

SOCIO-ECONOMIC PROFILING OF URBAN RENEWAL NODES – KHAYELITSHA AND MITCHELL'S PLAIN



CITY OF CAPE TOWN | ISIXEKO SASEKAPA | STAD KAAPSTAD

THIS CITY WORKS FOR YOU

**Compiled by: QSJ Consultants & Unit for Religion and Development
Research (University Stellenbosch)**

Commissioned by: Information and Knowledge Management

August 2006

Executive summary

Table of contents

Introduction.....	i
Research process.....	ii
Research findings.....	iv
Khayelitsha.....	iv
A demographic profile	iv
Perception and impact of Urban Renewal Programme.....	v
Living conditions and networks	vi
Mitchell's Plain	vii
A demographic profile	vii
Perception and Impact of Urban Renewal Programme	viii
Living conditions and networks	ix
Focus groups	xi
Mitchell's Plain.....	xi
Khayelitsha	xii

Introduction

During the State of the Nation Address in February 2001 President Mbeki announced the Urban Renewal Programme (URP) and the Integrated Sustainable Rural Development Programme (ISRDP) with the aim *“to conduct a sustained campaign against rural and urban poverty and underdevelopment, bringing in the resources of all three spheres of government in a coordinated manner”* (www.dplg.gov.za).

With the announcement of the URP and ISRDP, specific nodal areas were identified as focus areas for these programmes. Two of the areas identified were Khayelitsha and Mitchell's Plain, which both fall in the City of Cape Town.

In 2005 the Information and Knowledge Management Department was commissioned to undertake the profiling of these two urban renewal nodes. A tender was posted in November 2005 for a socio-economic survey and for two focus groups to be conducted in each nodal area. The purpose was to update the 2001 Census information as well as to identify key priority issues and needs to inform integrated planning for these two areas. In addition, the survey was intended to assess the impact of the Urban Renewal Programme in the respective communities.

A consortium consisting of QSJ Consultants and the Unit for Religion and Development Research (University Stellenbosch) submitted a proposal in response to the call and this was subsequently accepted.

Research process

The **brief** asked for 4 focus groups, two in each nodal area. Two focus groups were conducted in both Khayelitsha and Mitchell's Plain. For both areas the one focus group engaged in discussions with respondents residing in informal dwelling units and the other with respondents in formal dwelling units.

Furthermore, the brief required 1 000 face-to-face interviews to be conducted with the household head or acting household head of each selected household.

Hence a research process was designed which consisted of both a qualitative and quantitative approach. The **qualitative approach** involved the facilitation of four focus group discussions, two in Mitchell's Plain and two in Khayelitsha. In turn the **quantitative approach** involved face-to-face interviews conducted with the household head or acting household head of each selected household.

The four focus groups were held on two consecutive Saturdays (18 March 2006 and 25 March 2006), with the one group meeting early morning and the other late morning. Respondents were pre-arranged and recruited through various contacts in the communities. For all four focus groups the number of discussants present varied between six and nine.

The aim of these focus groups was exploratory in that the discussions were used to inform the items included in the final questionnaire as well as to contextualise the quantitative data collected during the survey.

35 fieldworkers (18 for Khayelitsha and 16 for Mitchell's Plain), matching the criteria set by the City and the consultants, were recruited and trained during the first week of May 2006 at the Khayelitsha Development Forum (KDF) offices in Khayelitsha. The fieldwork of the survey with the questionnaire was conducted during the week of 8-12 May 2006.

The questionnaire was made available in both English/Afrikaans and English/isiXhosa in order to make it accessible to all households. The questionnaire consisted of three sections:

Section A: Impact of Urban Renewal Programme.

Section B: Household questions.

Section C: Demographic questions about individuals in the household. This section deals with different socio-economic characteristics of the individuals in households, i.e. gender, age, population group, etc.

The structured questionnaire was the primary data-collection instrument and, together with the methodology followed, allowed for the quantification and thus generalisation of data for the two areas.

With regards to sampling, the most effective sampling method in obtaining a great degree of representativeness is stratified sampling. The sample was stratified on two levels: first,

according to the number of households of the two geographical areas in the study area; and second, according to the number of formal and informal dwelling units in each geographical area (Mitchell's Plain and Khayelitsha)¹.

Regarding the first level of stratification by the number of households for each nodal area, a sample was selected totalling 453 households for the Mitchell's Plain area and 547 for Khayelitsha. The second level of stratification by dwelling unit type was done within each nodal area, for Mitchell's Plain totalling 12 informal dwelling units and 441 formal dwelling units, and for Khayelitsha 311 informal dwelling units and 236 formal dwelling units.

When working with the data it is important to keep the following in mind. A stratified sample only addresses the issue of representativeness. The issue of comparing different groups is dependent on the sample size. **Because of the small sample size (N=1 000), comparison between geographic areas and/or different dwelling units within the areas is not possible.** For statistical comparison a confidence level of 95% or higher is needed, in this case requiring a sample size of at least 2 400 households within the study area.

A number of controls were put in place by the research team for the sake of quality of the data. First, all fieldworkers were expected to complete a three-day training course on the questionnaire. It must be noted that all the fieldworkers used for this project were experienced and qualified, as they had just completed fieldwork for a research project for the Department of Social Services and Poverty Alleviation.

The second control put in place was to match the preferred language of the respondent to that of the fieldworker. Fieldworkers were divided into two teams, one Afrikaans/English team to conduct interviews in Mitchell's Plain, where the majority of residents speak either of these two languages, and one isiXhosa/English team for Khayelitsha, where the majority of the residents speak isiXhosa.

Thirdly, all questionnaires were thoroughly checked, the majority of them twice, before being signed off and noted as a completed questionnaire. The research team was stationed at the Khayelitsha training centre for the whole of the fieldwork period, assisting with logistical procedures as well as assisting managers and fieldworkers with possible queries regarding the questionnaire or survey process. Throughout the process the team (researchers and fieldworkers) worked towards a product of high quality in order to ensure reliable and valid information.

During the weeks of 15 May to 2 June 2006 the data were captured and the database cleaned.

¹ Numbers based on 2001 Census data.

Research findings

Khayelitsha

A demographic profile

Khayelitsha, or 'new home' in isiXhosa, is situated approximately 35 km from the Cape Town city centre, directly next to Mitchell's Plain with only a road, i.e. Swartklip Road, as the divider for the two areas.

The Khayelitsha population is a relatively young population, with the majority (65%) of the population younger than 30 years. The largest part of this population fall within the age cohort of 20 to 24 years, followed by those within the age group 15 to 19 years. Only 2% of the total population are 65 years or older.

In terms of gender, the population consists of more females (56%) than males (44%).

The average household size in Khayelitsha is four persons per household with an average monthly income of R1 606.

The first language for nearly all individuals (95%) of the selected households is isiXhosa.

Migration flows (period 2000-2005) show a change from primarily in-migration from the Eastern Cape to internal migration² within Khayelitsha together with in-migration from areas in Cape Town.

Approximately 52% of the total Khayelitsha population can be defined as economically active³. Of this group, 25% are currently employed and 28% unemployed and looking for work.

Of those employed, the majority (40%) work for a wage or salary in the private sector, with another 30,6% employed by a private person. The high unemployment rate in Khayelitsha is probably not so much a function of a lack of educational training, but rather a lack of economic/employment opportunities for the economically active group.

With regards to the characteristics of household heads younger than 60 years, the majority (45%) of households have males as their household heads, with 39,5% female-headed households.

Regarding household size, the data clearly show that in general households with an elderly person as the head have the biggest household size (5,2) when compared to female-headed households, which have the second biggest average household size (4,2), and those with males as the head the smallest (3,9).

² Movement within the boundaries of Khayelitsha.

³ Economically active population refers to all persons available for work (but excludes those under the age of 15 yrs, students, scholars, housewives or homemakers, retired people, pensioners, disabled persons or others who are permanently unable to work). For the purpose of this report the number of employed, and unemployed and looking for work, is seen as the economically active group.

The most vulnerable households are those where an older person is the household head, followed by female-headed households.

Perception and impact of Urban Renewal Programme

Respondents' satisfaction with service delivery was tested on a scale from one to five with one as *highly satisfied*, two *satisfied*, three *unsure*, four *dissatisfied* and five *highly dissatisfied*. 52% of respondents indicated their dissatisfaction with service delivery in general of which 17% indicating to be highly dissatisfied. When asked about specific services, respondents raised their *highly dissatisfied* response with reference to four specific services, i.e. *housing* (48%), *streetlights* (36%), *cleanliness of area* (37%) and *policing* (28%).

Respondents were also asked to indicate whether they have access to a number of specific facilities and to rate their satisfaction with the facilities they have access to. For all but three facilities the greater majority indicated they have access. The three facilities indicated as the least accessible are *sport facilities* (63%), *recreational facilities* (72%) and *old age care* (78%).

Of the nineteen facilities tested, seven received low satisfaction ratings; these are *clinic* (43%), *sport facilities* (44%), *recreational facilities* (62%), *old age care* (51%), *SAPS* (53%), *fire brigade* (52%) and *ambulance service* (58%).

To the question to respondents about whether they are aware of the Urban Renewal Programme (URP), 78% indicated that they have never heard of this programme, with 9% indicating that they have heard something about it. For those who are aware of the URP, the three main sources of information on the programme were indicated as *radio* (24%), *community meetings* (19%) and *newspapers* (17%).

An interesting feature of the data is that the lack of knowledge about the URP does not correspond to the level of knowledge regarding the individual projects. Except for the *Swartklip Regional Sports Facility* and *Colorado Multi-purpose centre*, the majority of respondents were aware of the other projects tested in the questionnaire.

On the influence these projects had on their quality of life, it was exactly the above-mentioned projects that the majority of respondents (41% and 53% for the two projects, respectively) indicated have indeed *decreased their quality of life*. All the other projects were rated by the majority of respondents as *improving their quality of life*.

Respondents were also asked to respond on the impact of projects launched in the past three years on their household's quality of life by means of nine outcomes. Those indicated to have had a positive impact are: *access to public transport* (69%), *roads* (67%), *information on HIV/Aids* (68%), *access to services and shops* (84%) and *space for community events* (51%). Projects indicated to have worsened quality of life are: *public open spaces or parks to walk in* (40%), *housing conditions* (43%), and *job opportunities* (77%). *Quality of sports grounds*

was indicated as having no impact on the household's quality of life by the majority (42%) of respondents.

In responding to the question on the three most pressing challenges, *crime* seems to be the primary issue for Khayelitsha respondents, including theft and different forms of violent crimes (N=244). The second big challenge indicated by respondents is unemployment (N=178), with the third being the lack of, and low quality of, housing (N=53). In a follow-up question to the latter, respondents were asked to identify projects that will improve the quality of life of Khayelitsha residents. The need expressed most frequently (N=208) referred projects related to *creating of employment* together with *skills training*. Housing projects (N=90), projects focusing on *improved policing* (N=61) and projects focusing on the *youth and youth development* (N=36) were other initiatives indicated by respondents as needs within the Khayelitsha community.

Living conditions and networks

This section of the report gives a description of the basic living conditions of the people in Khayelitsha and the networks which support households when living conditions are not favourable. Living conditions are discussed by looking at issues such as safety, food security and health conditions in households.

In the survey the respondents of Khayelitsha were asked how frequently their lives were impacted on by people under the influence of alcohol and/or drugs. Nearly half (46%) of the surveyed households reported that this affects them only on weekends, while 34% say that they experience this kind of problem on a daily basis – which is quite an alarming finding. The kinds of problems that the households in Khayelitsha experience when people are under the influence are in 39% of the cases a combination of noise and violence.

Regarding safety in Khayelitsha, respondents were asked whether they feel safe to move around in their area and whether safety has improved in the last year. A startling 50% of the respondents in Khayelitsha feel that it is not safe to move around in their area during the day; this percentage rises to a disturbing 94% when respondents were asked whether they feel safe to move around at night. When asked whether the safety in Khayelitsha has improved in the last year, 74% said no.

Although a high percentage of respondents feel unsafe to move around during the day or evening, the vast majority (93%) have not been a victim of crime in the past 12 months. This situation can be interpreted in two ways: the one is that people have a perception of the lack of safety in their area which is not true; the second is that people look after themselves in such a way that they do not fall victim to criminals.

Other aspects of safety such as fire and flooding were also investigated by asking Khayelitsha households whether they had been victims of fire outbreaks and/or flooding in the last 12 months and, if so, how many times. 96% of the households reported that they have not been

victims of fire and 82% were not affected by flooding. 18% of the houses, however, were damaged, of which 11% were damaged only once in the past year.

Food security has a further influence on the vulnerability of households. In order to establish the degree of food security in Khayelitsha households, respondents were asked whether any child or adult had gone hungry in the past 12 months due to a lack of food. In 83% of the households in Khayelitsha a child has never gone hungry, in 7% of households a child goes hungry once a month, in 8% two to four times a month.

In Khayelitsha 79% of the people reported that they did not suffer from an illness or injury in the past month. The illness most people suffered from was flu or acute respiratory infection (13%), followed by blood pressure problems – high or low – of which 3% of people complained.

Support networks are important in vulnerable communities. In the Khayelitsha survey certain questions were asked to ascertain what these networks were like. Households were asked who they would go to if they had problems with: a shortage of food in the house; no money; when somebody is ill; when a person is a victim of crime; and lastly, if the household has a problem with members who have a substance-abuse problem.

With regards to shortages of food and cash, family (including parents) and neighbours are the main support systems. In terms of sickness the clinic is the most important support network, in crime the police, and in substance abuse the social worker.

Communication is one of the things that keeps these support networks intact and good modes of communication can also help these social support networks to work even better. Respondents in Khayelitsha were asked what modes of telecommunication they have access to, or use, the most. 66% of the respondents said they only have a cellphone; 19% said they use a public telephone; 8% have a Telkom phone in the house and a cellphone; 2% have only a Telkom phone; 2% use their neighbour's phone.

Mitchell's Plain

A demographic profile

Mitchell's Plain is located 20 kms from the Cape Town city centre and originated as a new town in the 1970s to alleviate housing shortages in the coloured communities during the times of forced removals. The boundaries of the area are to the Philippi horticultural area the west, the False Bay coastline to the south, Khayelitsha to the east, and Philippi to the north.

As is the case in Khayelitsha, the Mitchell's Plain community can be described as a young population with nearly half (48%) of its respondents younger than 25 years. The age pyramid shows the largest age group as those between 20 to 24 years. Only 4% of the total population are 65 years or older.

Regarding the gender distribution of the area, there is a near equal divide, with the Mitchell's Plain population constituting 52% female and 48% male respondents.

The greater majority (57%) of Mitchell's Plain residents speak Afrikaans as their first language.

The average household size in Mitchell's Plain is five persons per household, with an average monthly income of R3 451.

The minority (16%) of current Mitchell's Plain respondents were born in the area, with 40% indicating they moved to the area before 1990. When comparing the migration flows of Khayelitsha with Mitchell's Plain, the latter is portrayed as a more stable area in terms of internal movement, with only 21% of respondents indicating their last move to have been within the boundaries of Mitchell's Plain.

Nearly 49% of the Mitchell's Plain population can be defined as economically active⁴. Of this group, 36% were employed at the time of the survey and 13% unemployed and looking for work.

Of those employed, most (55%) work for a wage or salary in the private sector, with another 15% employed by a private person. The data seem to suggest that for the Mitchell's Plain area, unemployment figures are a factor of low educational levels completed.

Analysing households in terms of household head characteristics shows that more than half (52%) of Mitchell's Plain household heads younger than 60 years are male, with 29% female.

Households where an elderly person is the head are the most vulnerable in terms of economic considerations, showing a greater dependence on social grant income as a source of household income. Male-headed households are the most secure regarding household income, with the highest employment number of household members.

Perception and Impact of Urban Renewal Programme

Respondents' satisfaction with service delivery was tested on a scale from one to five, with one as *highly satisfied*, two *satisfied*, three *unsure*, four *dissatisfied* and five *highly dissatisfied*. In general, responses to the question on satisfaction with service delivery was positive, with 68% indicating that they are satisfied with service delivery in the area. When probed on the condition of specific services, this trend continued, with the greater majority responding that they were either satisfied or highly satisfied with the specific services.

Respondents were also asked to indicate whether they have access to a number of specific facilities and to rate their satisfaction with the facilities they have access to. Although the majority (70% and higher) of respondents indicated having access to all the services listed,

⁴ Economically active population refers to all persons available for work (but excludes those under the age of 15 yrs, students, scholars, housewives or homemakers, retired people, pensioners, disabled persons or others who are permanently unable to work). For the purpose of this report the number of employed, and unemployed and looking for work, is seen as the economically active group.

two services received lower ratings. 47% of respondents indicated that they do not have access to *old-age care* facilities, with 36% reporting no access to the services of the *fire brigade*.

When rating their satisfaction with the services, respondents responded positively to all the services with the greater majority indicating either *highly satisfied*, or *satisfied* with the facilities. The three facilities that received the lowest rating were *recreational facilities*, with 19% indicating they were either dissatisfied or highly dissatisfied; the *SAPS*, with 33% indicating their dissatisfaction; and 27% dissatisfied with the *ambulance services*.

In testing the awareness of the Urban Renewal Programme (URP), the majority indicated never having heard of the programme. For those who are aware of the programme, the majority either read about it in a newspaper (35%) or had seen the billboards in the area (29%). In contrast to Khayelitsha, where the level of awareness of the URP does not correspond with the level of awareness regarding its respective programmes, the data show coherence in Mitchell's Plain.

In the case of all the URP programmes the majority of respondents in Mitchell's Plain were not aware of their existence. Respondents who were aware of the respective projects were asked to rate the influence of the projects on the quality of life of their households. All the projects were indicated by the majority of respondents to have indeed improved their quality of life.

Respondents were also asked to respond to the impact of projects launched in the area within the past three years on their household's quality of life by means of nine outcomes. Again the responses in general were positive, with all aspects tested but one, which was indicated by the majority as having some positive impact. The one aspect indicated to have worsened in the past three years is *job opportunities*, with 58% indicating this.

In responding to the question on the three most pressing challenges for Mitchell's Plain respondents, the abuse of *drugs* was indicated as the primary challenge, including the use of Tik and other forms of hard drugs (thus excluding alcohol). The second challenge indicated by respondents is the issue of *unemployment* (N=96), followed by *crime* (N=71) and *gangs* (N=23).

In a follow-up to the latter question, respondents were asked to identify projects that will improve the quality of life of Mitchell's Plain residents. The need expressed most frequently (N=154) is projects related to *creating of employment* together with *skills training*. Projects focusing on the building of sport and recreation centres and areas were mentioned by 55 respondents, followed by a focus on improved *policing* (N=28).

Living conditions and networks

This section of the report gives a description of the basic living conditions of the people in Mitchell's Plain and the networks which support households when living conditions are not

favourable. Living conditions are discussed by looking at issues such as safety, food security and health conditions in households.

In the survey the respondents of Mitchell's Plain were asked how regularly their lives were impacted on by people under the influence of alcohol and/or drugs. 30% of the households in Mitchell's Plain say that they have this kind of problem on a daily basis – which is quite an alarming finding. The kinds of problems that the households in Mitchell's Plain experience when people are under the influence are in 34% of the cases noise and in 13% a combination of noise and violence.

Regarding safety in Mitchell's Plain, respondents were asked whether they feel safe to move around in their area and whether safety has improved in the last year. When looking at the communities' perception about moving around during day time, the situation is very positive, with 80% of the respondents in Mitchell's Plain feeling that it is safe to move around. This percentage does, however, change dramatically from 80% to only 48% of the people saying they feel safe to move around at night. When asked whether safety in Mitchell's Plain has improved in the last year, 49% said yes it has improved, 38% said no, while 14% were unsure.

93% of the Mitchell's Plain respondents have not been a victim of crime in the past 12 months.

Mitchell's Plain households were asked whether they have been victims of fire outbreaks in the last 12 months and, if so, how many times. 99% of the households reported that they have not been victims of fire, indicating that this is not a problem for this community.

Another hazard for households is the risk of floods, especially during winter. Households were asked whether their house has been damaged by flood waters in the past 12 months; 97% said no.

In order to establish the degree of food security in Mitchell's Plain households, respondents were asked whether any child or adult had gone hungry in the past 12 months due to a lack of food. In 94% of the households in Mitchell's Plain a child has never gone hungry, in 2% a child goes hungry once a month, in another 2% a child goes hungry two to four times a month, and another 1% of households have children who go hungry more regularly.

In Mitchell's Plain 87% of the respondents reported that they did not suffer from any illness or injury in the past month. The illness most people suffered from was flu or acute respiratory infection (4%), followed by blood pressure problems – high or low – of which 2% respondents complained.

Support networks are important in vulnerable communities. In the Mitchell's Plain survey specific questions were asked to ascertain how these networks manifest themselves. Households were asked who they would go to if they had problems with: a shortage of food in the house; no money; when somebody is ill; when a person is a victim of crime; and lastly, if

the household has a member with a substance-abuse problem. With regards to shortages of food and cash, family (including parents), friends and neighbours seem to be the main support systems. In cases of sickness the doctor is the primary support network, for crime the police, and for substance abuse the police and social worker.

Communication is one of the things that keeps these support networks intact and good modes of communication can help these social support networks to work even better. Respondents in Mitchell's Plain were asked what modes of telecommunication they have access to, or use, the most. 48% of the respondents said they have a Telkom phone in the house and a cellphone; 25% said they use only a cellphone; 20% have only a Telkom phone in the house; 3% have access to a public phone; 1% use their neighbour's phone.

Focus groups

Focus group discussions as a qualitative research approach are often used within a quantitative survey methodology. These focus group discussions have a dual purpose as they are used to inform the research instrument as well as to contextualise data. This allows for a report where data are analysed and reported on within the context of the studied area.

Mitchell's Plain

Theme 1: What would you say are the most common challenges you see in your community?

For both groups (formal and informal residential areas) unemployment was indicated as the primary challenge within their communities. These respondents linked unemployment directly to a number of social problems such as drug and alcohol abuse, crime and high school drop-out rates among the youth. Other than using alcohol and drugs as a method of 'escaping' reality, selling and/or storing them as a means of income was mentioned as a common practice for the poor and desperate.

The above quote shows more than just a desperate situation; it also highlights the vulnerability of those who find themselves destitute due to a lack of income. Drug dealers make use of young children's minor status and use them as 'drug carriers', pulling them into an illegal network that is nearly impossible to escape from, if they want out.

According to the focus group discussants, another problem resulting from the unemployment of parents is the high drop-out rates of young people from schools. Ironically, this social problem in turn feeds into high unemployment rates among the youth, as they enter a job market as uneducated job seekers.

In addition to the social ills indicated above, another social variable indicated as adding to the social problems in Mitchell's Plain is the breakdown of the family structure. According to the respondents, Mitchell's Plain is characterised by a large number of single mothers, who are left by the fathers to fend for themselves and their children.

Other issues raised by the respondents are the lack of infrastructure such as schools, health facilities, and youth and other recreational centres.

The lack of health facilities was also mentioned as a major challenge to the community. There is only one Day Hospital within the Mitchell's Plain area, which is reported as being highly understaffed.

Another great need expressed by the focus group members was the lack of recreational centres for the youth and the elderly.

Theme 2: Would you say you feel part of the greater Cape Town community?

From the responses it seems as if a great feeling of isolation from the greater Cape Town community prevails.

Another concern that was raised quite strongly by the respondents was that they perceived the City of Cape Town to be biased or to show a kind of favouritism towards the Khayelitsha community.

Theme 3 and 4: Do you know of any programmes currently in your community that address the challenges we spoke about earlier? Do you know about the Urban Renewal Programme?

Not one of the respondents living in informal residential areas knew about the Urban Renewal programme. Although the respondents from the formal residential dwellings knew about the programme, they have a very negative attitude towards these programmes.

Khayelitsha

Theme 1: What would you say are the most common challenges you see in your community?

Similar to the situation in Mitchell's Plain, unemployment was mentioned as the primary challenge for people living in Khayelitsha. Young people, both educated and uneducated, are struggling to find work, which results in a spirit of despondency and hopelessness among the youth.

It seems from the focus group discussions that the aged are specifically at risk in the context of high unemployment within the community. The aged are more often than not the ones who are left to sustain the households and look after the grandchildren because of a high number of the population being unemployed.

Another concern highlighted by the focus group discussants was a high rate of teenage pregnancy. There seems to be a perception, specifically among the older people, that young girls get pregnant in order to receive a child-support grant as a source of income.

The high number of shebeens and the number of young people drinking at these places was mentioned as another aspect of great concern. The drinking habits of the youth are primarily attributed to a lack of recreational and sports facilities for them.

Challenges specifically mentioned by the group living in informal residential areas are the lack of toilet facilities, water and transport.

Theme 2: Would you say you feel part of the greater Cape Town community?

What is interesting to note is the different responses to this question by the two groups living in the formal and informal areas respectively. The group from the formal residential areas expressed a much more negative sentiment on this question than those from the informal areas. The former group immediately responded that they do not feel part of the greater Cape Town, but rather feel like their areas are the dumping sites for everything that is replaced in other areas.

The group from the informal settlements, however, responded on a more positive note and said that they do feel part of the greater Cape Town. They said that they could see the local authorities are taking an interest into the area through the different programmes launched there.

Theme 3 and 4: Do you know of any programmes currently in your community that address the challenges we spoke about earlier? Do you know about the Urban Renewal Programme?

Although both groups said that they are aware of the Urban Renewal Programme, neither knew what the objectives of the programme are. Both groups said that they have seen the billboards, but they are unaware of what exactly the programme does within their areas.