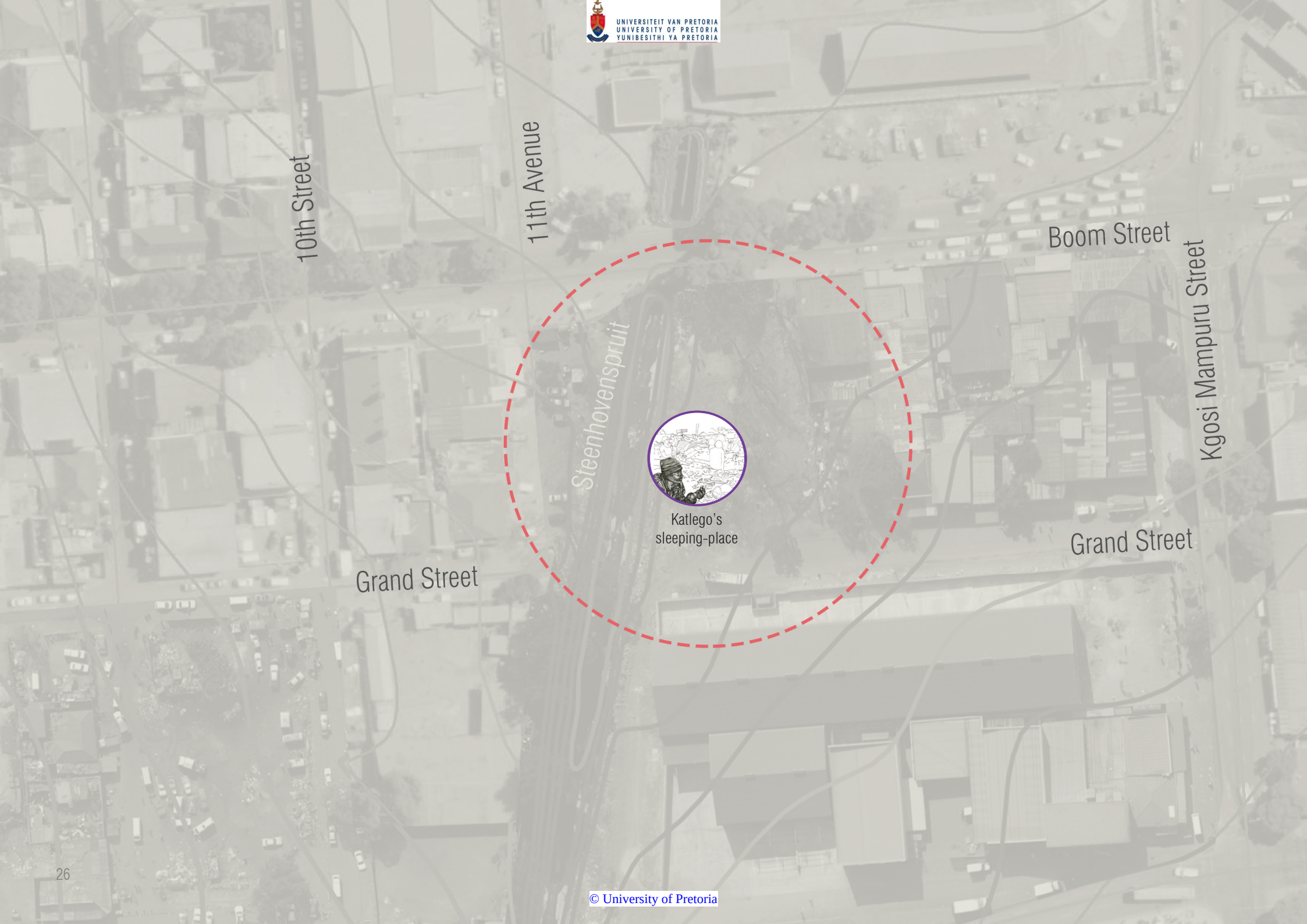




10th Street

11th Avenue

Boom Street

Kgosi Mampuru Street

Steenhovenspruit



Katlego's
sleeping-place

Grand Street

Grand Street

Three

From Dystopia's Perspective

Current Context

Katlego¹ recently arrived in Tshwane from the North-West and spends his days in the deteriorated spaces of Marabastad among other homeless and vulnerable people. He feels comfortable in these spaces because they are neglected, just like he feels.

He had come here in search of employment. He had searched for months to no avail eventually becoming despondent. Having no place to stay he was forced to find himself a space alongside the spruit, where other people were sleeping. He spent his days wandering the streets of Marabastad, still hoping to find a job. He discovered the vibrant Boom Street, appreciating the vivid colours of the racks of clothing and stacked food items for sale. The low buzz in the air was a mixture of conversations in the crowds of people, music booming from the cellphone shop behind him and the doof-doofing of passing taxis. There was a sound of exchange, buyers and sellers, with shuffling of notes, clinking of coins and rustling of packets. On the other side of the spruit, beyond the medical centre, the optician and the herbalist, there are fewer traders. Passing the dry-cleaner and the liquor store on Kgosi Mampuru Street, he turns the corner onto Grand Street and walks towards his sleeping-place alongside Steenhovenspruit².

Today he sits with a friend as they light up some nyaope. The sounds of traffic and crackling fires slowly begin to soften. His meagre street earnings go up in the smoky haze that surrounds the group. His eyes drift from his friend, lying sombrely beside him, and to another hiding under a blanket in front of him as a brown-filled syringe is passed to him.

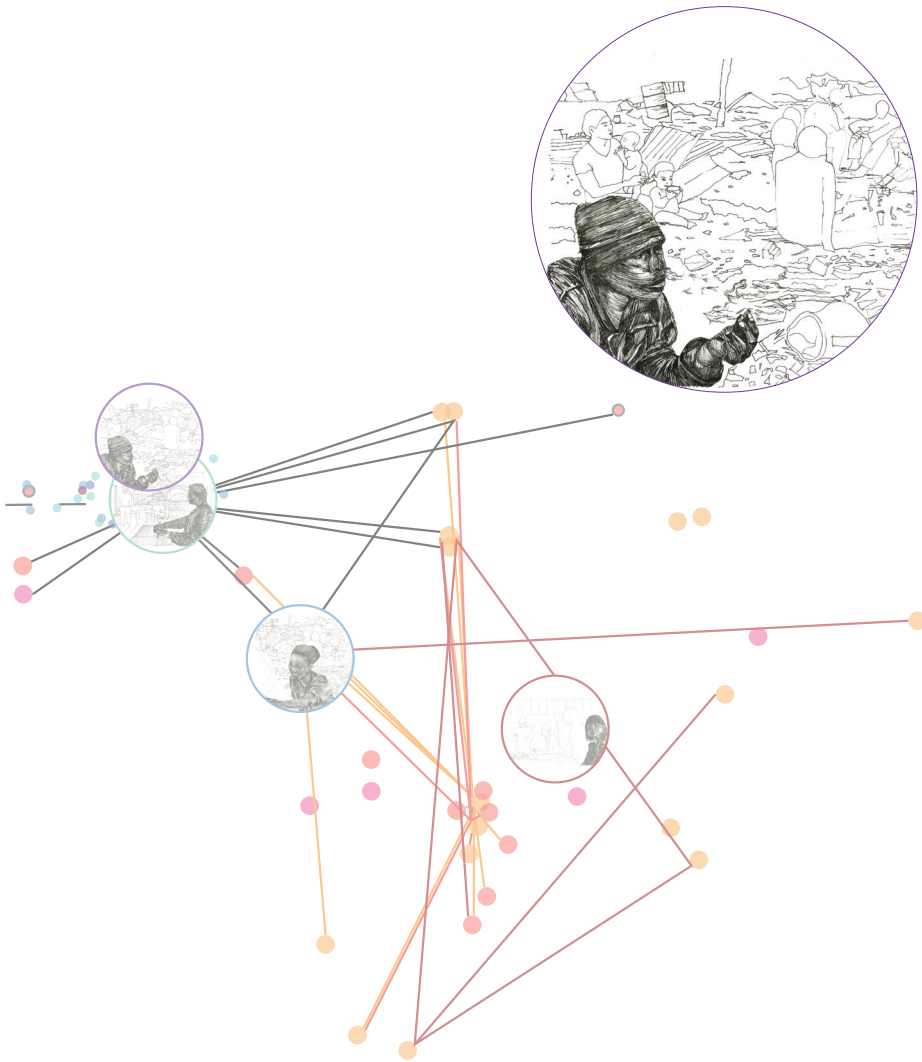
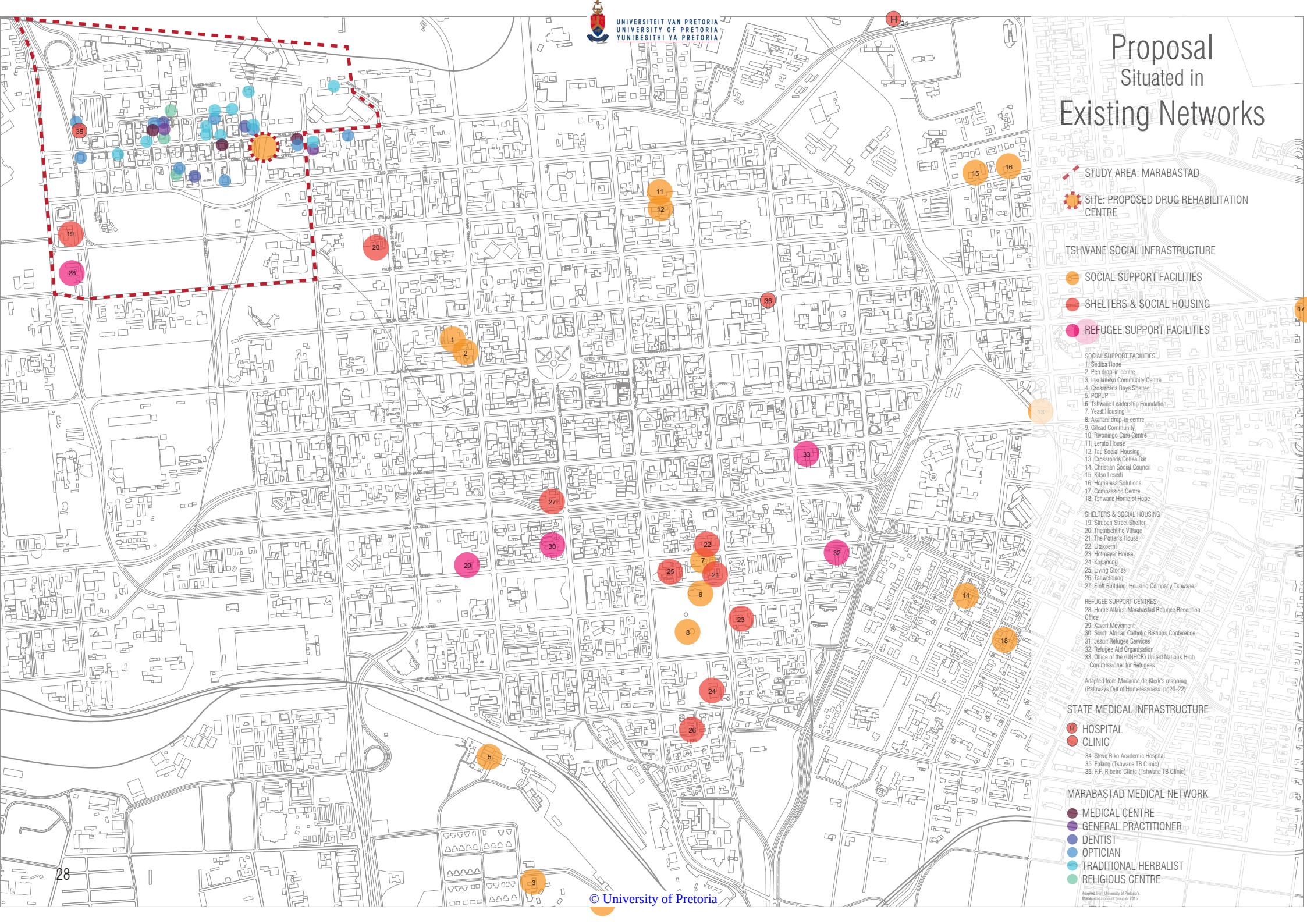


Figure 10: (left) Katlego's sleeping-place alongside the spruit, within the context of the study area (Patrick: 2016)

Figure 11: (above) Katlego's perspective of events is narrated in this chapter - highlighted within the greater network

1 See Figure 11
2 See Figure 10

Proposal Situated in Existing Networks



STUDY AREA: MARABASTAD

SITE: PROPOSED DRUG REHABILITATION CENTRE

TSHWANE SOCIAL INFRASTRUCTURE

- SOCIAL SUPPORT FACILITIES
- SHELTERS & SOCIAL HOUSING
- REFUGEE SUPPORT FACILITIES

- SOCIAL SUPPORT FACILITIES**
1. Sadiba Hope
 2. Pen drop-in centre
 3. Inkukhelo Community Centre
 4. Crossroads Boys Shelter
 5. POPUP
 6. Tshwane Leadership Foundation
 7. Yeast Housing
 8. Akanani drop-in centre
 9. Gilead Community
 10. Rivonango Care Centre
 11. Lento House
 12. Tai Social Housing
 13. Crossroads Collee Bar
 14. Christian Social Council
 15. Kitso Lesedi
 16. Homeless Solutions
 17. Compassion Centre
 18. Tshwane Home of Hope
- SHELTERS & SOCIAL HOUSING**
19. Struben Street Shelter
 20. Thembelike Village
 21. The Potter's House
 22. Dakaeni
 23. Ntshongwe House
 24. Kopanong
 25. Living Stories
 26. Tshwetelang
 27. Eloff Building, Housing Company Tshwane
- REFUGEE SUPPORT CENTRES**
28. Home Affairs: Marabastad Refugee Reception Office
 29. Xaveri Movement
 30. South African Catholic Bishops Conference
 31. Jesuit Refugee Services
 32. Refugee Aid Organisation
 33. Office of the (UNHCR) United Nations High Commissioner for Refugees
- Adapted from: Marianne de Klerk's mapping (Pathways Out of Homelessness: pg20-22)

STATE MEDICAL INFRASTRUCTURE

- HOSPITAL
 - CLINIC
34. Steve Biko Academic Hospital
 35. Folong (Tshwane TB Clinic)
 36. F.F. Ribeiro Clinic (Tshwane TB Clinic)

MARABASTAD MEDICAL NETWORK

- MEDICAL CENTRE
- GENERAL PRACTITIONER
- DENTIST
- OPTICIAN
- TRADITIONAL HERBALIST
- RELIGIOUS CENTRE

Four

Networks of Support

Current Social Networks in Context

Dr Radebe¹ elaborates on the support facilities in the network to Mr Pillay. She uses a map² that her friend Janeke, an architect in Pretoria, had drawn up for her. The map shows thirty-three facilities across Tshwane that fall into the three categories of social support, shelters and social housing, and refugee support centres. On the map she highlights the facilities in Marabastad: the Struben Street shelter and Home Affairs (refugee reception). She also highlights facilities close to Marabastad: the new Yeast housing scheme 'Thembehlihe Village' as well as Sediba Hope (clinic) and a PEN Ministries' drop-in centre that provides health and mental support.

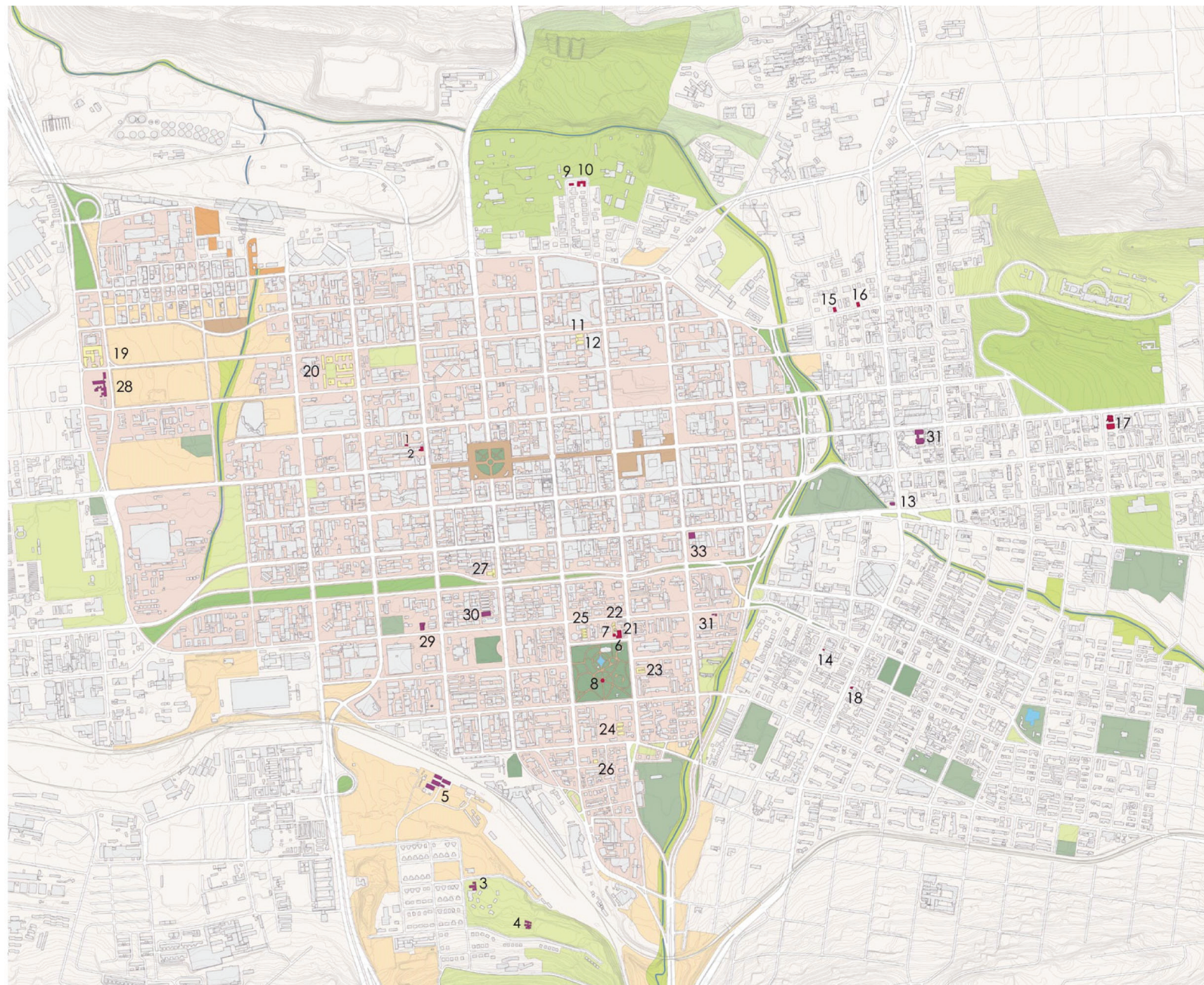
Mr Pillay is disappointed to find out that there are no public drug rehabilitation facilities within the existing network of support. Dr Radebe informs him that the people who see her at the Sediba Hope Clinic are referred by social workers to the Dr Fabian and Florence Ribeiro Centre in Cullinan (for the treatment of drug addiction). Mr Pillay points out that this centre is obviously too far from Marabastad and Dr Radebe adds that the waiting list is a few months long.

Dr Radebe is overwhelmed – she does not feel that their efforts will ever be enough to help the homeless people. She chats with Mr Pillay and explains the complex issue of homelessness to him.

- 1 See Figure 13
- 2 See Figure 12, adapted from Marianne De Klerk's mapping in Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 20-22
See Figure 14
and Honours Marabastad, (research from the Honours group of 2015) (University of Pretoria: 2015)

Figure 12: (left) Proposed connection to existing support network – map adapted by (Patrick: 2016) from (De Klerk, M: 2015: 20-22)

Figure 13: (above) Dr Radebe's perspective of events is narrated in this chapter – highlighted within the greater network (Patrick: 2016)



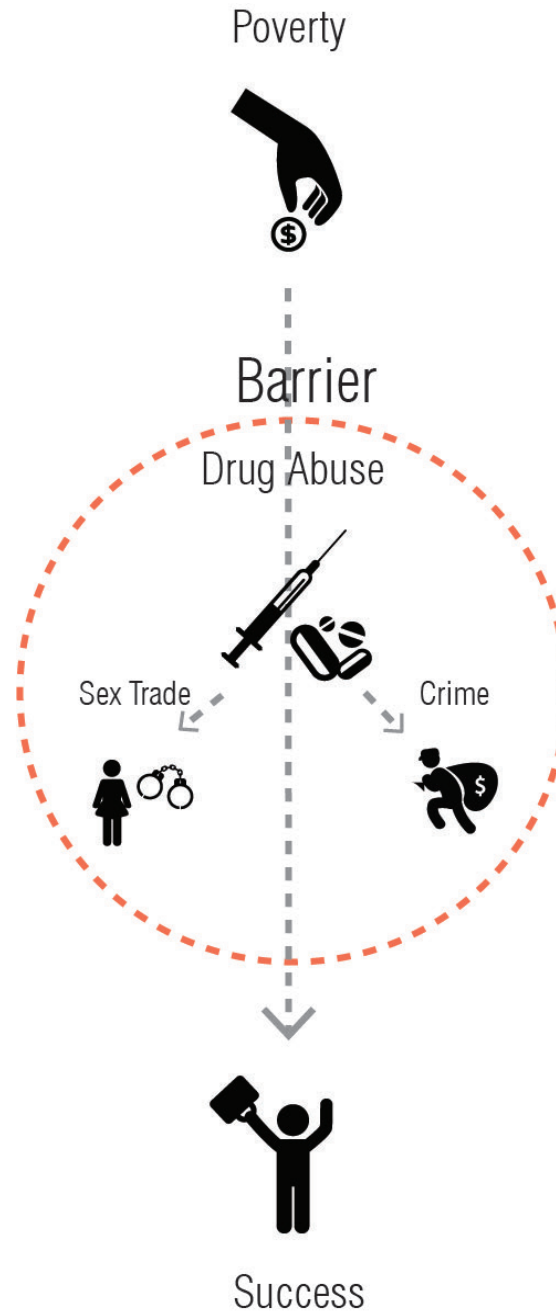
- Inner city blocks
- City blocks
- Built fabric
- Rivers and spruits
- Shelters & social housing
- Social support facilities
- Refugee support facilities
- Squares and malls
- Sports Fields
- Well maintained parks
- Historic landscapes
- Ridges
- Road medians
- Rover/ spruit riparian
- Deteriorate open space
- Deteriorate squares

Apartheid legislation in the late 1980s and the early 1990s resulted in a change of the migration patterns into the city. So this falls into the story “Stagnation and Perseverance”³ that you told me the other day. The street homeless were no longer only middle-aged white males with substance abuse problems⁴. There is a distinction between the homeless and the street homeless: those that stay in informal settlements and those who face daily challenges⁵ out on the streets.

Street homelessness in itself is a complex issue because there are many types of street homeless people: economic, situational and chronic. Economic homelessness is the result of the distance between the place of employment and the home, and the unaffordability of transport. Situational homelessness includes victims of abuse, refugees, ex-convicts and patients released from psychiatric hospitals, with nowhere to go⁶. Chronic homelessness refers to people that are on the streets as a result of chronic mental health or substance abuse problems. Chronic homelessness also often results from the failure rise above an economic or situational homelessness⁷.

Figure 14: (left) Considering these degenerated spaces in combination with the existing support networks (Tshwane Homelessness Forum: 2015: 22)

- 3 Utopia 7 [1987-2016] adopted from Marabastad Urban Vision Group: (Nicha,S., Hough, D. & Patrick, N. : 2016)
See Timeline with Utopias: Figure 6
- 4 Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 3
- 5 These challenges include: extreme poverty, isolation and loss of societal resources, according to Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 3
- 6 Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 3
- 7 Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 5



You mentioned that you recognised Katlego the other day, he probably started out in economic homelessness and could not leave soon enough so it turned into chronic homelessness when he found himself caught up in the nyaope culture of Marabastad. The drug culture includes sex workers and may lead to crime as well, all coming with their own health risks⁸.

Strategies to facilitate rehabilitation of the homeless have been devised during the 'Pathways Out of Homelessness Conference' which I attended with Janeke. They proposed the following solutions: psycho-social, economic, spatial, physical, political and spiritual⁹. Janeke commented afterwards that it was important to network in all the related fields: urban, architectural, social and medical¹⁰.

I am sure that you agree that the Struben Street shelter, which is no longer managed, does not cater to the current needs of the street homeless. These types of facilities should provide safe housing, sufficient amenities and hygiene, education and job programmes and treatment for substance abuse¹¹.

Janeke was telling me that the research she had done had shown that homeless people tend to gather and sleep in deteriorated and abandoned open spaces and buildings, and that the well-maintained open spaces are used as places of refuge for the homeless, where there are amenities and social facilities¹². So we should consider these degenerated spaces, in relation to existing support networks, when planning pathways out of homelessness.

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- 8 See figure 15 illustrating the different aspects involved in drug use.
To elaborate on the statistics related to drug use:
- 1152 commercial sex workers were tallied in a recent study of thirty known sites in the City of Tshwane. 1005 of these were women and sixty five were trans-gender female - all between the ages of eighteen and fifty four. Eighty two were found to be males, age nineteen to thirty five.
 - 416 commercial sex workers were tested for HIV and TB in 2014 - forty percent of them were HIV positive and ninety five percent of them showed TB symptoms.
 - The risk of transmission of HIV and Hepatitis B or C is four times higher amongst injecting drug users. 300 drug users were tallied in a recent study of forty known sites. Of the 300, ninety percent were men between the ages of nineteen and thirty five. Alcohol and drug abuse risks are increased by fifty percent in the commercial sex trade.
- According to:
Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 16
- 9 Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 3
- 10 Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 5
- 11 According to Marianne De Klerk in Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 20
- 12 According to Marianne De Klerk in Tshwane Homelessness Forum, City of Tshwane, University of South Africa & University of Pretoria, *Pathways Out of Homelessness: Research Report 2015*. (Available online: http://www.up.ac.za/media/shared/249/ZP_Files/homelessness-report-2015.zp70613.pdf Accessed: 22/04/2016), 20

Figure 15: (left) Barrier of drug addiction that exists on site at present (Patrick: 2016)