

## Streetscapes programme: impact on substance use, history of TBI

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Chronic homelessness is a social issue which leaves affected individuals vulnerable. Research suggests that head injuries (also known as TBIs) often occur among homeless individuals, which may compound their vulnerability. Research also shows that head injuries amongst the chronically homeless heightens the issue of delinquent behaviour such as substance abuse among this marginalised population. Further, substance use may also increase the risk of head injuries. Although there is a growing body of research and literature on these issues internationally, there is limited information from a South African context regarding the three core variables: chronic homelessness, head injury (TBI) and substance use.

Our study focused on assessing the history of head injuries and the level of substance use in a sample of homeless individuals. We aimed to assess whether there is a link between head injuries and substance use among this group. Lastly, we wanted to assess the effectiveness of the Khulisa/Streetscapes programme and whether there were any recommendations the clients had regarding the programme.

For this study we interviewed 14 clients from Khulisa/Streetscapes to get information about the number of head injuries and substances used in their life. We also had 9 of these 14 clients partake in a focus group to talk about the effectiveness of the Khulisa/Streetscapes programme. These participants came from the 3 different homes associated with Khulisa/Streetscapes. These houses were in District Six, Woodstock and Kuils Rivier. The participants' ages ranged from 33-58 and they were fluent in English and/or Afrikaans. It was a mixture of men and women with some who had been in the programme for 6 months, while others over 4 years.

We found that reports of lifetime substance use rates were very high among the individuals in this sample. Alcohol, tobacco and cannabis were used the most and on a daily basis before the participants joined the Khulisa/Streetscapes programme. Tik and/or andrax usage was also very common among this sample with 12 of the 14 participants using one or both of these substances before joining the programme. Other substances such as cocaine, inhalants

and hallucinogens were not used as commonly as they are not easily found on the streets of Cape Town, and because they are more expensive than the other drugs discussed above.

We also found that there was a high number of head injuries reported among individuals in this sample. There were a number of different ways in which the participants sustained head injuries, including: struck by or against an object, a fall while drunk or sober, a fight or assault, sports accident, or a motor vehicle accident. The most common cause of head injuries was a fall while drunk or under the influence of drugs. The second most common cause of head injuries was getting into fights and being hit while drunk or under the influence of drugs. These findings suggest that there may be a relationship between substance use and head injuries, but that outcome was not shown in our statistical analysis. One reason for this might be because we only had a small study sample. Many of the participants had multiple head injuries, while 4 participants had 5 or more head injuries while living on the streets. Only one participant had never sustained a head injury in their entire life.

Our qualitative findings on the effectiveness of Khulisa/Streetscapes suggest that the programme is effective in its aims to reduce substance use among the homeless population and equip them with the necessary skills needed for future employment. Even though the vocational programme has achieved its aims, some participants in this study feel there is room for improvement in providing a higher stipend income to accommodate the participants' other personal expenses; however, these sentiments were not shared by those who have been in the program for much longer.

Given all of the vulnerabilities in our context which place individuals such as those who participated in this study at risk, even preliminary evidence of effectiveness of programs such as Khulisa/Streetscapes to reduce maladaptive behaviours such as substance abuse, should be recognized and explored.