Homelessness in Sierra Leone: An Overview of Social Work Intervention in Helping Homeless Population

Moses Abdul Fullah
Lecturer, Department of Sociology and Social Work, Fourah Bay College, University of Sierra Leone, Sierra Leone

Abstract:
The article looks at the key causes of the rise in homelessness as well as Social Work intervention strategies in helping homeless people in Freetown. In many nations, homelessness has been a long-standing social issue. How to help homeless individuals live independently is a dilemma encountered by those who work and volunteer in homeless shelters. The study looked at problems with homelessness among children, teens, adults, the elderly, women, and veterans over the previous years in this brief study. According to the findings, family circumstances, housing, unemployment, and mental illness are the main causes of homelessness. Initial instances of these issues result in homelessness, which in turn makes them worse. Effective community interventions and policies are needed to prevent and reduce homelessness, including drug rehabilitation facilities, job support, and affordable housing.

Keywords: homeless, homelessness, social work, social support, night house.

Introduction
One of the most significant and pressing contemporary problems in Sierra Leone is the problem of effective social care and support for the homeless. Homelessness severely impacts individuals' happiness and emotional well-being (Aaronson, 2000), affects children's growth, causes cognitive impairment, and causes physiological problems (Bassuk et al., 1997; Mohanty and Rout, 2009). Because of these far-reaching consequences, homelessness can create long-term problems for society and Social Welfare System in Sierra Leone. To address the serious social problems arising from homelessness, studying this group and the conditions under which it exists is important. Only through a certain series of studies can it be determined who these people are, what their adaptation is, and what are the prospects for their return to society, finding housing and work.

The part of our country's population in need of social assistance is made up of people without a fixed place of residence.

Literature Review
Homeless people are a social group of society who have no own housing, no company housing, no rented housing, or housing provided by relatives, friends, and acquaintances. Homelessness is one of the global problems of humanity, consisting of the inability to provide housing for a large number of inhabitants of the planet and generated by various reasons global, regional, and local significance, both subjective and objective nature. Homelessness can be chronic or situational; Homelessness can be voluntary or forced.

Depending on the subjective reasons, the following groups are distinguished:

homeless:
• those who fundamentally do not want to work (the most numerous group);
• people with mental disorders;
• those for whom vagrancy is a form of evasion;
• criminal liability;
• who have become homeless due to troubles in the family or at work, etc.

Homeless people are the most powerless and unhappy part of the population. Identification and social adaptation of this category of persons is important in terms of improving the life of society and preventing repeated crime of citizens in difficult life situations. Homelessness is a key challenge faced by social workers in their professional lives. Irrespective of employment in the homelessness field, the presence or absence of safe, affordable, and appropriate housing affects people's lives in areas that are key foci of social work practice, policy, and research.

According to Aguiniga, D., & Bowers (2018), social work educators must educate students by creating evidence-based homelessness courses that equip graduates with a practical understanding of practice, policy, and research. The lack of a home is only one aspect of homelessness (Theobald et al., 2021; Tually et al., 2008), alcohol and other drug use (Johnson & Chamberlain, 2008; Mallett et al., 2005), intergenerational homelessness (Flatau et al., 2009), trauma (Robinson, 2011; Taylor & Sharpe, 2008), domestic and family violence (Murray & Theobald, 2014; Spinney, 2012; Theobald et al., education and labor (Gerrard, 2015, 2017), and links with the criminal justice and child protection systems (Baldry et al., 2002; Mendes et al., 2011). Given that, a person's housing situation touches on many issues that contribute to people coming into contact with a social worker, whether it be through service provision, community work, policy development, or Research, establishing social work as a fundamental component in ending homelessness can be a spur for reassessing other complex social problems (Henwood et al., 2015).

Sierra Leone Concealed Homeless Picture

While crises and natural disasters like the civil war, Ebola, and political unrest have increased the number of homeless people, the issue of homelessness in Sierra Leone continues to be minimized and occasionally denied. The nation also continues to see subpar growth rates in its homeless population. Although official reports indicate that a landslide in 2017 killed 1,141 people due to floods and caused 3,000 people to be displaced, thousands of people sought refuge at the national stadium, Sierra Leone has a poor history of homelessness and street dwellers (Harris, Wurie, Baingana, Sevalie, & Beynon, 2018; LeComte, 2018).

Homelessness has been sharply rising in Freetown for some time (Mansaray, Huang, & Kamara, 2018). For social service administrators, the prevalence of homelessness in Freetown continues to be an issue.

Homelessness in Sierra Leone

Political authorities in Sierra Leone have not made homelessness a priority since every resident is exposed to and benefits from the social and cultural norms of the nation, which emphasize neighbourly kindness and the extended family system, irrespective of social and economic standing (Rogers, 2016). However, specialized shelters have been developed remotely over time to either house shelters for victims of domestic abuse or to offer emergency shelter for those affected by natural disasters (Tryggestad, 2017). In Sierra Leone, the main reasons for homelessness are laziness or a lack of connections to support systems, networks, or extended family.

The national conversation has neglected to address topics like mental health, substance misuse, and child abuse victims. However, the 2010 mental health policy included a reference to the requirement to make accommodations for those with mental health issues. The necessity to safeguard rape victims and children still presents problems for policymakers, as they have also failed to do (Betancourt, 2010; Shackman & Price, 2013). Group housing is typically used to provide shelter for victims of natural disasters.
For instance, the National Stadium shielded thousands of people from a landslide in 2017 and urban flooding in 2015, and other government initiatives like the UNASIL provided housing for some disaster victims and the Old School provided housing for some victims during floods in 20017.

The majority of those who were homeless and reported between December 15, 2019, and February 20, 2020, were unsheltered, which means that the country has no temporary shelter options and that the streets are considered their principal form of residence. There are no recorded nightly counts of the homeless in Sierra Leone, but people on the street claim that the number rises with the season as well as with social, economic, and political developments. There are fewer homeless persons on the streets during the wet season. Contrarily, during the dry season, there are more homeless individuals on the city’s streets. In terms of economics, when the country has significant economic growth, people provide. The number of homeless persons declines as a result of employment and the ability to pay rent, and in civic pursuits like politics, people may decide to remain on the streets to take part in the action (Abdullah, 2014; Kaifala, 2016).

When settlers first began to live on the land in the 1600s, the history of homelessness in the nation predates colonial times (Kaifala, 2016). Various forms of homelessness have appeared throughout Sierra Leone’s history as a result of leprosy epidemics, floods, civil wars, ebola, tribal conflicts, mudslides or political turmoil.

Since public shelters have certain negative cultural implications and are associated with shame and dishonor, the Sierra Leonean society, which has strong cultural communist characteristics and social ties, has little interest in them (Kaifala, 2016; Berhane-Selassie, 2009). But to guarantee the welfare of foster children, a system of accredited schools for homeless adolescents arose in the late 1960s and early 1970s (Fyfe, 1987; Mouser, 2009; Zeanah, Humphreys, Fox, & Nelson, 2017). A transitional living arrangement that offers a framework for clinical interventions such as education, counseling, career assistance, and social skills is known as a transitional school. Temporary homeless shelters are designed for short-term use during large natural disasters as any longer-term use tends to identify users as "vagrants" or drops a contentious phrase that developed during that time (Gowan, 2010; Parsell & Parsell, 2012).

However, additional shelters offered resources and services to the city’s homeless population in various African cities in South Africa, Zimbabwe, and Malawi in the early 20th century (Fredriksen, 2014). Except for a few cultural and environmental elements, the causes of homelessness are the same as they are in all other nations. The reasons for homelessness in Sierra Leone are discussed in the section that follows.

Causes of Homelessness in Youth and Young Adults Homelessness affects youth and young adults for a variety of reasons, including parental or guardian dislocation, deliberate leaving of a family or foster home, or association with other homeless family members or acquaintances (Dworsky, Napolitano, & Courtney, 2013; Martijn & Sharp, 2006).

The causes of homelessness around the world remain the same, with similar circumstances and similar problems. Sierra Leone’s homeless population puts forward.

Unemployment as one of the main causes of homelessness, with little awareness of the development and economic impacts of this population (Adhvaryu, Fenske, Khanna, & Nishadham, 2018). Unemployment among youth and college graduates is 50-55% when the underemployment rate is factored into the equation and this number rises significantly to 70% (Alemu, 2016). The Government of Sierra Leone is a major employer with some very competitive employment opportunities in the private sector, business hiring remains at minimum wage levels and the demand for skilled labor in the private sector is limited to human resource management and assignments (Alemu, 2016).

Mental wellness: Mental health is the second factor contributing to homelessness in Sierra Leone; nevertheless, society does not completely
grasp this issue. The first national mental health policy was adopted in 2010, but both the public and commercial sectors are failing to sustain the frail mental health institutions (Efevbera & Betancourt, 2016). As a result, homeless and abandoned people with mental health issues are left on the streets. Synthetic drugs' arrival like kush and political leaders' inability to address the effects of rising teen drug usage have worsened the situation (Wessells, 2016).

Housing: The third reason why homeless people consider themselves homeless is the lack of affordable housing or rental apartments, the capitals of minor African countries are still overburdened with a concentration of government agencies and large companies, and there is high competition for small housing in the cities, rental properties, making affordability unaffordable for the unemployed and underemployed. Youth and young adults constitute about 30-60% of the population and since the purchasing power of this large segment of the population is limited, land ownership is unaffordable as the availability of such houses and houses is limited. Thus, driving youth and young adults into homelessness coupled with excess youth increases interest in decisions that affect them and in disconnecting from known systems.

Methodology
Both primary and secondary reviews were employed in the study. The secondary data came from a desk survey that earlier researchers had done on homelessness in Sierra Leone. Following floods and landslides that wreaked havoc in Sierra Leone in 2017, it examined the hidden terrain of homelessness there. It delves deeper into Sierra Leone's history of homelessness. A quantitative method was used to gather primary data. 128 homeless people (61 males and 67 females, ages 18 to 40) made up the sample. Purposive sampling was used for this investigation.

Results and Discussion
There are a sizable number of homeless people in Freetown, per the statistics of the study; 47% reported being male, and 53% were female. An approximate number of 60 reported being between 18-30 years old, while 46 reported being between 30-38, and only 22 showed to be over 39 years. The age of the modern homeless person can be very different. The average age is approaching 30 years.

Among the homeless in Freetown, 20% are former prisoners, and 25% of street dwellers lost their housing as a result of disaster. 20% of homeless people were left without housing and ended up on the street due to lack of family support, 35% are as a result of substance abuse and mental illness.

Based on the study, persons without of a certain place of residence consider themselves victims of circumstances, most of them do not maintain contact with their families, feeling resentment towards them and the entire world around them. The main reasons for the appearance of homeless people sometimes situations happen in people's lives that are turning points in their destinies and directly or indirectly lead to the fact that the person becomes homeless. There are primary and secondary reasons for the situation of homelessness. The primary causes include (why people become homeless):

- Family circumstances (30%);
- Unemployment (25%);
- Housing (20%);
- Mental illness (19%);
- Personal choice (6%);

Secondary causes are circumstances making it difficult to return to a "normal" way of life, determined by the state in which a person inevitably finds himself after loss of housing and registration. Secondary causes of homelessness are:

- discrimination;
- delegalization;
• stigmatization;
• lack of realistic state social policy.

Overview of Social Work Interventions to Help Homeless People in Freetown

To address the numerous challenges faced by the homeless, Freetown currently has only a few shelters providing social services to the homeless. These are "Don Bosco", "City of Rest", "St. John's Foundation", etc. These institutions are not the property of the state and can only accept small homeless people.

Don Bosco helps children, adolescents, and young adults who live in conditions of high vulnerability on the streets of Freetown. They listen to their troubles and cries and address their needs comprehensively. Don Bosco reunites them with their families and empowers them through education and skill development. Their programs include a child care center for boys living on the streets; a girls' shelter for beneficiaries of all types of violence; a shelter for girls living in prostitution situations and a group home program for children who cannot be reunited with their families.

City of Rest is a mental health care provider that addresses a range of health issues including psychosis, substance abuse, and trauma. It covers all age groups, with a special focus on youth and adults. It is currently working to create a mental health coalition body to act as a voice for those affected by mental health and their carers. The facility provides temporary shelter to individuals suffering from mental illness. The institution provides comprehensive preventive and medical care to citizens prone to vagrancy, begging, and alcohol abuse. Prevention of persons admitted for temporary residence in the institution is carried out regularly both by employees of the institution and by professional social workers, psychologists, and other mental health specialists.

St. George's Foundation: a charity in England and a local non-governmental organization (NGO) in Sierra Leone, working in partnership since 2004. It is a key local non-governmental organization that works closely with the Ministry of Social Welfare and the Ministry of Gender and Children's Affairs. The facility is owned by the Child Protection Committee and the Family Tracing and Reunification (FTR) Team.

It plays a leading role in the welfare of children in the area known as Western Rural. Their main job is to support homeless or street children. But this often includes abandoned babies, referrals from social services, and children whose families for some reason cannot cope with the situation. Their focus is on ending homelessness and helping them cope with their problems. Once the process has begun and they are settled, they help them along the way to reunite them in a permanent home with their relatives and ensure they are enrolled in school to continue their education. On average, children live with them at home for one school year, during which they help them rehabilitate, adjust to school learning, and work with their families to ensure a successful re-entry.

Conclusions

In all of the above institutions, social work strategies are aimed at improving the well-being of homeless people and require the participation of competent and professional social workers. It is important to note that in some cases, social workers require more than just counselling and psychotherapy to fully support their clients. Social workers have a responsibility to address homelessness by addressing systemic barriers to social, political, and economic structures that can help stabilize homeless clients.

Clinical Social Work with Homeless People

Homelessness is a condition that occurs with a combination of psychiatric and other related problems, especially among people who have been chronically homeless for years on end. Returning to housing and assuming associated responsibilities typically requires clinical interventions to guide the process of adaptive change that leads to long-term recovery and success.

Homeless people typically do not seek treatment and clinical support. They strive for survival. Day-to-day outreach to homeless people occurs
in non-traditional settings: shelters, emergency rooms, soup kitchens, the street, parks, and transit terminals. Social workers use clinical skills to establish a therapeutic relationship by creating opportunities in community settings for interviews and assessment of underlying interests and concerns.

Using Each Meeting to Clinically Assess the Client's Functioning

The social work professional should use each meeting to assess functioning. While some symptoms may be obvious, others are more subtle and require the physician to be skilled in removing and handling sensitive material. Common problems include mental illness, domestic violence, substance abuse, illiteracy, interpersonal communication difficulties, and health problems. The diagnostic formulation is the basis for using psychotherapy and other interventions to help people identify, work on, and overcome barriers. Homelessness can undermine a person's confidence. Helping clients regain hope and interest in meeting the challenges of a new life is often the key to success, as the following example shows.

Application of Evidence-Based Practice

Social workers also use evidence-based methods to work with homeless people. Professional social workers receive extensive training in motivational interviewing to help clients move through the process of adaptive change.

Wellness Self-Management, another evidence-based practice, helps people with mental illness focus on achieving personal goals. Behavioral treatment for substance abuse for people with serious and persistent mental illness includes teaching abstinence skills and setting short-term goals.

The Role of the Clinical Social Worker in the Continuum of Care

Social workers provide quality clinical social work services. They conduct psychosocial assessments, diagnose individuals using the DSM-IV-TR, and provide both long-term and short-term crisis-focused psychotherapy. They oversee assessments, formulate treatment plans, and prioritize mental health, physical health, financial goals, and case management. The psychotherapy they provide is designed to help clients resolve the psychiatric, social, and behavioral problems that create barriers to their social, emotional, and financial well-being which are essential to helping people escape homelessness. For mental illness, substance abuse, domestic violence, and other issues, clinical support must continue even after homeless individuals and families are housed. More often than not, social workers are the dominant professionals in supportive housing and other community settings.

References


