustrate the lived experiences of the respondents. The third objective used a qualitative approach to obtain input from stakeholders, policymakers and service providers in the homelessness domain to develop an inclusive policy framework. Drawing on insights from the respective studies, Part 5 consolidates the key findings and offers practical and ideological insights to address the overall aim and present the contribution of the study, which is the evidence-based victim inclusive policy framework (presented below).

Following the discussion of the key findings of the study, an overview of the strengths and limitations of the research will be provided, general recommendations and considerations will be offered for future research and implications for policy and practice, followed by the personal reflection of the candidate's doctoral journey and concluding remarks.

Conclusions pertaining to the fulfilment of the objectives of the study

As per the General Academic Rules and Regulations (2024) of the University of the Free State (UFS), the manuscript(s) must function autonomously as self-contained entities. However, the candidate must be in a position to motivate the links between the autonomous, interrelated publishable manuscripts at the end of the assessment process. Accordingly, Table 1 demonstrates the links between the three manuscripts with reference to their main objectives, autonomous contributions, linkages to the other manuscripts, and overall contribution to the thesis.

Table 1: Establishing the links between the autonomous manuscripts and their contribution to the thesis.

Manuscript	Main objectives	Autonomous contribution	Linkages to other manuscripts	Overall contribution to the thesis
Manuscript 1	Document analysis on local policy responses to homelessness.	Provides a comprehensive overview of local responses, through application of the health policy triangle examining the context, content, actors and process dimensions related to the policies and their implementation	The identification of the strengths and weaknesses of policy delineated the scope of inquiry and key areas of investigation in manuscript 2 and 3.	Provides a theoretical basis on which the direction and contribution of the thesis were built on.
Manuscript 2	Quantitative study on the experiences of victimisation and service needs of people experiencing homelessness	Provides a contextual evidence-base to inform policy development that considers the lived experiences of the intended beneficiaries across the full trajectory of their homelessness experience.	Provides an improved understanding of the dated contextual data identified in the policies. The manuscript highlights the importance of a more nuanced approach as opposed to the rigid structural perspective present identified in the current interventions and responses.	Fills a large contextual gap that was identified by the document analysis. Provides an improved understanding on homelessness, victimisation and the nature and patterns of service access among the homeless and how it can be improved. Allows for a better informed and more victim-orientated and inclusive response.
Manuscript 3	A qualitative study to obtain inputs from service providers, stakeholders and policymakers regarding the development of a victim inclusive policy framework.	Captures stakeholder perceptions, experiences and inputs to inform the development of a victim inclusive policy framework.	Confirms the strengths and weaknesses identified in manuscript 1 and identifies the ways in which the challenges associated with people experiencing homelessness are currently being addressed and how that can be improved, from a practical perspective.	It validates and expands on the information presented in manuscripts 1 and 2. It provides practical and realistic insights from stakeholders which ground the development of the inclusive policy framework.

The manuscripts submitted for review presented in Parts 2, 3 and 4 have produced distinct findings in relation to the three objectives of the study. The following section outlines the main conclusions drawn from the findings, highlighting the attainment of the overall aim and the development and presentation of the contribution of the study.

Analysing local and international policy and legislative responses to homelessness

The first manuscript (Part 2) presents the partial fulfilment of the first objective, focusing solely on the analysis of local policy responses to homelessness. As part of the second segment of the objective, international policy and legislative responses were perused as part of a preliminary scoping review (outlined in Part 1) to determine the relevance, applicability and subsequent inclusion in the document analysis. After reviewing the various international frameworks, it was determined that homelessness is indeed context bound (De Beer & Vally, 2021a:12). Based on the initial review, it was decided to only include the local responses to homelessness in the document analysis, which provided several insights informing and guiding the second and third phases of the study (presented in Parts 3 and 4, respectively). The analysis revealed that local policy responses to homelessness were developed to reflect a particular perception and orientation of homelessness. The findings confirm that the absence of a national policy on homelessness significantly hampers coordinated, actionable and sustainable outcomes.

Considering the quality and state of local responses, it is clear that homelessness in South Africa is consistently overlooked and is intermittently addressed in a rather fragmented and uncritical manner (De Beer, 2021:144; Muleya & Mlilo, 2023:107-108). The policies reflect a lack of collaboration between stakeholders, as many interventions appear to be welfare orientated, further perpetuating that homelessness is mainly viewed as a social welfare issue. The current position inadvertently disregards the several other challenges confronting people experiencing homelessness, which often amount to gross human rights violations (De Beer, 2021:144; Muleya & Mlilo, 2023:107-108). Combining the document analysis with the dimensions of the Health Policy Triangle (HPT) by Walt and Gilson (1994) proved useful as it allowed for the identification and sensible alignment of the shortcomings present in the respective policies. With reference to the context dimension, the analysis revealed that South Africa and the persistent issue of homelessness reflect laxed compliance with both international and constitutional obligations, with the historic political and institutional fault lines exposed as recently as the COVID-19 pandemic. During the global crises, South African societies were unable to adequately, rapidly and sustainably respond to homelessness, which demonstrated

just how neglected homelessness, as a social issue, had been for several years (De Beer & Vally, 2021b:314). The initial realisation of the longstanding impact of the lack of policy and legislation sparked conversations for the development of a national policy on homelessness, which is currently at the Green Paper stage. The policy content reflects the general dearth of local research on homelessness and its related conditions (Pophaim & Peacock, 2021:72; Pophaim, 2021:260; Sadiki & Steyn, 2021:60), which is reflected by a lack of comprehensive understanding of homelessness, the conditions that lead to it, and the reasons why it continues to exist. A lack of contextual awareness was evident in all of the policy documents, which resulted in the development of ambitious directives without adequately accounting for the constrained environment, characterised by inequality, housing shortages and high unemployment and poverty (De Beer & Vally, 2021a:5; De Beer & Vally, 2021b:301-302; McKeever, 2024:1; Marutlulle, 2021; Tenai & Mbewu, 2020:3; Trading Economics, 2024). Without due consideration of the constrained contextual environment, these factors will continue to perpetuate and exacerbate homelessness, while simultaneously leading to continual policy failure at the implementation stage.

Homelessness within the policy space is mainly problematised through a rather restricted and outdated lens. While data scarcity is often cited as a pertinent challenge, the policy development process was still driven by stereotypical perceptions, structural ideologies, and a rigid top-down approach. An important finding is the constrained nature of current definitions, which reflects the limited understanding and inadequate contextualisation of homelessness. The risk of exclusion by virtue of not conforming to the parameters of policy definitions is a critical matter. Based on the shortcoming identified and the longstanding lack of a universal definition, the study capitalised on this aspect, venturing toward finding a practical solution to address the shortcoming (to be expanded in the realisation of the second and third objective). Another notable finding, stemming from the inadequate contextualisation, is the lack of acknowledgment and attention regarding the multiple and diverse forms of victimisation that people experiencing homelessness endure. Some of the policy documents allude to the vulnerability aspect but fail to extend the matter to the respective directives and actionable outcomes of the policies.

The policies were developed with the overall purpose of advocating for the enhancement of the lives of people experiencing homelessness. However, a critical flaw remains visible in the tone of the respective documents with reference to the phrasing, which is often indicative of the

negative perceptions commonly held towards people experiencing homelessness. The careless manner in which the documents are phrased needs to be addressed, as it can be perceived as overly oppressive, criminalising and generally counterproductive (Mashau, 2017:417). With people experiencing homelessness known to exist in a state of absolute vulnerability (Ellsworth, 2019:98; Pophaim, 2022:61), well-informed policies and interventions are expected to incorporate mechanisms, in the form of services and infrastructure, to mitigate the negative impact driving their vulnerability (De Beer & Vally, 2021a:10-11). The imbalanced regulatory alignment was a particularly concerning finding, as the polarised approaches to homelessness (punitive versus compassionate) can amount to significant systemic conflict, which could impact the effectiveness of policies and their intended interventions.

The findings related to the actors, as set out in the respective policy documents, provide justification for engagement with people experiencing homelessness and stakeholders at various levels of service delivery (in fulfilment of the second and third objectives). The documents do not reflect the integration of collaboration or consultation with any of the aforementioned stakeholder groups, which consequently results in the inability to mobilise the correct team with the required skillset to deliver on the policy directives and meet the diverse and individualised needs of people experiencing homelessness. The constrained contextualisation, misinterpretation and subsequent misalignment of stakeholder roles and responsibilities is another important finding, as the required roles are not fully elaborated on in the documents, and any required action could be neglected due to rigid mandates and siloed functioning of government departments in South Africa. The policies overestimate the simplicity in the availability of services and fail to account for the disenfranchised status of people experiencing homelessness, which often manifests in stigmatisation, discrimination and social exclusion.

The current list of stakeholders by no means reflects an exhaustive tally of what needs be met, which is another by-product of the inaccurate contextualisation of the homelessness problem. The final aspect related to the process dimension is how constrained the policies are, not only in intervention but with the obligation to monitor, review and update policies. The implementation of policies takes as long as the period of review (sometimes longer), and at times it is done without the required allocation of funding and resources, which makes for a rather problematic and bleak outlook in terms of the required reduction, not to mention the farfetched prevention and distant eradication of homelessness in South Africa. Although

international policy and legislative frameworks did not form an integral part of the manuscript discussion, the analysis of local policy responses provided for practical, valuable and contextually sensitive recommendations and a sound basis for the exploration of the second and third objectives of the study.

Determining the experiences of victimisation and service needs of people experiencing homelessness

The second manuscript (Part 3) presents the fulfilment of the second objective, focusing on determining the experiences of victimisation and service needs of people experiencing homelessness. The data obtained during this phase of the study provides a comprehensive overview of the life course, experiences, and developmental trajectories leading to the onset of homelessness. The holistic account deepens insights related to the complex interplay between contributing factors and negative outcomes – such as victimisation – commonly associated with homelessness. In a sizeable and diverse sample, a novel finding and contribution emerged in the establishment of an experiential definition of homelessness, constructed by the respondents and, based on their lived experiences. The novelty lies in the fact that respondents were more emotionally attuned to their homelessness episode than one would expect, selecting more individual-level factors to define their experience, rather than the anticipated dominant structural factors reflected in existing definitions and the policy documents that were analysed. This information contributes to addressing the longstanding lack of a universal definition and, through the identification of the most prominent pathways into homelessness, demonstrates the need to carefully evaluate the unique pathways – or combination of pathways – as they manifest in each individual case. The findings show that the common structural causes are less frequently selected as prominent pathways and are frequently preceded by individual-level factors and influences.

The findings related to the formulation of an experimental definition and the complex and diverse manner in which pathways interact disregards the commonly held homogenous ideology and dismisses the universal application of the historic one-size-fits-all approach to addressing homelessness (Groenewald, De Beer, Perrier & Makusha, 2023:10). The findings advocate for contextually sensitive responses, which are required to flexibly address the diverse needs of people experiencing homelessness (Desmond, Timol, Groenewald & Sausi, 2017:3). Through an improved understanding of homelessness, a realistic baseline can be established, which will lead to more informed responses that may prove to be more effective and

sustainable, also with longer-term outcomes (De Beer & Vally, 2021a:3; Sadiki & Steyn, 2021:58). The survey findings further confirm that the pathways identified are closely linked to the risk factors for victimisation, which proves that it is worthwhile to understand the intricate interplay of the various factors, compounded by the dangerous contexts in which homelessness often exists (Charlton & Rubin, 2021:41; Tong, Kaplan, Guzman, Ponath, Kushel, 2021:1). The findings uniquely reflect on the perceptions of the respondents in terms of their experience and awareness of the various contextual vulnerabilities that both perpetuate and exacerbate their homelessness experience. The findings demonstrate that most of the sample consider themselves particularly vulnerable and reported a high prevalence of discrimination.

Based on the shortcoming identified under the first objective, the findings presented in Part 3 (manuscript two) confirm that the disenfranchised state of people experiencing homelessness is not fully considered. Despite the fact that many respondents positively indicated that they know where to access support and feel safe and comfortable to do so, very few felt that there are enough support services available in post-victimisation cases. The findings further reveal a constrained information and knowledge base about rights and the required legal compliance, with specific reference to the municipal by-laws. The findings contribute to the existing knowledge on homelessness by highlighting the low prevalence of dignified experiences – where individuals feel their constitutional rights are acknowledged and respected – as well as the similarly limited empathy toward homelessness among the housed population. The findings provide insight into the criminogenic factors associated with homelessness, which have be considered in relation to safety and risk for victimisation, but more importantly, to better understand the vast intersections between homelessness and many other societal subsystems that could exacerbate and prolong the experience by rendering the interventions obsolete. Central to the current objective, the findings confirm that a relatively high proportion of the sample experienced victimisation (59.7%). The study further provides valuable insights into the nature and extent of the experiences of victimisation, assessing the level of agency that exists to seek assistance and avoid future harm and victimisation.

The study fills a considerable gap in the local homelessness discourse by providing findings related to the use of services and nature of interactions with frontline or grassroots service providers (Muleya & Mlilo, 2023:88). The findings reveal a variety of experiences with access to services and engagements with service providers. The polarised accounts were further

confirmed by the open-ended responses, which showed that a definitive, linear experience of homelessness was not forthcoming. The study provides another notable contribution with insights from the respondents regarding what they need and what is required to improve current responses, with particular reference to post-victimisation experiences and services.

Obtaining stakeholder input for the development of an evidence-based victim inclusive policy framework

The third manuscript (Part 4) presents the fulfilment of the third objective, focusing on obtaining input from stakeholders, policymakers and service providers in the homelessness domain to develop a victim inclusive policy framework. Building on the findings obtained in the first and second phases of the study and based on the known dearth of research on homelessness in general and more specifically, areas such as the services provided to people experiencing homelessness (Muleya & Mlilo, 2023:88), it was important to include the perspectives of stakeholders at various levels of service delivery. The findings revealed that polarised perceptions of homelessness exist amongst participants; importantly, it demonstrates the impact of socially constructed perceptions and understandings on the level of engagement and the delivery of services to people experiencing homelessness. It further shows how negative perceptions foster the creation of stigma and stereotypically driven barriers that are often used to justify the inaction or absence of formal support structures, but optimistically highlights the malleability of perceptions and how they change over time. The most notable finding with reference to perceptions is the need to disrupt and mitigate harmful perceptions, and to reduce stigma and discrimination to ensure positive outcomes for people experiencing homelessness. In terms of contextualisation, the findings highlight the importance of having reliable information to ensure effective and inclusive responses. The findings demonstrate the dearth of local research and how there is a need to embrace the heterogeneity of homelessness in order to move away from the generic interventions that fail to address the diverse realities of the population. The study notably finds that there is a need to incorporate more context sensitive approaches that stem from a nuanced understanding to ensure more sustainable, human centred approaches in response to homelessness.

The study further demonstrates that a uniform understanding of homelessness is not forthcoming; therefore, the risk differentiated approach to interpret standardised or universal definitions remains problematic. The inaccurate interpretation of concepts would most likely lead to restricted access or inadequate responses based on the use of restrictive definitions. The

results advocate for the adoption of an experiential definition, constructed based on lived experiences and interpreted by trained stakeholders to develop a range of flexible and context specific definitions that promote targeted, inclusive and holistic interventions. The findings confirm that people experiencing homelessness are restricted in exercising their basic human and constitutional rights (Perrier, 2021:67), and that the participants were aware of the challenges associated with meeting the rights and needs of people experiencing homelessness. The findings highlight the impact of government inaction and the invaluable role NGOs play in the homelessness domain, but essentially demonstrate the urgent need for longer-term, sustainable solutions to address the gross human rights violations and improve the well-being of people experiencing homelessness. The study unpacks the level of awareness demonstrated by participants regarding the practical challenges that often confront people experiencing homelessness. The finding highlights the need for stakeholder collaboration and contribution to the development of policies and interventions, given their wealth of practical knowledge. The findings show the restricted nature of services to people experiencing homelessness and note the problematic underserviced areas in the more remote parts of the country.

The findings explore the impact associated with criminalisation practices and advocate for the urgent reframing of these problematic approaches, which was also pertinently highlighted in the preceding sections and more specifically in Parts 2 and 3. A notable finding was the agreement for the need to move away from punitive and oppressive approaches to more human and inclusive models of support. The findings on the existing regulatory considerations demonstrate a visible policy vacuum that exists due to the absence of a national policy on homelessness in South Africa. The lack of a coherent guiding framework has led to significant gaps at grassroots level, cited as the widespread lack of coordination, collaboration and cohesive approaches that are required for effective policymaking and implementation. The findings show that stakeholders are adamant in meeting the most basic needs of beneficiaries despite limited support and guidance. Considering the practical shortcomings identified, the study provides justification for the urgent need to address broader systemic deficiencies, such as the lack of support and general shortage of services. Lastly, the findings highlight the need to address the disconnect between policy and practice in the homelessness arena. Using the findings from the preceding phases and the current phase, a notable contribution can be developed and put forward, as there was substantial support from participants for the introduction of the victim inclusive framework, which will mobilise existing mechanism to

address the intersecting challenges associated with addressing homelessness in a contemporary South African society.

Meeting the aim and contribution of the study

Based on the summary of the key findings presented above, it is concluded that the overall aim of the study has been realised. With the information obtained in the respective phases, it became possible to develop a novel and practical contribution to facilitate the provision of victim inclusive services to people experiencing homelessness. The National Policy Development Framework (2020) provides a template containing important considerations for policy formulation, which was used to partially inform the development of evidence-based victim inclusive policy framework for people experiencing homelessness (The Presidency of the Republic of South Africa, 2020:3). While remaining mindful of current policy shortcomings and drawing on the unique lived experiences of the respondents and invaluable stakeholder contribution, the following framework seeks to provide policy recommendations for stakeholders to consider when formulating inclusive frameworks for service delivery to people experiencing homelessness.

Table 2: The victim inclusive policy framework (Contribution)

Title	The evidence-based victim inclusive policy framework for people experiencing homelessness
Purpose	The policy framework aims to promote equitable access and opportunities by addressing and remedying the social injustices frequently associated with people experiencing homelessness across all facets of their lives. The document aims to address the historic shortcomings associated with standardised and overly prescriptive frameworks, thereby providing flexible considerations which could aid in facilitating contextually sensitive policies with more targeted and longer-term interventions. The framework assumes a victim-centred approach and advocates for inclusivity to acknowledge and legitimise the vast lived-experiences to foster dignity, trust and social recognition, and encourage reporting and engagement with viable networks of assistance.
Guiding principles and values	The policy encourages service delivery that is underpinned by *Ubuntu*, emphasising social interconnectedness and shared humanity. To ensure that the rights and needs of the vulnerable are prioritised, the framework relies on the sentiments of the *Batho Pele Principles* by introducing mechanisms for consultation, service

	standards, access, courtesy information, redress, openness, transparency and return on investment. With these principles in mind, tailored services are required to meet the diverse needs of people experiencing homelessness and if those services are not aligned with the organisation, individuals should be referred to competent and capable partners within the collaborative referral network. The framework is grounded by five core pillars, including proactive outreach, dedicated and accessible services, health and cultural awareness and sensitivity and well-informed, effectively trained and collaborative engagement.
Policy objectives	o To promote the creation of inclusive, equitable and accessible services and infrastructure for people experiencing homelessness. o To promote awareness and information sharing amongst beneficiaries and the broader community. o To promote the use of accountable, skilled and well-trained professionals to provide essential and meaningful services to vulnerable communities. o To establish collaborative transdisciplinary partnerships and streamlined referral pathways. o The removal of and protection against all forms of harm: interpersonal and structural victimisation and legal/policy-based harms (for example, municipal by-laws). o To promote empowerment and independence amongst beneficiaries. o To avoid institutionalisation or perpetuate a cycle of homelessness. o To promote the achievement of developmentally strong programmes for long-term sustainable outcomes. o To promote sustainable outreach programmes to cater to underserviced areas and populations, and similarly walk-in services that meet the required element of sensitivity, efficacy, dignity and respect.
Background and contextualisation	The framework encourages the evidence-based cognisance of the background and contextualisation of the policy problem. As opposed to the broad framing of the issue in existing policies, a more localised approach should be adopted to avoid the use of stereotypically driven, homogenous and generic understandings of homelessness. Having a better, more precise knowledge base of

	homelessness will aid in the sensitive phrasing and service provision directed by the policy document. A comprehensive contextualisation process of the policy should be guided by: o Contextual analysis: To have a holistic understanding of the environment in which the policy is required and will be implemented in. o Resource and capacity analysis: To create feasible and attainable directives and outcomes, which align with the available resources and stakeholder capacity. o Identification of geographical challenges and limitations: To ensure that immediate services are attainable within the proximity of the service centre and the population. o Establishment of collaborative networks and streamlined referral pathways: To avoid turning down beneficiaries or sending them back to at-risk or street-based environments; this will allow them to remain within the service system and be referred to the applicable partners. o Population dynamics: A reliable baseline quantification will enable more accurate planning and budgetary considerations. To have sufficient knowledge of the population, there should be a thorough identification of relevant pathways, and the manner in which they interact with each other, the individuals and the environment and manifest as risk factors for victimisation and other negative outcomes. o Needs analysis and individual assessments: Stakeholders require a thorough understanding of the needs of the immediate beneficiaries to ensure that the scope and reach of the policy is adequate. o Active data capturing and progress monitoring: Day-to-day data is essential; performance monitoring will ensure that planning and services remain in alignment and that outcomes are achieved. The introduction of an active research component as part of every organisation or institution working with people experiencing homelessness is imperative to ensure that interventions are well-informed and remain specifically targeted to address the needs presented by the service population.
Definition and categorisation of homelessness	Following the comprehensive contextualisation of homelessness, auxiliary, carefully demarcated definitions can be identified and applied, whilst maintaining the required tone of inclusivity, equity and sensitivity. The framework advocates for the use of an

	experiential definition of homelessness. By obtaining insight into the pathways and factors associated with the lived experiences of beneficiaries, trained service providers can interpret the information and formulate a concise definition for the individual. The experiential definition will be used to develop an Individual Development Plan (IDP), which will be used to categorise beneficiaries according to the services they require. It is important to note that within an inclusive framework, categorisation should not be equated to prioritisation (as seen in some of the existing policies). The categorisation of beneficiaries will assist in streamlining mandates, directives and assist with the drafting of more specific funding applications, which will give government a better idea of what they financial support will be used for.
Scope	To adopt and preserve an inclusive approach, the framework advocates for a holistic reduction and prevention model that includes the provision of essential services and support for temporary, intermittent and chronic forms of homelessness. The goal will be attained through the strengthening of early-detection mechanisms and the integration of mainstream and empowering support for children, at-risk, and street-based populations.
Regulatory and legislative alignment	It is essential that policies cite relevant legislation and policies to align and standardise the envisioned practices and interventions with international and local constitutional obligations. It is important to use relevant international, national, provincial and municipal imperatives to guide directives and facilitate the promotion of inclusive and accessible service delivery, free of punitive, discriminatory and oppressive frameworks that contradict the values of humanitarian, victim and person-centred principles. For the successful integration of existing frameworks, homelessness needs to be inserted more deliberately in frameworks dealing with issues that have direct bearing on pathways into and out of homelessness. Policy responses stemming from the framework will be expected to foster the required synergy between existing frameworks to reinforce the collaborative efforts required to provide inclusive services and ultimately address homelessness. Mindful of the fact that homelessness is shaped by complex and shifting governance, economic, social, political, individual and environmental factors, a fixed set of frameworks risks being overly rigid and thus not responsive or flexible enough for contextual differences and individual needs. However, the following considerations could prove essential:

	o Universal Declaration of Human Rights (UDHR). o African Charter on Human and People's Rights. o The Constitution of the Republic of South Africa (1996). o Service charter for victims of crime in South Africa. o Synergistic application of relevant social, economic, housing and health related frameworks. o Synergistic application of national (when introduced), provincial and municipal responses to homelessness. o Promotion of Equality and Prevention of Unfair Discrimination Act (4 of 2000). o Prevention and Combatting of Hate Crimes and Hate Speech (Act 16 of 2023).
Collaboration: Roles and responsibilities	As part of adopting the victim inclusive policy framework, organisations are required to promote collaboration between relevant government departments and organisations, with the establishment of meaningful referral pathways to address the vast needs of clients within the network of assistance. Through the creation of an active research component, organisations can independently institute regular mandate updates to ensure that no beneficiary falls outside of the scope of services. To address the diverse needs, the transdisciplinary collaborative unit should ideally consist of the following stakeholders, each with a specialised role to play in addressing and resolving homelessness. o The Department of Social Development (DSD). o The Department of Human Settlements (DHS). o The Department of Home Affairs (DHA). o The Department of Health (DOH). o The Department of Economic Development (EDD). o The Department of Basic Education (DBE). o The Department of Higher Education and Training (DHET). o The Department of Justice and Constitutional Development (DOJ&CD). o The Department of Correctional Services (DCS). o The South African Police Service (SAPS). o Non-governmental and Non-Profit Organisations working with people who are at risk and experiencing homelessness (children and adults). o Faith based organisations. o Human Science Research Council (HSRC).

	o Human Rights Commission of South Africa (SAHRC). o The National Homeless Network and similar agencies. Government departments and organisations are expected to ensure that service providers remain well-trained and informed in order to deliver an acceptable standard of service to beneficiaries. To ensure that the training requirements are met, organisations can partner with higher education institutions to facilitate reciprocal training (integrated theory and practice) with the potential to place trained graduates within the service sector. In previous policies, the formation of task teams is encouraged; this should be maintained and include representatives from the relevant sectors – to ensure clarity around roles and responsibilities.
Implementation	The stalwart involvement of a collaborative and unified government structure is essential for the effective functioning of inclusive solutions. Organisations providing services to people experiencing homelessness require consistent resource and funding support to ensure that deliverables are achieved. Organisations are encouraged to establish donor and funding networks from both the private and public sectors.
The victim inclusive service model for people experiencing homelessness	As illustrated in Figure 1, the beneficiaries will be directed to service centres (point of contact) through proactive outreach initiatives and walk-in services. Considering the disenfranchised position of people experiencing homelessness and the several barriers they encounter, it is important to ensure that vulnerable persons are aware of the services and how to access it. Upon their arrival at the centre, a trained service provider will initiate the identification of pathways and the conceptual analysis of the individual's homelessness experience. Following the consultation, the service provider will interpret the information and develop an individualised definition for the particular beneficiary. As part of the preparation for service entry, the service provider will create an IDP and proceed to appropriately categorise and place the beneficiary, according to their individual needs, in temporary shelter or service programmes. The next step entails the mobilisation of required resources, either on-site or through the engagement with additional stakeholders in the collaborative network. By accessing the established referral pathways, beneficiaries will enter the service system, which will be underpinned by rehabilitative and reintegrative services.

	Once the process has been deemed successful, the beneficiary will start to engage with the established pathways out of homelessness and the reintegration back into mainstream society, guided by a continuous process of monitoring, evaluation and support. Upon completion of the inclusive service programme, the desired outcome would be an empowered, independent, self-sustaining and recovered, long-term member of society.
Quality assurance and subsystems	For quality assurance, each phase in the programme will be treated as an individual subsystem, with the necessary performance indicators and checks to ensure that the previous step was correctly completed and that the beneficiary is ready to move on to the next phase of their journey out of homelessness.
Accountability, oversight and contravention mechanisms	All organisations are required to establish the relevant oversight committees to ensure that services and service providers remain up to standard in effectively delivering the essential services to beneficiaries. To ensure accountability, the policy framework encourages the inclusion of a contravention clause, which holds stakeholders accountable and liable for the delivery of essential services. Failure to do so should resort to appropriate corrective action. These measures should be placed in the context of the policies regulatory alignment.
Monitoring and evaluation	To ensure effectiveness and accountability, policies should include realistic monitoring and evaluation time frames to measure the impact of the services, facilitate the identification of potential shortcomings, and facilitate evidence-based revisions.
Review and revision process	Policies in alignment with the victim inclusive framework should be reviewed timeously to ensure that efficient standards are maintained, while formal reviews can be done as required, based on performance indicators or as part of two to three yearly organisational review, preferably conducted by an independent review committee.

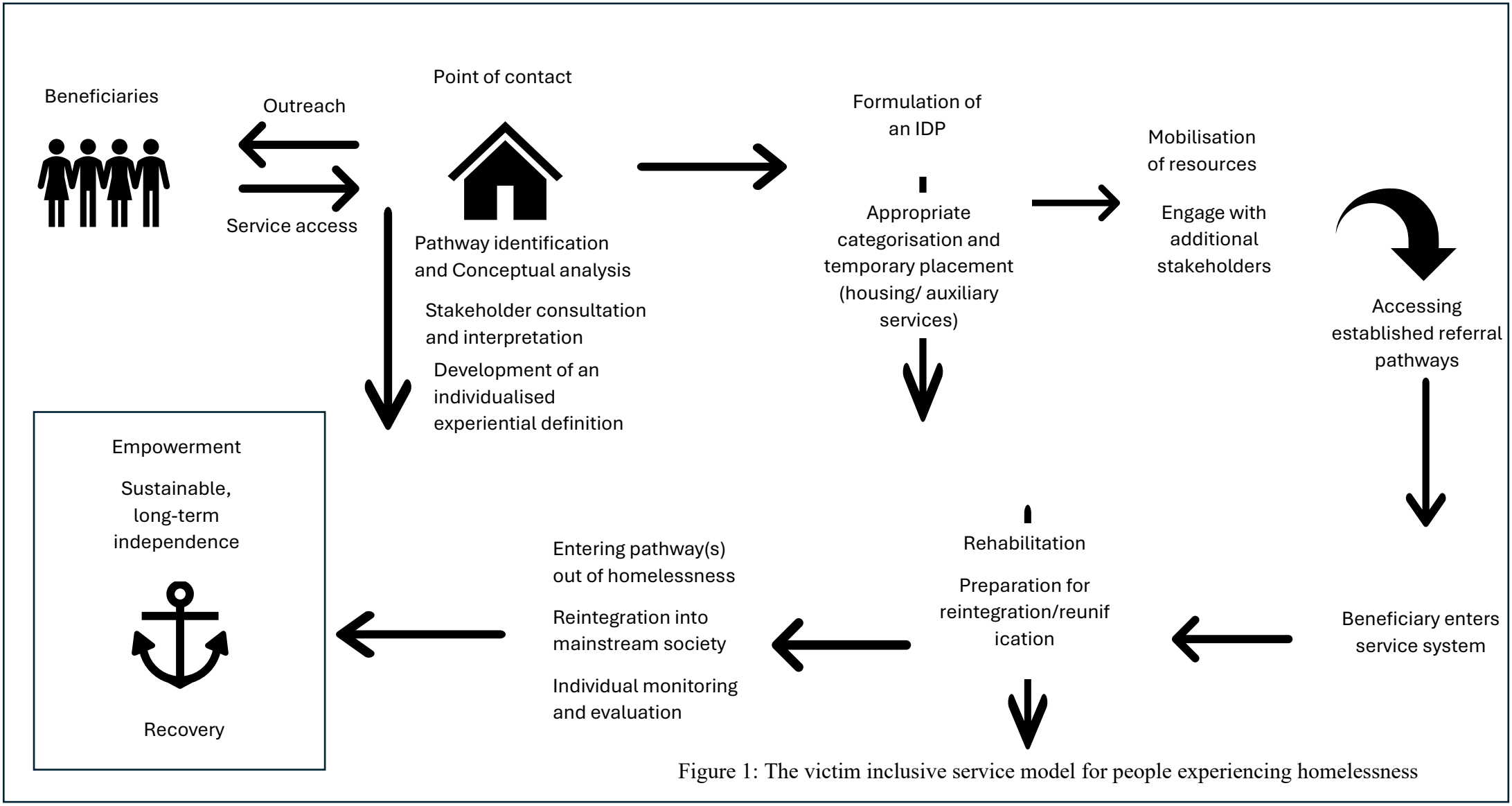

Figure 1: The victim inclusive service model for people experiencing homelessness

Strengths and limitations of the study

An evident strength of the study was that the same researcher engaged with all prospective and participating contributors, which was particularly useful in the second phase of the study. Based on the ability to establish a level of familiarity, considerable rapport was built, which translated to transparency and trust in a rather short period of time. The positive elements associated with building rapport can be seen in the manner in which the respondents openly communicated with the researcher, resulting in rich and informative data. The use of a mixed method approach is a notable strength of the study as it allowed for the examination of a complex topic through the triangulation of several sources of information and data sets. Through the use of novel and innovative approaches, the study contributes to addressing the dearth of research and puts forward several contributions and recommendations for theory, policy, and practice. The study uniquely strays from the dominant perspectives of homelessness, traditionally presented in local academic discourse by placing less emphasis on structural explanations and confirmatory outcomes, resulting in the emergence of contextually rich and nuanced explanations from a group of people experiencing homelessness.

By including input from a diverse group of stakeholders, the study validates and extends on the information obtained from people experiencing homelessness, leading to the generation of grounded and evidence-based recommendations to improve current local responses to homelessness. Further, the study advocates for the use of an experiential definition and the application thereof to assist in creating inclusive and targeted services and support for people experiencing homelessness. A notable limitation in this regard is that the study did not make use of an exhaustive checklist for the conceptual framework; however, it demonstrates the importance of capturing the insights which are informed by the lived experiences and challenges commonly associated with homelessness to inform policy and practice. Additionally, the study was unable to fully capture the presence of mental health challenges and the impact of contact with relatives in the lives of people experiencing homelessness. As such, these shortcomings will be used to develop recommendations for future research in the following section.

As noted in the second manuscript (Part 3), the limited time and resources available for data collection resulted in the sampling of specific and accessible populations and locations. The findings were obtained using non-random and non-probability sampling methods and using a cross-sectional study design, which significantly hampers the ability to generalise or observe

changes over time, which may have been possible if a longitudinal study had been conducted. Although the use of descriptive statistics adequately presented the findings in fulfilment of the second objective, it is worth noting that the statistical analysis was not used to report on the current data set. Based on the narrow formulation of the objectives in fulfilment of the broader aim, the candidate did not anticipate the wealth of information and data that came from the second and third phases of the study. It is, therefore, important to declare that only the information required to fulfil the objectives and aim of the current study were presented in the thesis. With a substantial amount of information remaining, the broader findings will be published and disseminated at a later stage.

The study exceeded the sample size of most local academic studies focusing on homelessness and their experiences of victimisation. Considering the documented extent of victimisation (59.7%), the study outlines the importance of exploring and understanding the nature, extent and subsequent impact of victimisation for people experiencing homelessness and how detrimental the normalisation of such harms can be for both the individual and the effectiveness of policy outcomes. The study revealed that generalisability and studies of this nature may never coincide, which in hindsight can be viewed as a strength as it encourages the generation of continuous and rigorous, context specific research on homelessness and their diverse experiences. As part of highlighting the need for continuous research, the study outlines the dynamic landscape of homelessness and the dynamic and unique challenges experienced across different geographies. The distinct variations were clearly observable in the different areas of Cape Town, and even more so between the Cape Town and Bloemfontein study populations.

Although the current study included diverse stakeholders, an exhaustive sample was not constructed; for example, officials from the Department of Home Affairs or officials from the health sector were not included. Lastly, as noted in Parts 1 and 4, representatives from the legislative branch (DOJ&CD) were not available at the time of data collection. Their unavailability consequently limited the opportunity to ask or answer questions related to the development of the Prevention and Combating of Hate Crimes and Hate Speech Act (16 of 2023), particularly in relation to expanding on the proposed inclusion of homelessness under this provision (Pophaim, 2021). The researcher was referred to the Parliamentary Monitoring Group (PMG) website, but the recommendation unfortunately did not assist in this regard.

Recommendations

The study identified several practical and ideological recommendations stemming from the findings generated in the respective phases. To avoid unnecessary repetition, Part 2 provides substantial recommendations stemming from the findings of the document analysis. Accordingly, the following section extends on the recommendations that emerged and derived from the information in Parts 2, 3 and 4, presented under general recommendations, considerations for future research, and implications for policy development and practice.

General recommendations

Before any realistic changes can be observed within the homelessness domain, the need for improved political leadership, will, and governance is an inherent requirement. With sufficient inter-institutional stakeholders onboard as part of the required collaborative unit, contextual and practical issues related to funding, resources, capacity, and support can easily be mitigated. While it is a complex undertaking, with the known limitations in the interim, homelessness remains a persistent issue and while solutions are being formulated, there remains a practical need for the improvement of service provision to people experiencing homelessness. Based on the findings of the study, it is important to meet the immediate need to deliver services that are not only available, but also accessible to members of this vulnerable population. There is a need to reframe the type of services that are provided, to not only focus on the delivery of essential services, but to facilitate the provision of empowering services to promote independence toward longer-term outcomes.

As part of the broader challenges, data scarcity and the problematic quantification of homelessness remain at the forefront of the challenges identified in the current study. It is recommended that emphasis be placed on developing more efficient ways of counting the population instead of repeatedly citing it as a prominent issue in addressing homelessness. Resources will have to be mobilised to initiate an extensive counting operation across several domains, including a street-based census, service-based enumeration, and by accessing existing government and non-governmental records. Any counting initiative should involve an appropriate marking system to avoid duplication and the inaccurate reporting of population sizes. By conducting a baseline assessment and combining existing data sets, stakeholders will have a better idea of what is required and how to go about obtaining the missing information.

To increase the efficiency of counting of the homeless population, collaboration and support for the development of a national research agenda as proposed by the National Homeless Network is required. Through a collaborative approach, the exchange of useful techniques and processes can be shared across geographies to maximise the desired outcomes. While executing the counting process, researchers can be deployed to conduct in-depth research to improve the understandings of homelessness, in other words, to attach meaning to the numbers obtained through counting initiatives. With the improved understanding and the production of continuous research, the improved contextualisation can lead to the use of more precise definitions and better-informed policies and subsequent interventions. Guided by the findings, the study advocates for the use of an experiential definition, which will provide an individualised understanding of the casual factors that shape the beneficiary's homelessness experience and what would be required to shape viable pathways out.

By adopting these targeted strategies to understanding homelessness, more precise measures can be introduced, which could also significantly improve the by-in of government and other external funders, as they would know exactly what resources are available without the risk of wasteful expenditure. The improved understanding will go a long way in guiding the development and phrasing of more contextually sensitive policies that do not perpetuate negative perceptions, stigma, discrimination and stereotypes about homelessness. With an improved understanding of homelessness, the risk of misinterpretation and defaulting to generic, oppressive or counterproductive measures can be significantly reduced. The findings demonstrate a unique opportunity for the inclusion of homelessness and related aspects in formal education systems, to broaden the knowledge base among members of the general public, which could significantly reduce the general disdain towards homelessness and reduce the reactive nature of interactions and formal responses in this regard. Given the level of preparedness reported by some of the stakeholders, homelessness should be a topic covered at institutions of higher education, under relevant disciplines, to inform training professionals regarding where their expertise could be useful and inserted once their qualifications have been obtained.

The study revealed a significant gap in the mainstream knowledge base of people experiencing homelessness with regard to their rights, laws and available services, which likely have an impact on their overall well-being. The finding advocates that punitive measures be redacted from policy responses and interventions to avoid harmful effects on individuals who are

sometimes oblivious to the fact that their 'normalised' behaviour is in violation of a by-law. Dissemination of information among people experiencing homelessness should be prioritised to help ease the burden of navigating life on the streets, especially when they are expected to function within the context of mainstream society and need to access sometimes foreign, unknown spaces and services.

Considerations for future research

Based on the findings and in conjunction with the limitations of the study, the following section reports on specific areas of interest that can be expanded on, alongside methodological considerations to guide efforts to extend the local knowledge base:

- The outcomes generated from the current study were favourable in the comprehensive nature in which it reported on homelessness and related aspects that have bearing on both policy and practice. It is, therefore, recommended that the study be adapted and replicated on a national level to contribute to the broader knowledge base, which may prove useful with the impending introduction of the national policy framework on homelessness in South Africa.
- The use of the developed conceptual framework (experiential definition) appears promising, and further testing and application in various contexts are encouraged.
- Mental health was a considerably challenging factor to fully unpack in the context of the current study. Most of the respondents were either not aware of any present conditions or decided not to disclose, potentially due to the associated stigma. Future research in this area should follow a multi-disciplinary approach, to employ the necessary expertise to facilitate the willing disclosure of information or to conduct the appropriate testing and evaluations in cases where individuals are not aware of any existing conditions. Based on the impact of mental health and the current portrayal of a somewhat synonymous relationship with homelessness, it can be considered a priority area. To enhance the collection of sensitive information of this nature, it would be advisable to promote retrospective studies with people who have experienced homelessness but have already received the support to deal with the 'rawness' and would be able to better process the information in this line of questioning.
- The current study revealed that many respondents still had contact with their relatives while living on the streets. However, the quality and nature of the relationships and or contact were not investigated, which upon reflection, does present as a limitation that warrants

further exploration. It is recommended that this be included in future research to identify whether the nature of the relationship with relatives could be considered a criminogenic, victimogenic or protective risk factor (or a combination). Such information will be useful in the development of pathways out of homelessness and for the consideration of the Department of Social Development in the fulfilment of their reunification mandate.

- The current study revealed that homelessness, violence, victimisation and crime intersect considerably and that people experiencing homelessness are inclined to engage in criminal activity, whether it is survival related petty offences, or more serious gang related activity as revealed in the findings. As a result of their conflict with the criminal justice system, some of them will be faced with life on the street and a criminal record. Having a criminal record could significantly hamper one's chances of accessing viable pathways out of homelessness, as provided for in the policy responses to homelessness. It is, therefore, recommended that future research be directed at investigating the impact a criminal record has on the lives of people experiencing homelessness and how it can be mitigated.
- It is worthwhile to include gender differences as considerations for future research as it could have a meaningful impact on the development of policy and practice that also consider the diverse needs based on gender.
- The notion of 'othering' remains a strong element within the homelessness domain, which was evident during interviews with researchers who have access to data sets from other geographies. More information of this nature is required, as it would have significant implications for policy and practice.
- With reference to engagements with stakeholders, it is recommended that future research focus on developing an exhaustive list of stakeholders in order to expand on the current knowledge base on the nature, type and degree of services offered to people experiencing within the context of all relevant sectors.

Implications for policy and practice

First and foremost, the study provides a justification for the consideration to adapt (if needed) and implement the victim inclusive policy framework, to address the vast shortcomings identified by the current study. Adopting the policy framework will ensure the creation and promotion of inclusive infrastructure and services, which are much needed for people experiencing homelessness in South Africa. Additional aspects for policy and practice include:

Considering the plethora of risk factors identified in the current study, it is recommended that an exploration into the various risk factors be conducted nationally to categorise and typify homelessness according to the presence of specific vulnerabilities. Through this approach, service providers will be able to identify the appropriate services and resources in order to mobilise the correct auxiliary stakeholders to assist with the beneficiaries unique set of needs. It should be emphasised that categorisation should not be equated to the prioritisation of specific 'protected' characteristics, as suggested in some local policy responses, but rather to deliver targeted protection and services. The categorisation or typification of homelessness will aid in structured housing placements to promote the safety of those who are more susceptible to victimisation from those who may be inclined to victimise. Implementing accurate categorisation, will limit the occurrence of institutional violence, often experienced in correctional facilities, which could very well be a reality in the context of many shelters, transitional homes and other safe spaces.

To enhance the proponents of inclusion and protection, it would be worthwhile to further explore the findings with undertones of discrimination, stigma and 'othering'. Obtaining an improved understanding of the complex interplay of factors would be essential for the consideration to include homelessness under the relevant protective frameworks such as the Prevention and Combating of Hate Crimes and Hate Speech Act (16 of 2023).

Personal reflection

The perfect way to reflect on a doctoral journey most likely does not exist. At this stage of the process, I am flooded with a whirlwind of mixed emotions. I feel a strong sense of gratitude and joy, accomplishment and even fear for what the future holds. As I think back to what impacted me the most, I cannot begin to describe the growth and learning that took place during my doctoral journey. I have learnt so much about myself and that with a little bit of trust and belief, there are no limits to what I can achieve. The greatest reward was a personal one, which is confidence in my work and witnessing firsthand, that I am capable to accomplish anything I set out to do. With this personal reward came a level of reassurance, that I am on the right path and a much-needed boost in my self-confidence, just enough to finally shut down the sometimes overwhelming 'imposter syndrome'. By engaging and immersing myself in a journey of self-discovery and development, I found that I am exactly where I am supposed to be, doing exactly what I am meant to be doing to try and make an impact in people's lives for the better.

The only constant throughout the entire journey was having to defeat myself and the negative thoughts I would think up to try and convince myself that I was not capable of finishing a PhD. The greatest rewards described here did not come as easy as I had hoped. I was confronted by several days, weeks and months of self-doubt and questioning whether or not this was something I wanted to do, while secretly asking myself if it was something I was able to do. I approached this journey shaken but brazen, I would have intense conversations with myself and my immediate support systems to try and find the validation I needed to convince myself that I could do this. I vividly remember having to repeat the process with every major milestone of the project – which was definitely as exhausting as it sounds! Although I would not consider myself an overly religious person, I do believe that I have a good relationship with God and I was fortunate enough to see glimpses of his presence, blessing my journey and clearing the path for me. I remember on the first day of data collection, I went and joined a bible study session at the local church. The scripture for the day was Matthew 9: 9-12, which reads "…*as Jesus went on from there, he saw a man named Matthew sitting at a tax collector's booth. Follow me, he told him, and Matthew got up and followed him. While Jesus was having dinner at Matthew's house, many tax collectors and sinners came and ate with him and his disciples. When the Pharisees saw this, they asked his disciples, why does your teacher eat with tax collectors and sinners? On hearing this, Jesus said, it is not the healthy who need a doctor, but the sick"* (English Standard Version Bible, 2001-2025, Matthew, 9:9-12). The scripture served as a constant reminder to never cast judgment on the next person and to remain present, listen attentively and capture the individual stories in the best and most honest way possible.

The message had an immediate impact on me and the emotion from everyone present flooded the room and everything just started to make sense. I always joke when people ask me "why homelessness"? I would always say the topic chose me and after having this experience on my first day, it was confirmed that I would have everything I would need to complete the journey, albeit filled with intense tests and challenges. I was fortunate to have insightful conversations with people from all walks of life, each with a story to tell and a unique outlook on life. I carry with me the profound messages from all of the brief, yet powerful conversations I had with every single person that formed part of the study. I witnessed the power of faith, as one of the individual's experiencing homelessness had one of the best singing voices I have probably ever heard. As part of her testimony, she said that yes, God has put her in this challenging situation, but he has also blessed her with a gift, which she will use to change her circumstances.

Listening to her interpretation of her current circumstances made me reflect and I asked myself if I would be able to remain this positive if I were in her shoes.

If there was one thing I learnt during this process is that, as human beings, we often take the simplest things for granted. As much as we say that people experiencing homelessness are entitled, we are just as entitled to assume that our parents must love us, must provide for us and taking a moment to converse with someone who was not as lucky, really is life changing. I was constantly reminded of my privilege, and I remember thinking how can something as simple as a divorce shatter someone's entire world and alter their life course, completely redirecting them from what they should have been doing? It was a shocking reminder that the only constant in their lives was violence and strife, which has sadly become the norm and even an expectation for so many of them. I found myself struggling to accept that this was the reality that so many people were forced to face on a daily basis and not even that was enough to strip their humanity and make them negative or vengeful in anyway.

Throughout the process, I constantly found myself confronted by what is best described as a superhero complex, with the type of work I was doing and the reality that it might fall on deaf ears and change nothing. I soon realised that my work was far bigger than me or my imaginary superhero ego. The realisation that I was part of something bigger than myself was such a welcomed lesson. I remember telling myself that this is not about you, there are people who have it far worse than you and they do not complain half as much. I have come to appreciate the finer things in life, family, friends, recreational activities, and most importantly, time. I am forever changed through the insightful conversations I had with people who had some of the most painful stories to share and chose to, unreservedly, share it with me, a complete stranger. I have literally heard hundreds of different stories, and each had a profound and significant impact on me and who I would like to see myself become one day. I have come to accept that I am a work in progress and that learning is part of life and that I should never shy away from saying I do not know something, especially if it means I get to improve myself and facilitate another learning opportunity. Engaging with the different types of methodological decisions I made for the study has shaped me on a personal and professional level. I was challenged more and more with each and every milestone of the journey. In my moments of self-doubt and at times self-loathing – asking myself how I could possibly write such a complicated proposal knowing that I would eventually have to do all of the work. I realise now that it was all worth it, to have the complete document ready for submission, just makes everything worth it!

I learnt that vulnerability is not necessarily a weakness, allowing myself to be vulnerable and ask for help where I felt I couldn't do something, challenged me to grow in more ways than pride and silence ever could. Through various conversations and 'counselling', my supervisor would reassure me that it is okay not to know something, as this is literally the first time I am doing a PhD – this is a message I have come to appreciate and share freely with the students I am currently supervising. I had to battle with myself constantly, as it was a painful reminder that being a perfectionist and valuing the quality of your work, does not automatically equate to having all of the answers. Through this journey of painful growth and insanely uncomfortable self-discovery, I am excited to see what the future holds, and I hope that the journey I have taken inspires others to trust themselves to do the same. As an emerging scholar I hope to infuse the lessons of patience and gratitude in everything I set out to do. I hope to have the opportunity to present myself to the academic community as someone with high professional and ethical standards, valuable insights and the competencies to destroy boundaries and incite change and transformation in the domains where it matters the most. Despite all of the flaws that were painfully exposed during this very personal journey, I have reached a point where I can confidently say that I am proud of the person I have become and growing to be, and even prouder of this once in a lifetime accomplishment.

Concluding remarks

The study revealed the fragmented and fragile state of the local homelessness domain by identifying several critical gaps in the contextualisation, policy development and practice. By incorporating the voices of people experiencing homelessness, it facilitated the improved understanding of the dynamic relationship between the underlying triggers that manifest as pathways that lead to the onset of homelessness. The study delved into the intricate interplay of risk factors that typically lead to overlooked negative outcomes, such as the experience of victimisation and constrained service access. The stakeholder engagement at various levels of service delivery exposes a fundamentally flawed and inadequate system that fails to deliver on its constitutional mandate of supporting and enriching the lives of vulnerable populations. The process not only illuminates structural deficiencies but reveals the urgent need for both policy and deeper systemic reforms. The study contributes to the development of theory, policy and improved practice by adding much needed depth and context to a dearth of local discourse on homelessness. Despite the harsh realities that have been exposed, the study uniquely and innovatively positions itself as a novel and timely contribution to a historically neglected area.

Optimistically, it has the potential to spark renewed attention, collaboration and robust engagement, which remain imperative elements for the development of inclusive and protective responses, leading to sustainable and longer-term positive outcomes.

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Appendix A: Questionnaire (Phase 2)

UNIVERSITY OF THE FREE STATE
UNIVERSITEIT VAN DIE VRYSTAAT
YUNIVESITHI YA FREISTATA
UFS

Questionnaire

Questionnaire no:

Section A: Biographical information

1. Pseudonym: .....
2. Age: .....
3. Gender: .....
4. Sexual orientation: .....
5. Language: .....
6. Nationality:

South African		Non-South African	

7. Population group:

African		Coloured	
Indian		White	
Asian		Other (please specify):	

8. Relationship status: .....
9. Highest level of education: .....
10. Employment status

Unemployed	
Permanently employed	
Piece jobs	
Contract	
Other (please specify)	

11. Do you have any children, if yes, how many?: .....
12. Do you have contact with any of your relatives?

Yes		No	

13. If yes, who are the relatives you still have contact with?: .....

14. How often?

Daily	
Weekly	
Monthly	
Annually	
Other (please specify):	

15. Health status:

Excellent		Good		Average		Below average	

16. Do you have any physical or mental health challenges:

Physical health challenges	Yes		No	
Mental health challenges	Yes		No	

17. If yes, please elaborate on the nature of these challenges? .....

18. Are you currently receiving any treatment for these health challenges: .....

19. If yes, please elaborate on the type of treatment.....

20. Do you currently consume/use any substances and/or alcohol:

Alcohol	Yes		No	
Substances	Yes		No	

21. What type of substances do you use?.....

22. Which of the following options best describes the frequency of use?

	Alcohol	Substances
At least once a day		
Multiple times a day		
Once a week		
Multiple times a week		
Once a month		
Multiple times a month		
Other (please specify):		

23. Have you ever been arrested?

Yes		No	

24. If yes, how many times?

Once	
More than once	
More than five times	
Other (please specify):	

25. What was the reason for the arrest(s)?: .....

26. Have you ever been incarcerated?

Yes		No	

27. If yes, how many times?

Once	
More than once	
More than five times	
Other (please specify):	

28. How many times were you arrested before you were incarcerated for the first time?

Once	
More than once	
More than five times	
Other (please specify):	

29. Why were you incarcerated?: .....

30. Could you please explain what your life was like before becoming homeless?.....

Section B: Information related to homelessness

31. What do you consider the main factors (pathways) that led you to becoming homeless? You are welcome to select as many answers as you feel apply to you.

Childhood adversity	
Lack of housing	
Poverty	
Unemployment	
Domestic/family conditions	
Incarceration	
Alcohol and/or substances	
Physical health challenges	
Mental health challenges	
Parental death/abandonment	
Other (please specify):	

32. Please explain your answer: .....

33. When did you first become homeless?: .....

34. Have you been homeless ever since then?

Yes		No	

35. Are you currently living on the street or in the shelter full time?

36. What is the longest time spent in a shelter or on the street?

37. Do you prefer living on the street or in a shelter? Please explain the reason(s) for your decision.

38. How do you earn money or find food while on the street?: .....

39. Where do you spend most of your day? .....

40. Where do you sleep at night?.....

41. Do you spend most of your time:

Alone	
With another person	
With a group of people	

42. Where do you feel the safest?.....

43. Where do you feel the most unsafe? .....

44. Do you feel like you are part of the community where you live/seek refuge? .....

45. Are there any specific events that you can share that made you feel this way?

.....

46. As a homeless individual, how vulnerable do you consider yourself to be?

Vulnerable		Neutral		Not Vulnerable	

47. Do you feel your constitutional rights as a citizen of South Africa are respected/acknowledged?

Yes		No	

48. What does homelessness/rough sleeping mean to you?

Lack of stable housing	
Insecurity and fear	
Isolation and loneliness	
Struggles with mental and physical health	
Lack of access to basic needs	
Unemployment and poverty	
Disconnection from the community, family and friends	
Feelings of hopelessness	
Struggles with substance abuse	
Barriers to education, employment	
Loss of identity and dignity	
Invisible in society	
Limited access to services	
Feels excluded, like an outsider, hated by society	
Other, please list	

Section C: Information related to experiences of victimisation

Adverse Childhood Experiences (ACEs-IQ)

49. Did you experience any adversity during your childhood years?

Yes		No	

50. If yes, please complete the following questions:

Below is a list of 10 categories of Adverse Childhood Experiences (ACEs). From the list below, please select each ACE category you experienced prior to turning 18 years old.	
1. Did you feel that you didn't have enough to eat, had to wear dirty clothes or had no one to protect or take care of you?	
2. Did you lose a parent through divorce, abandonment, death or other reasons?	
3. Did you live with anyone who had a drinking or substance use problem?	
4. Did you live with anyone who was depressed, had mental health challenges or attempted to commit suicide?	
5. Did your parents or adults in your home ever physically harm or threaten each other?	
6. Did you live with anyone who was incarcerated?	
7. Did a parent or adult in your home ever swear at you, insult you or put you down?	
8. Did a parent or adult in your home ever physically harm you in any way?	
9. Did you feel that no one in your family loved you or thought you were special?	

10. Did you experience unwanted sexual contact (fondling or oral/anal/vaginal penetration)?	
Total ACE score	

51. Do you believe that these experiences affected your well-being?

Not at all		Yes		No	

52. What type of victimisation did you experience during your childhood?

Physical		Sexual		Verbal		Neglect	
Other (please specify):				Multiple (please specify):			

53. How often did this happen?

Daily	
Multiple times a day	
Weekly	
Multiple times a week	
Monthly	
Multiple times a month (not weekly or daily)	
Other (please specify):	

54. Perpetrator profile:

Physical		**Sexual**		**Verbal**		**Neglect**	
Gender		Gender		Gender		Gender	
Age		Age		Age		Age	
Population group		Population group		Population group		Population group	
Relation to you		Relation to you		Relation to you		Relation to you	
Other (specify):				**Multiple (specify):**			
Gender				Gender			
Age				Age			
Population group				Population group			
Relation to you				Relation to you			

55. How did you feel afterwards?.....

56. Did you tell anyone, or ask for help? Please explain.

.....

57. How did you cope: .....

58. Did you try to do anything to reduce experiencing victimisation again, if yes, what did you do?

Victimisation since becoming homeless

59. Have you ever been victimised since becoming homeless?

Yes		No	

60. What type(s) of victimisation have you experienced during these events?

Physical		Sexual		Verbal	
Other (please specify):			Multiple (please specify):		

61. How often did this happen?

Daily	
Multiple times a day	
Weekly	
Multiple times a week	
Monthly	
Multiple times a month (not weekly or daily)	
Other (please specify):	

62. Perpetrator profile:

Physical		**Sexual**		**Verbal**	
Gender		Gender		Gender	
Age		Age		Age	
Population group		Population group		Population group	
Relation to you		Relation to you		Relation to you	
Other (specify):				**Multiple (specify):**	
Gender				Gender	
Age				Age	
Population group				Population group	

Relation to you		Relation to you	

63. How did you feel afterwards?.....

64. Did you tell anyone, or ask for help? Please explain.....

65. How did you cope: .....

66. Did you try to do anything to reduce experiencing victimisation again, if yes, what did you do?.....

67. Who do you think victimises the homeless the most? .....

68. Why do you think people target the homeless? .....

Section D: Access to services and treatment by service providers

69. Did you ever or do you currently receive any form of support from government (grants/pension, etc)?

Yes		No	

70. If yes, what kind of support? .....

71. As a homeless individual, do you feel comfortable and safe to access any support services?

Yes		No	

72. Which service providers have made you feel the safest?

Social welfare		SAPS		Healthcare services		Other (please specify):

73. What are your views towards police officers? .....

74. How likely are you to report victimisation to the police?

Very likely		Not sure		Not at all	

75. Reasons for reporting or not reporting victimisation.....

76. Do you know of any homeless individuals who have been ill-treated or victimised by the police?

Yes		No	

77. Have you ever been ill-treated/victimised by the police?

Yes		No	

78. If yes, could you please explain this experience?

.....

79. Do you have any positive experiences with the police you would like to share?

.....

80. Have you ever attempted to access healthcare services?

Yes		No	

81. How easy or challenging was it to access these services?

Easy		Neutral		Challenging	

82. Do you know of any homeless individuals who have been ill-treated or victimised by healthcare service providers?

Yes		No	

83. Have you ever been ill-treated or victimised by healthcare service providers?

Yes		No	

84. Do you have any negative/positive experiences with healthcare service providers you would like to share?

.....

85. What are your views toward shelters/NGOs/NPOs?

Negative		Neutral		Positive	

86. Have you ever interacted with anyone from the government (DSD, etc)?

Yes		No	

87. If yes, please explain this encounter.

.....

88. Are you aware of any by-laws currently in place that restrict your access to certain areas as a member of the homeless population?

Yes		No	

89. Have you ever felt discriminated against for living on the street?

Yes		No	

90. How does the type of treatment received make you feel?

Bad		No feelings		Good	

91. Do you have any other experiences to share that you have had with any other service provider or member of the general public, when you have attempted to seek assistance?

.....

Section E: Service needs following victimisation

92. Do you feel like you have enough information and knowledge about your rights?

Yes		No	

93. Do you know what to do and where to go if you experience victimisation?

Yes		No	

94. Do you feel that people understand what homelessness entails and what you experience on a daily basis?

Yes		No	

95. Do you feel that there is enough support services available for the homeless who experience victimisation?

Yes		No	

96. Do you feel that there is enough protection available for the homeless?

Yes		No	

97. What do you think can be done to improve the services available to the homeless who experience victimisation?

.....

98. Is there anything specific you require after experiencing victimisation?

.....

99. What can be done to make you feel safer?

.....

100. Is there anything you would like to add?

.....

.....

Thank you for participating in the study!

Appendix B: Information sheet and consent form (Phase 2)

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UFS

Research study information leaflet and consent form

(Phase 2: Homeless respondents)

Date

_____

Title of the research project

An analysis and reframing of South African policies in response to homelessness: Towards an evidence – based victim inclusive policy framework

Principle investigator / researcher(s) name(s) and contact number(s):

Name of student/researcher	Student number	Contact number
Jean-Paul Pophaim	2010084461	051 401 7981

Faculty and Department:

Humanities
Criminology

Study leader(s) name and contact number:

Name of Study Leader: Prof F. Steyn (051 401 2278)
Name of co-supervisor: Dr M. Cronje (051 401 7717)

What is the aim / purpose of the study?

The aim of the study is to develop an evidence-based victim inclusive policy framework to improve current responses to the victimisation of the homeless. This will be achieved by determining the experiences and service needs of homeless persons who have experienced victimisation (this will be the extent of your involvement in the study).

Who is doing the research?

Jean-Paul Pophaim, I am currently employed as a lecturer in the Department of Criminology at the University of the Free State. The research for my doctoral degree with specialisation in Criminology.

Has the study received ethical approval?

Approval number: UFS-HSD2023/1848

Why are you invited to take part in this research project?

You have been selected to participate in the study as one of the objectives is to determine the experiences and service needs of homeless persons who have experienced victimisation. It will be beneficial to receive this information first-hand in order to develop a framework that addresses the service needs identified by homeless victims themselves.

What is the nature of participation in this study?

The second phase of the study will involve the completion of a survey. The researcher will assist respondents to complete the questionnaire during face-to-face interviews. A pre-determined sample of between 85 to 100 respondents will be selected for this phase of the study. During the interviews you will be requested to answer questions regarding your biographical information, questions related to homelessness, your experiences of victimisation, access to services and the service needs you may have, following a victimisation episode. The interviews will be voice-recorded and should not last longer than 2 hours. A social worker and counselling psychologist will be available (at no cost to the respondents) for debriefing should the need arise.

Social worker: Dr C Van Wyk
051 401 3362
vanwykcj@ufs.ac.za

Counselling psychologist: Mr M Barends
053 831 4692
admin@salutech.co.za

Can the participant withdraw from the study?

Your decision to participate in the study is completely voluntary and you can withdraw at any point in time should you wish to do so. If you do agree to participate in the study, you will receive a copy of the information sheet and be requested to complete and sign a written consent form. Furthermore, you will not be forced to answer any question(s) that make you uncomfortable. Once again, please note that you may withdraw at any point, without reason or concern of any consequences.

What are the potential benefits of taking part in this study?

There are no direct benefits associated with your participation in the study. Sharing your experiences of victimisation and service needs will assist in the development of the policy framework directed at assisting the homeless victim.

What is the anticipated inconvenience of taking part in this study?

By participating in the study there may be some recollection of triggering or upsetting memories associated with your experiences of victimisation. In order to protect against any emotional distress or personal/cultural embarrassment the researcher will remain sensitive and respectful at all times. Please remember that you can withdraw at any time when these feelings become overwhelming and you may also take your time to answer questions that may be upsetting. Furthermore, arrangements will be made with the relevant shelter personnel to conduct the face-to-face interviews (in which the questionnaires will be completed) on a one-on-one basis, in a private or secluded area in the shelter(s). Where the information sharing cannot be observed or overheard by others. As mentioned previously, a social worker (Dr C Van Wyk) and counselling psychologist (Mr M Barends) will be available (at no cost to the respondents) for debriefing should the need arise.

Will what I say be kept confidential?

Confidentiality is a central component of the study. Your name will not be linked to the experiences of victimisation shared or the service needs identified during the interview. Pseudonyms (alias/false names) will be used to present the findings of the study. The findings will be reflected in this way in

all reports, publications and conference papers to protect the identify of all respondents. The only people who will have access to your information are the people working on this study, namely the researcher, the supervisor and the co-supervisor. To further enhance confidentiality, arrangements will be made with the relevant shelter personnel to conduct the face-to-face interviews (in which the questionnaires will be completed) on a one-on-one basis, in a private or secluded area in the shelter(s), where the information sharing cannot be observed or overheard by others. If at any time you feel that your confidentiality may have been compromised you may withdraw from the study immediately. Please note that the only limits to the confidentiality clause is when participants present a danger to themselves, others or share that they are involved in any criminal activity. These exceptional cases have to be reported to the relevant parties.

How will the information be stored and ultimately destroyed?

Hard copies and voice recordings will be stored in a locked cabinet, in a locked office for a period of 5 years for future academic activities. All electronic information will be stored on a password protected computer for the same period. Hardcopies will be shredded after 5 years and the electronic files will be permanently deleted.

Will I receive payment or any incentives for participating in this study?

Participation remains completely voluntary and there will be no payment or any incentives for participating in the study.

How will the participant be informed of the findings / results of the study?

The findings of the study will be shared with the respective shelters upon request. If the respondents would like to be informed of these findings – arrangements will be made with the respective shelter managers to make this possible. The researcher can be contacted on 051 401 7981 or PophaimJ@ufs.ac.za for any questions or enquiries regarding the findings of the study. Should you require any further information you can contact the research supervisor, Prof F Steyn on 051 401 2278 or email SteynF@ufs.ac.za. In case there are queries or concerns about the way or manner in which the research has been conducted please feel free to contact the secretary of the Research Ethics Committee (Mrs Marizanne Cloete 051 401 2592, CloeteM@ufs.ac.za).

Thank you for taking the time to read this information sheet and for participating in this study.

Consent to participate in this study

I, the undersigned,

_____
(the "respondent")
confirm that I voluntarily agree to participate in the research study referred to as the

_____ (the "study") in relation to

_____

and which study is being conducted by

_____
(the "researcher").

I, the undersigned respondent, further confirm that–

1. The researcher has explained the nature, procedure, potential benefits and anticipated inconvenience of my participation in the study.
2. I have read (or had explained to me) and understood the study as explained in the attached information sheet.
3. I have had sufficient opportunity to ask questions and I am prepared to participate in the study.
4. I understand that my participation in the study is entirely voluntary and that I am free to withdraw at any time without reason or penalty.
5. I hereby acknowledge and confirm that I understand the purpose for which the UFS and the researcher may collect, store, use, delete, destroy, outsource, transfer or otherwise process, as the context and circumstances may require and as contemplated in terms of POPIA, my personal information as set out herein.
6. I am aware that the findings of the study will be anonymously processed into a research report, journal publications and/or conference proceedings and that my personal information will be aggregated and deidentified at such stages.

I, the respondent, agree to the recording of the interview, while completing the questionnaire.

Full Name of respondent: _____

Signature of respondent: _____ Date: _____

Full Name(s) of researcher: _____

Signature of researcher: _____Date: _____

Appendix C: Interview schedule (Phase 3)

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UFS

Interview Schedule

Interview no:

I. **Opening**

1. Aim of the study
2. Role as participant (information sheet and consent form)
3. Timeline of interview

II. **Main questions**

A. Academics

1. In what capacity have you worked with members of the homeless population?
2. What do you think are the most common causes of homelessness?
3. What do you think some of the major challenges faced by the homeless include?
4. In what way(s) are the rights of homeless people addressed by government and other service providers?
5. In what way(s) are the needs of homeless people addressed by government and other service providers?
6. In what way(s) are the rights of homeless people negatively impacted by the government and other service providers?
7. In what way(s) are the needs of the homeless neglected by the government and other service providers?
8. In what ways can these measures be improved?
9. Are there any policies in response to homelessness that you are aware of? Please elaborate.
10. Do you think current frameworks (directly or indirectly related to homelessness) fully captures the complexities associated with the phenomenon? Please explain your answer.
11. What are the positive aspects of these policies?
12. What are the negative aspects of these policies?
13. In what ways are the homeless vulnerable to victimisation?
14. Are you aware of any by-laws that affect the homeless, if yes, what are your thoughts on it?
15. Do you think the general services and policies address the service needs for homeless victims?
16. Do you think there is a need for a victim inclusive policy framework in response to homeless victimisation? Please explain.
17. What do you think would have to be included in a victim inclusive policy framework in response to homeless victimisation?
18. Based on your own experience and expertise how would you define homelessness?

B. Representatives from DSD

1. What is your current position and core responsibilities?
2. In what capacity have you worked with members of the homeless population?
3. What do you think are the most common causes of homelessness?
4. What do you think some of the major challenges faced by the homeless include?
5. In what way(s) are the rights of homeless people addressed by government and other service providers?
6. In what way(s) are the needs of homeless people addressed by government and other service providers?
7. In what way(s) are the rights of homeless people negatively impacted by the government and other service providers?

8. In what way(s) are the needs of the homeless neglected by the government and other service providers?
9. In what ways can these measures be improved?
10. What policies are currently in place in response to homelessness?
11. Do you think current frameworks (directly or indirectly related to homelessness) fully captures the complexities associated with the phenomenon? Please explain your answer.
12. What are the positive aspects of these policies?
13. What are the negative aspects of these policies?
14. What can be done to improve these measures?
15. In what ways are the homeless vulnerable to victimisation?
16. Are you aware of any by-laws that affect the homeless, if yes, what are your thoughts on it?
17. Do you think the general services and policies address the service needs for homeless victims?
18. Was their marginality and vulnerability to victimisation ever considered during the development of local policies in response to homelessness?
19. Do you think there is a need for a victim inclusive policy framework in response to homeless victimisation? Please explain.
20. What do you think would have to be included in a victim inclusive policy framework in response to homeless victimisation?
21. Based on your own experience and expertise how would you define homelessness?

C. Representatives from DoJCD

1. What is your current position and core responsibilities?
2. Have you ever worked on developing policies directed at assisting vulnerable or marginal groups in society?
3. How important is it that every South African citizen to live a dignified life, with full access to their constitutional rights?
4. Do you think the homeless have full access to their constitutional rights? Please explain.
5. What was the process of developing the Hate Crime and Hate Speech Act?
6. What is the inclusion criteria for the Hate Crime and Hate Speech Act, and how was this decided?
7. How is marginality and vulnerability conceptualised and measured in terms of the Act?
8. Could you please explain the selection criteria followed during the formulation of the Bill (now Act)?
9. Was the marginality and vulnerability to victimisation of the homeless ever considered during the development of the Bill (now Act)?
10. Do you have any potential reasons why they were omitted from the list of protected groups?
11. Do you think the general services and policies address the service needs for homeless victims?
12. Do you think there is a need for a victim inclusive policy framework in response to homeless victimisation? Please explain.
13. What do you think would have to be included in a victim inclusive policy framework in response to homeless victimisation?
14. Based on your own experience and expertise how would you define homelessness?

D. Representatives from homeless shelters/NGOs/NPOs

1. In what capacity have you worked with members of the homeless population?
2. What do you think are the most common causes of homelessness?
3. What do you think some of the major challenges faced by the homeless include?

III. Closing

1. Do you have any additional information you would like to add?
2. Thank you for participating.

***Probing questions will be used when participants are required to clarify or expand on their responses.**

Appendix D: Information sheet and consent form (Phase 3)

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UFS

Research study information leaflet and consent form

(Phase 3: Stakeholders, policymakers and service providers)

Date

_____

Title of the research project

An analysis and reframing of South African policies in response to homelessness: Towards an evidence – based victim inclusive policy framework

Principle investigator / researcher(s) name(s) and contact number(s):

Name of student/researcher	Student number	Contact number
Jean-Paul Pophaim	2010084461	051 401 7981

Faculty and Department:

Humanities
Criminology

Study leader(s) name and contact number:

Name of Study Leader: Prof F. Steyn (051 401 2278)
Name of co-supervisor: Dr M. Cronje (051 401 7717)

What is the aim / purpose of the study?

The aim of the study is to develop an evidence-based victim inclusive policy framework to improve current responses to the victimisation of the homeless. This will be achieved by obtaining input from stakeholders, policymakers and service providers in the homelessness domain regarding the development of the policy framework (this will be the extent of your involvement in the study).

Who is doing the research?

Jean-Paul Pophaim, I am currently employed as a lecturer in the Department of Criminology at the University of the Free State. The research is for my doctoral degree with specialisation in Criminology.

Has the study received ethical approval?

To be completed once approval has been obtained.

Approval number: To be inserted once ethical clearance is obtained.

Why are you invited to take part in this research project?

You have been invited to participate in this study due to your experience in the homelessness domain or your knowledge regarding the development of policy frameworks. You are therefore requested to answer a few questions within the scope of your expertise.

What is the nature of participation in this study?

The third phase of the study will involve an interview, in which the researcher will ask you a series of questions regarding your involvement with members of the homeless population and obtain inputs for the development of an evidence-based victim inclusive policy framework. These interviews will be voice-recorded and should not last longer than 1½ hours. A social worker and counselling psychologist will be available (at no cost to the participants) for debriefing should the need arise.

Social worker: Dr C Van Wyk
051 401 3362
vanwykcj@ufs.ac.za

Counselling psychologist: Mr M Barends
053 831 4692
admin@salutech.co.za

Can the participant withdraw from the study?

Your decision to participate in the study is completely voluntary and you can withdraw at any point in time should you wish to do so. If you do agree to participate in the study, you will receive a copy of the information sheet and be requested to complete and sign a written consent form. Furthermore, you will not be forced to answer any question(s) that make you feel uncomfortable. You may withdraw at any point you wish, without reason or concern of any consequences.

What are the potential benefits of taking part in this study?

There are no direct benefits associated with your participation in the study. Providing inputs and sharing your expertise will add great value in developing the evidence-based victim inclusive policy framework.

What is the anticipated inconvenience of taking part in this study?

There are no foreseeable inconveniences for taking part in the study. If you feel uncomfortable or inconvenienced in anyway, please remember that you can withdraw from the study at any time, without reasons or concern for any consequences. As mentioned previously, a social worker (Dr C Van Wyk) and counselling psychologist (Mr M Barends) will be available (at no cost to the participants) for debriefing should the need arise.

Will what I say be kept confidential?

Confidentiality is a central component of the study. Your name will not be linked to any of the information shared or inputs provided. Pseudonyms (alias/false names) will be used to present the findings of the study. The findings will be reflected in this way in all reports, publications and conference papers to protect the identify of all participants. The only people who will have access to your information are the people working on this study, namely the researcher, the supervisor and the co-supervisor. To further

enhance confidentiality, interviews will be conducted on a one-on-one basis, in a private or secluded area, where the information sharing cannot be observed or overheard by others. If at any time you feel that your confidentiality may have been compromised you may withdraw from the study immediately. Please note that the only limits to the confidentiality clause is when participants present a danger to themselves, others or share that they are involved in any criminal activity. These exceptional cases have to be reported to the relevant parties.

How will the information be stored and ultimately destroyed?

Hard copies (notes made during interviews) and voice recordings will be stored in a locked cabinet, in a locked office for a period of 5 years for future academic activities. All electronic information will be stored on a password protected computer for the same period. Hardcopies will be shredded after 5 years and the electronic files will be permanently deleted.

Will I receive payment or any incentives for participating in this study?

Participation remains completely voluntary and there will be no payment or any incentives for participating in the study.

How will the participant be informed of the findings / results of the study?

The findings of the study will be shared with the respective stakeholders, policymakers and service providers upon request. If the participants would like to be informed of these findings – arrangements will be made to make this possible. The researcher can be contacted on 051 401 7981 or PophaimJ@ufs.ac.za for any questions or enquiries regarding the findings of the study. Should you require any further information you can contact the research supervisor, Prof F Steyn on 051 401 2278 or email SteynF@ufs.ac.za. In case there are queries or concerns about the way or manner in which the research has been conducted please feel free to contact the secretary of the Research Ethics Committee (Mrs Marizanne Cloete 051 401 2592, CloeteM@ufs.ac.za).

Thank you for taking the time to read this information sheet and for participating in this study.

Consent to participate in this study

I, the undersigned,

_____
(the "participant")
confirm that I voluntarily agree to participate in the research study referred to as the

_____ (the "study") in relation to

_____

and which study is being conducted by

_____
(the "researcher").

I, the undersigned participant, further confirm that–

1. The researcher has explained the nature, procedure, potential benefits and anticipated inconvenience of my participation in the study.
2. I have read (or had explained to me) and understood the study as explained in the attached information sheet.
3. I have had sufficient opportunity to ask questions and I am prepared to participate in the study.
4. I understand that my participation in the study is entirely voluntary and that I am free to withdraw at any time without reason or penalty.
5. I hereby acknowledge and confirm that I understand the purpose for which the UFS and the researcher may collect, store, use, delete, destroy, outsource, transfer or otherwise process, as the context and circumstances may require and as contemplated in terms of POPIA, my personal information as set out herein.
6. I am aware that the findings of the study will be anonymously processed into a research report, journal publications and/or conference proceedings and that my personal information will be aggregated and deidentified at such stages.

I, the participant, agree to the recording of the interview.

Full Name of participant: _____

Signature of participant: _____ Date: _____

Full Name(s) of researcher: _____

Signature of researcher: _____Date: _____

Appendix E: Institutional Ethical Clearance Letter (UFS).

UNIVERSITY OF THE
FREE STATE
UNIVERSITEIT VAN DIE
VRYSTAAT
YUNIVESITHI YA
FREISTATA

UFS

GENERAL/HUMAN RESEARCH ETHICS COMMITTEE (GHREC)

Registration Number: REC-112922-058

29-Aug-2024

Dear Mr Jean-Paul Pophaim

Application Approved

Research Project Title:
An analysis and reframing of South African policies in response to homelessness: Towards an evidence-based victim inclusive policy framework

Ethical Clearance number:
UFS-HSD2023/1848

We are pleased to inform you that your application for ethical clearance has been approved. Your ethical clearance is valid for twelve (12) months from the date of issue. We request that any changes that may take place during the course of your study/research project be submitted via an Amendment on RIMS to the ethics office to ensure ethical transparency. Furthermore, you are requested to submit a Final Report on RIMS for your study/research project to the ethics office once the project has concluded. Should you require more time than the allotted 12 months to complete this research, please apply for an extension by submitting a Continuation/Report on RIMS. Thank you for submitting your proposal for ethical clearance. We wish you success with your research.

The study is a high-risk study and identified for active monitoring. Six monthly progress reports must be submitted and additional documentation as requested.

Yours sincerely,

Dr Adri Du Plessis
Chairperson: General/Human Research Ethics Committee

Dr Adri du Plessis
Digitally signed by Dr Adri du Plessis
Date: 2024.09.01 20:39:00 +02'00'

205 Nelson Mandela Drive
Park West
Bloemfontein 9301
South Africa

P.O. Box 339
Bloemfontein 9300
Tel: +27(0)514019337
duplessisA@ufs.ac.za
www.ufs.ac.za