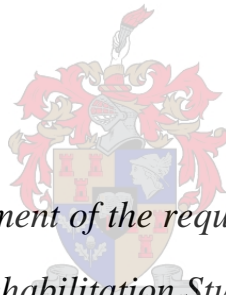


Searching for “greener pastures”: A narrative study of the livelihood experiences of Zimbabwean migrants with disabilities in South Africa

by

Noel Dangarembwa



*Thesis presented in fulfilment of the requirements for the degree of  
Master of Human Rehabilitation Studies in the Faculty of  
Medicine and Health Sciences at  
Stellenbosch University*

Supervisor: Dr Lieketseng Ned

Co-supervisor: Dr Martha Geiger

December 2019

## **Declaration**

By submitting this thesis electronically, I declare that the entirety of the work contained therein is my own, original work, that I am the sole author thereof (save to the extent explicitly otherwise stated), that reproduction and publication thereof by Stellenbosch University will not infringe any third party rights and that I have not previously in its entirety or in part submitted it for obtaining any qualification.

Signature: .....

Date: December 2019

Copyright © 2019 Stellenbosch University

All rights reserved

## **Acknowledgements**

God is my pillar of strength and has brought people in my life whom I believe that if I had not met, the completion of this study would not have been possible. With humility I acknowledge the support of:

Drs Martha Geiger and Lieketseng Ned for the endless hours they spent supervising my studies and also nurturing me to grow in both personal and academic ways. This journey would not have been complete without their support.

I thank Canon Collins Educational and Legal Assistance Trust for awarding me a scholarship, without their support this study would not have been possible.

I also acknowledge my uncle baba vaKudzi, and study colleagues Dumisani Mangqalaza, Thomas Lentsoalo, Dr Morena and Sifiso Shoko for assisting me financially, socially and emotionally throughout the duration of my studies.

To my maternal grandmother and mother, all this is a product of what I have learnt from you. Thank you very much for being the map that directs my steps throughout life.

Finally, I am grateful to Wilson Tarusarira and the rest of the CRS team at Stellenbosch University (Professor Gubela Mji, Chioma, Callista, Christine and Anita) for all the support you gave me during my studies. Without you this study would not have succeeded.

## **Dedication**

I dedicate this thesis to my grandmother and my mother. The values you have instilled in me are unquantifiable. Humility, perseverance and learning are values you taught me. I will forever be grateful to you. I also dedicate my thesis to my brother, O'brien Dangarembwa, whom I have watched experience the oppression that characterise disability over the years as well as to all persons with disabilities who participated in this study.

## Abstract

There remains a dearth of studies that examine the link between disability, migration and livelihoods at both an international and local level. Using a conceptual framework that includes the intersectional model and the push-pull model, the aim of this study was to explore the livelihood experiences of Zimbabwean migrants with disabilities who live in Cape Town, South Africa.

### **The objectives of the study were:**

- To identify the factors that “push” persons with disabilities out of Zimbabwe and the “pull” factors that “draw” them to South Africa;
- To gather narrative descriptions from Zimbabwean migrants with disabilities in South Africa about their livelihood experiences;
- To identify contextual factors that influence the livelihood experiences of Zimbabwean migrants with disabilities in South Africa;
- To describe the effect of the intersection of various identity markers such as disability, nationality, poverty, gender, and migrant status, on the livelihoods of Zimbabwean migrants with disabilities in South Africa.

Using narrative inquiry as a methodological approach, narrative interviews were used to collect data. The data was analysed at three levels: 1) a narrative analysis approach to produce whole life stories; 2) an analysis of narratives approach to generate themes from the storied data and 3) a deeper level of analysis which is integrated in the discussion of findings and that seeks to further comprehend the data.

The findings of this study indicate that all participants were “pushed” out of their country of origin (Zimbabwe) by primarily political instability and economic hardships which made it hard for them to sustain their livelihoods. Participants were “pulled” to the host country (South Africa) by what they perceived to be “greener pastures”, in a country which seemingly “flows with milk and honey”. Once Zimbabwean migrants with disabilities arrived in South Africa, they assumed layers of identities that shaped the way through which they experienced the oppression that characterised their livelihoods in a terrain in which they are generally regarded as “good for nothing people” who migrate to South Africa to squander the resources of the host nation. However, participants did not passively

receive oppression, but they claimed their agency and actively engaged in numerous shifts and adaptations in South Africa in ways that enabled them to establish and sustain their livelihoods. Among other identity markers, disability, migrant status and poverty intersect to frame the livelihood experiences of Zimbabwean migrants with disabilities in South Africa.

**Conclusion:** the use of a narrative methodology was appropriate for illuminating the livelihood experiences of Zimbabwean migrants with disabilities in South Africa, because it allowed the co-construction of knowledge through dialogue and interaction with participants. There is need for the governments of both the country of origin (Zimbabwe) and the host country (South Africa) to pay attention to the livelihood experiences of persons with disabilities, so as to address their needs and concerns through policy and practice, thereby enhancing their well-being. It is my hope that this study will prompt further studies, in order to broaden the migration and disability knowledge particularly in Africa.

## Abstrak

Daar is internasionaal sowel as op plaaslike vlak 'n gebrek aan studies wat die verband tussen gestremdheid, migrasie en lewensbestaan ondersoek. Hierdie studie se konseptuele raamwerk het die interseksionele model en die stoot-en-trek model ingesluit. Die doel van die studie was om die lewensbestaan ervarings van Zimbabwiese migrante met gestremdhede woonagtig in Kaapstad, Suid Afrika te ondersoek.

### Die studie se doelwitte was:

- Om faktore wat persone met gestremdhede uit Zimbabwe “verstoot” het sowel as faktore wat hulle na Suid-Afrika “getrek” het te identifiseer;
- Om verhalende beskrywings van persone met gestremdhede afkomstig van Zimbabwe se lewensbestaan ondervindings te versamel;
- Om kontekstuele faktore te identifiseer wat die lewensbestaan van persone met gestremdhede afkomstig van Zimbabwe be-invloed;
- Om die effek van die vermenging van verskillende identiteitsvormers soos gestremdheid, nasionaliteit, armoede, geslag and migrasie status op lewensbestaan ondervindings van persone met gestremdhede afkomstig van Zimbabwe te beskryf.

Verhalende ondersoek was as metodologiese benadering gebruik en data was ingesamel deur middel van verhalende onderhoude. Data is op drie vlakke ge-analiseer: 1) 'n Verhalende analiserings benadering om 'n geheelbeeld van lewensverhale te verkry; 2) 'n analise van die verhale om temas uit die data te genereer; 3) Analisering op 'n meer gevorderde vlak wat by die bespreking ingesluit is met die oogmerk om data beter te verstaan.

Die bevindinge van die studie wys dat al die deelnemers uit Zimbabwe, hulle land van oorsprong, verstoot is deur politieke onstabiliteit en ekonomiese ontbering wat dit vir hulle moeilik gemaak het om 'n bestaan te maak. Deelnemers is aangetrek na Suid Afrika, die gasheer land, deur persepsies van “groener weivelde” in 'n land wat skynbaar “oorloop van melk en heuning”. Nadat die Zimbabwiese migrante in Suid Afrika ge-arriveer het, het hulle lae van identiteit aangeneem wat die manier waarop hulle die onderdrukking wat hulle bestaan gekarakteriseer het bepaal het. Hulle was oor die algemeen gesien as “mense wat vir niks goed was nie” en Suid Afrika se hulpbronne vermors het. Deelnemers het nie

hierdie onderdrukking passief aanvaar nie. Hulle het aktief betrokke geraak by vele skuiwe en aanpassings wat hulle gehelp het om `n volhoubare bestaan te vestig. Gestremdheid, migrasie status, armoede en ander identiteitsbepalers het vermeng en gestalte gegee aan die bestaansondervindings van Zimbabwiese migrante met gestremdhede.

**Samevatting:** `n Verhalende metodologie was toepaslik om die bestaansondervindings van Zimbabwiese migrante met gestremdhede in Suid Afrika toe te lig, want dit het gesamentlike konstruksie van kennis deur middel van dialoog en interaksie met deelnemers toegelaat. Die regerings van beide die land van oorsprong (Zimbabwe) en die gasheerland (Suid Afrika) moet aandag gee aan die bestaansondervindinge van persone met gestremdhede sodat hulle behoeftes met beleid en in praktyk aangespreek kan word, om hulle welstand te verbeter. Ek hoop dat hierdie studie verdere studies oor die onderwerp sal aanmoedig sodat kennis rondom migrasie en gestremdheid kan toeneem in Afrika.



## Definition of Terms

- Migrant :** A migrant is any person who is moving or has moved across an international border or within a State away from his/her habitual place of residence, regardless of (1) the person's legal status; (2) whether the movement is voluntary or involuntary; (3) what the causes for the movement are; or (4) what the length of the stay is. Migrants make voluntary decisions to migrate, although these choices may be extremely constrained, they are not refugees who are forced to flee war or conflict (UNESCO, 2017).
- Refugee:** A person who has been forced to leave their country in order to escape war, persecution or natural disaster. They are defined and protected in international law and must not be expelled or returned to situations where their life and freedom are at risk (UNHCR, 2017).
- Asylum seeker:** An asylum seeker is someone who is waiting for his or her request for sanctuary in a foreign country to be processed (UNHCR, 2017).
- Disability:** The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), (United Nations, 2006:1) states that “persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others”

Livelihood:

A livelihood is a means through which people earn a living or through which people access the necessities of life; it encompasses people's abilities, assets, income and activities that are required for them to secure such necessities (IFRC, s.a). People may choose to engage in a variety of strategies in order to achieve their livelihood goals; the choice of strategies is not static, but it is a dynamic process in which people may engage in different activities that meet their ever-changing needs (Eldis, 2000).

Disabled Zimbabweans:

For the purpose of this study, disabled Zimbabweans refers only to those who had congenital or acquired disabilities in Zimbabwe prior to migrating. Through volunteering with disabled people, I discovered that they are commonly excluded from active participation in economic and livelihood activities. They are rendered invisible in discussions about migrants suggesting an assumption that they do not migrate for various reasons and thus not planned for in migration policies. A focus on disabled Zimbabweans enables the articulation of a nuanced analysis which results in appropriate disability specific recommendations that inform policy and practice in Zimbabwe and South Africa.

## TABLE OF CONTENTS

Declaration.....	ii
Acknowledgements.....	iii
Dedication.....	iv
Abstract.....	v
Abstrak.....	vii
Definition of Terms.....	ix
<b>CHAPTER ONE: INTRODUCTION.....</b>	<b>1</b>
1.1 Background of the study .....	1
1.2 Context of the research.....	1
1.3 Significance of the study .....	4
1.4 Research Problem.....	5
1.5 Research Question.....	5
1.6 Research Aim .....	5
1.7 Research Objectives .....	5
1.8 Outline of thesis chapters .....	6
<b>CHAPTER TWO: LITERATURE REVIEW .....</b>	<b>8</b>
2.0 Introduction .....	8
2.1 Migration and disability: An international perspective.....	8
2.2 Migration and disability: An African perspective.....	11
2.3 Migration and livelihoods .....	12
2.4 Migration, Disability and Livelihoods .....	15
2.5 Push-Pull Factors: from Zimbabwe to South Africa? .....	17
2.6 Conclusion.....	18

CHAPTER 3: METHODOLOGY .....	19
3.0 Introduction .....	19
3.1 Philosophical standpoint .....	19
3.2 Conceptual Framework .....	20
3.3 Research Methodology.....	21
3.4 Ethical principles and considerations .....	22
3.5 Population and sampling .....	24
3.6 Data generation .....	26
3.7 Reflections on collecting data .....	28
3.8 Data management and analysis .....	30
3.9 Reflections on analysing data.....	34
3.10 Quality and Trustworthiness .....	35
3.11 Reflexivity.....	36
3.12 Conclusion.....	36
CHAPTER 4: NARRATIVE ANALYSIS .....	37
4.0 Introduction .....	37
4.1 Chido’s story of becoming an entrepreneur .....	37
4.2 Blessing’s story of being educated but failing to get formal employment.....	42
4.3 Mugwati’s story of begging for a living .....	47
4.4 Chenai’s story of aspiring to set up a massage parlour .....	50
4.5 Kativhu’s story of creating employment for South African nationals through begging	54
4.6 Matemba’s story of aspiring to enter the formal labour market.....	57
4.7 Jabulani’s story of begging albeit vocational skills .....	60
4.8 Conclusion.....	64
CHAPTER 5: ANALYSIS OF NARRATIVES .....	65
5.0 Introduction .....	65

5.1 Theme 1: Political strife and Socio-Economic hardship in the country of origin (Zimbabwe) .....	67
5.2 Theme 2: Migrating to host country (South Africa): a focus on documentation .....	71
5.3 Theme 3: Livelihood shifts and adaptations in host country .....	73
5.4 Theme 4: Lack of institutional support, poor access to social services and livelihood experiences in South Africa .....	76
5.5 Conclusion.....	79
CHAPTER 6: DISCUSSION OF FINDINGS .....	80
6.0 Introduction .....	80
6.1 Key Finding No. 1 .....	80
6.2 Key Finding No. 2 .....	82
6.3 Key Finding No. 3 .....	83
6.4 Key Finding No. 4 .....	84
6.5 Conclusion.....	85
CHAPTER 7: RECOMMENDATIONS AND CONCLUSION .....	86
7.1 United Nations Migration Agency .....	86
7.2 Governments of Zimbabwe and South Africa.....	86
7.3 Disabled People’s Organisations.....	87
7.4 Migrants with Disabilities .....	88
7.5 Researchers.....	88
7.6 Limitations of research.....	88
References .....	90
Appendices .....	105
Appendix 1: Research Ethics Committee: Human Research (Humanities) Approval Letter.....	105
Appendix 2: Consent Form.....	110
Appendix 3 PASSOP Permission Letter .....	113

Appendix 4: Narrative Interview Guide .....	114
Appendix 5: Chido's Narrative - Sub-session 1 .....	115
Appendix 6: Chido's Narrative - Sub-session 2 .....	116
Appendix 7: Chido's Narrative - Sub-session 3 .....	122

## List of Figures

Figure 1. 1: Geographical place of the study .....	2
Figure 1. 2: Migration patterns.....	9

## List of Tables

Table 3.1: Biographic information of participants.....	24
Table 3.2: The narrative interview (NI) process.....	27
Table 5.1: Mapping aim, objectives and themes.....	63



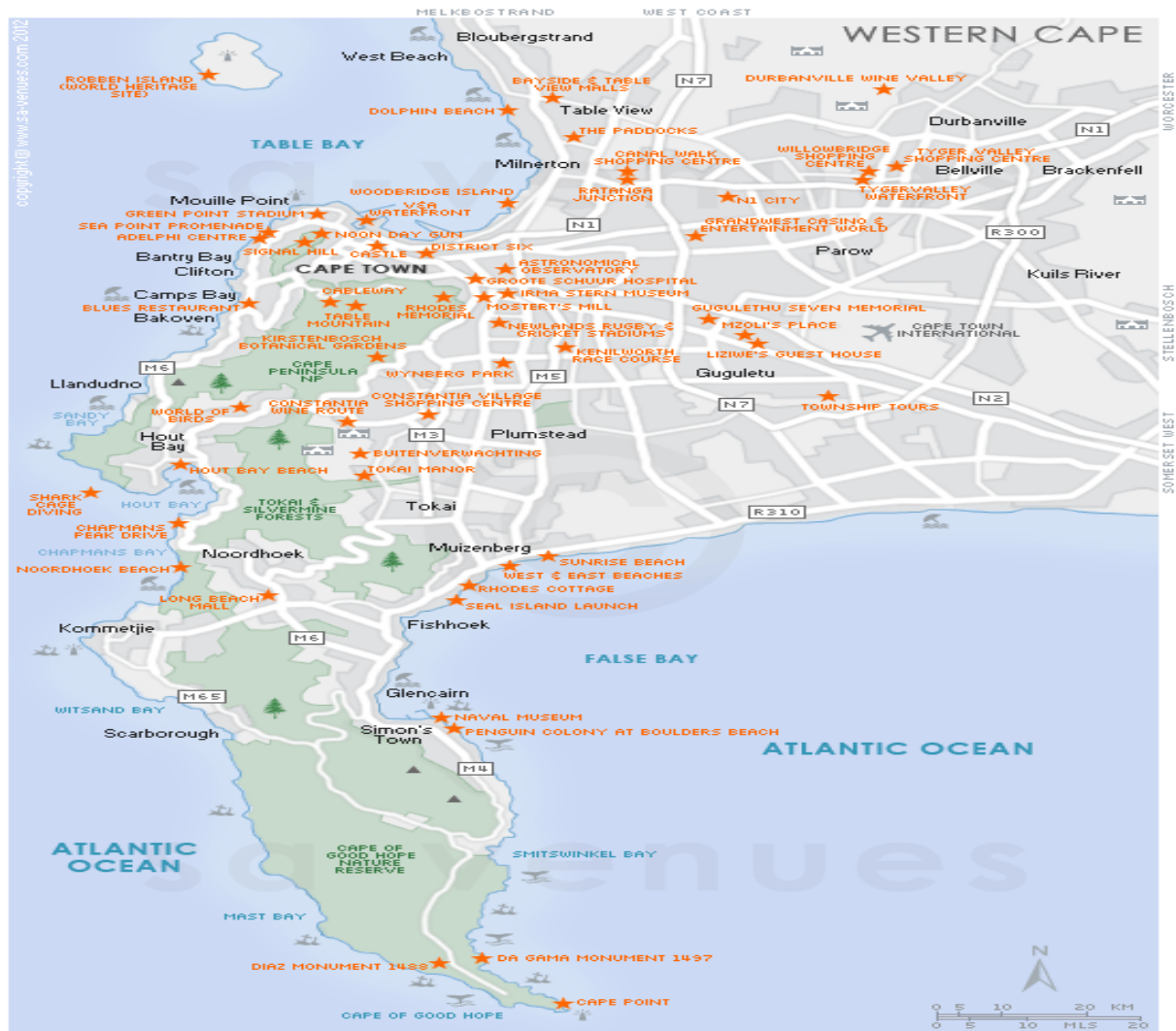
# CHAPTER ONE: INTRODUCTION

## 1.1 Background of the study

I became acquainted with disability from the early years of my life through living under the same roof with my older brother who has intellectual impairment and my two uncles who have mental impairments. I have also undertaken voluntary work in two non-governmental organisations (NGOs) in my home country, Zimbabwe. The work of the NGOs is to address the needs and concerns of persons with disabilities (PWD). One NGO promotes the health and well-being of persons with physical and mental disabilities and the other NGO supports the livelihoods of PWD. I have therefore among other things, gained work experience in supporting PWD to design and implement sustainable livelihood strategies. Through such voluntary work, I realised that PWD (even within their own country of birth) are commonly excluded from meaningful participation in economic and livelihood activities. I therefore began to wonder about the status of the livelihoods of some PWD who, as I noted, were migrating from Zimbabwe to South Africa to seek “greener pastures.” I therefore decided to migrate to South Africa from Zimbabwe, to study for a Master’s Degree in Human Rehabilitation Studies at the Centre of Rehabilitation Studies, Department of Global Health, Stellenbosch University, so that I could explore the livelihood experiences of Zimbabwean migrants with disabilities in Cape Town, South Africa. In undertaking this study, I chose a qualitative narrative approach positioned within the constructivist paradigm to facilitate the voice of participants, thereby ensuring the co-construction of knowledge through dialogue and interaction with participants.

## 1.2 Context of the research

In this section, I give an overview of the South African and Cape Town settings within which I undertook this study. Figure 1.1 below, shows the geographical location of the research. Thereafter, I outline the political, economic and social context of the study, starting with South Africa and narrowing it down to Cape Town, South Africa.



**Figure 1.1: Geographical place of the study (Source:**

<https://encryptedtbn0.gstatic.com/images?q=tbn:ANd9GcT1JQjXZdVvYlaKtnAvcW4k92sXEDFkEsJ6pV61TYHXyUvp0KQ20>)

Situated in Africa and at the most southern tip of the continent, South Africa has a population of about 57 million people (Statistics South Africa, 2018). South Africa shares borders with Zimbabwe, Namibia, Mozambique, Botswana, Lesotho and Swaziland (World Atlas, 2018). South Africa was colonised by the Dutch in 1652 and British rule was later established in the country in 1806 (Oliver & Oliver, 2017). The same authors state that the history of South Africa is characterised by structural violence, which has largely been attributed to the Apartheid system, which was promulgated by the National Party in 1948. The aim of the Apartheid system was, in part, to separate persons on the grounds of race, using laws that upheld the supremacy of White people over other races. In 1994, South Africa became a democratic state, under the leadership of Nelson Mandela, thereby bringing joy and anticipation to previously oppressed groups of people such as Blacks, Coloureds and Asians (Steyn, 1998; Oliver &

Oliver, 2017). The peaceful transition brought new hope, excitement and restoration for the oppressed and colonised people of South Africa (Oliver & Oliver, 2017). Today, the stable political standing of South Africa coupled with the nation's "vibrant" economy draws migrants from various countries including Zimbabwe (AfricaCheck, 2016), as further discussed below.

South Africa has remained a favourite destination for Zimbabwean migrants (AfricaCheck, 2016). Apart from the economic promises that the nation holds, South Africa unveiled a package of migration policies, which sought to legally accommodate Zimbabweans (Polzer, 2009; Crush *et al.*, 2017). For example, and as noted by Polzer, the Department of Home Affairs (DHA) in 2009 introduced the "special dispensation permit" which allowed Zimbabweans to live and work in South Africa for a period of one year. According to Oneale (2013), some policy makers have argued that some Zimbabwean nationals make a significant contribution to the development of the South African economy. Such a perspective arises from the observation that migrants from Zimbabwe have proved to be educated and hardworking; South Africa therefore, benefits from the skilled labour that is offered by such migrants across the provinces of the nation which include the Western Cape Province as further discussed below (Crush *et al.*, 2017).

South Africa has nine provinces including the Western Cape Province, where Cape Town, my study location, is situated (South African Government, 2019). The same source states that, Cape Town has the second highest population after Johannesburg, the capital city of South Africa; Cape Town is regarded as the provincial capital of the Western Cape. In addition, Cape Town is strategically located along the Table Bay shores, and it is famous around the world for its beaches, history and tourist attractions. The latest census and population growth estimates showed that Cape Town had a population of 3, 81 million people in 2008 (Statistics South Africa, 2011). However, according to the world population report of 2018, Cape Town was designed along racial lines of the Apartheid era with vast real estate harbouring wealthy and mostly White individuals (History Online, 2018). Additionally, Afrikaans-speaking people occupy the Northern suburbs, while predominantly English-speaking people are concentrated in the Southern suburbs. The Cape Flats, which are often called "Apartheid's dumping ground" and situated on the southeast of the city centre accommodate non-white people.

Cape Town is one of the most multicultural cities in the world, and it is a very popular destination for tourists, as well as an employment hub for migrants, who are attracted by the

city's vibrant economy, in ways that increases the level of demand for income generating opportunities in the city (South African Government, 2019). However, and in relation to this study, there is a dearth of studies on the location of Zimbabwean migrants with disabilities in the livelihoods terrain of Cape Town, thereby giving rise to the significance of this study which is outlined below.

### **1.3 Significance of the study**

The purpose of this study was to explore the livelihood experiences of Zimbabwean migrants with disabilities in South Africa. The paucity of studies on this subject shows the neglect of migrants with disabilities in both disability and migration theory, research and practice, particularly on the African continent. Of notable concern is that over the years, the International Organisation of Migration (IOM), founded in 1951 and which has recently changed its name to the United Nations Migration Agency, appears not to have paid much attention to the livelihoods of migrants with disabilities in host countries, yet:

...IOM is the leading inter-governmental organisation in the field of migration and works...to help ensure the orderly and humane management of migration, to promote international cooperation on migration issues, to assist in the search for practical solutions to migration problems and to provide humanitarian assistance to migrants in need, including refugees and internally displaced people. The IOM Constitution recognises the link between migration and economic, social and cultural development, as well as to the right of freedom of movement (United Nations Migration Agency 2018:1).

The latest world migration report, published by the leading United Nations Migration Agency (2018), pays very little, if any, attention to the livelihoods of PWD. The report regards women and children as more vulnerable migrant groups, but it generally maintains silence on migrants with disabilities. Furthermore, and to my knowledge, most studies that focus on migrants tend to overlook migrants with disabilities, and in cases where attention is paid to disability, it is usually within a humanitarian aid context of refugee holding camps (DSPD, s.a.; Holscher, 2016). However, South Africa does not have any refugee camps, but migrants including asylum seekers and refugees live in communities where they seek to establish their own livelihoods, albeit with access to government social services (Brand South Africa, 2014). In such a scenario, migrants with disabilities compete with non-disabled nationals and non-disabled migrants for economic opportunities and social services in mainstream society, yet most migration studies are devoid of the subject of the livelihoods of PWD in host countries (Oneale, 2013; Holscher,

2016; Crush et al, 2017; United Nations Migration Agency, 2018). By exploring the livelihood experiences of Zimbabwean migrants with disabilities in Cape Town, South Africa, this study sought to enhance the understanding of their experiences, so as to inform disability and migration policy and practice.

#### **1.4 Research Problem**

The few studies that have thus far examined the link between disability and migration have largely been undertaken in the Global North, even though a few African studies such as BUWA (2015) and Holscher (2016), have emerged. While it is indisputable that some lessons can be drawn from studies undertaken in the context of the Global North, such lessons are devoid of African contextual experiences (Izugbara & Undie, 2008). The reality is that the ways through which disability, migration and livelihoods are experienced by PWD may differ on the grounds of context; hence this study explored the livelihood experiences of Zimbabwean migrants with disabilities within the milieu of Cape Town, in South Africa. Without facilitating and hearing the voices of Zimbabwean migrants with disabilities in Cape Town, their livelihood needs, concerns and experiences may never be known or addressed, to the detriment of their well-being.

#### **1.5 Research Question**

How do Zimbabwean migrants with disabilities in Cape Town, South Africa experience their livelihoods?

#### **1.6 Research Aim**

The aim of this study was to explore the livelihood experiences of Zimbabwean migrants with disabilities in Cape Town, South Africa.

#### **1.7 Research Objectives**

- To identify the factors that “push” persons with disabilities (PWD) out of the country of origin (Zimbabwe)
- To gather narrative descriptions from Zimbabwean migrants with disabilities about their livelihood experiences in Cape Town, South Africa;

- To identify contextual factors that influence the livelihood experiences of Zimbabwean migrants with disabilities in Cape Town, South Africa;
- To describe the effect of the intersection of various identity markers such as disability, nationality, poverty, gender, and migrant status, on the livelihoods of Zimbabwean migrants with disabilities in Cape Town, South Africa.

## 1.8 Outline of thesis chapters

**Chapter one:** introduces this thesis by highlighting the dearth of published literature on the topic. The background of how this study emerged as well as the context of the study is articulated. In addition, the significance of the study, research problem, research question, research aim, and research objectives are outlined.

**Chapter two:** comprises a discussion of the reviewed literature that is pertinent to this study under the headings; 1) migration and disability: an international perspective; 2) migration and disability: an African perspective 3) migration and livelihoods; 4) migration, disability and livelihoods 5) push-pull factors - from Zimbabwe to South Africa. Whilst my primary focus is on Cape Town, South Africa, I also draw on international literature to gain a broader understanding of the study topic, alongside an argument that there is no single country that stands on its own; what happens in one country will affect the other at both regional, continental and international levels.

**Chapter three:** In this methodology chapter, I start by outlining my philosophical standpoint followed by the conceptual framework which guides this study. I describe the qualitative narrative methodology upon which this study is grounded as well as the narrative interviewing (NI) method which I used to generate data, my data management methods and the three-level approach, which I used to analyse the data: 1) narrative analysis 2) analysis of narratives and 3) discussion of findings, which is embedded with a deeper layer of analysis and which seeks to further comprehend the data. In addition, I articulate the ethical principles that I upheld as well as issues relating to trustworthiness that are relevant to this study.

**Chapter four:** presents seven stories that arise from the 1<sup>st</sup> level of analysis (narrative analysis) (one participant with physical impairment and six participants with visual impairment). This study sought to include participants with all kinds of impairments as delineated in the UN Convention on the Rights of Persons with Disabilities (UNCPRD), but it turned out that most

participants have visual impairment. The stories are representative of the voice of participants; pseudonyms are used to conceal their identity.

**Chapter five:** emerging from the 2<sup>nd</sup> level of analysis (analyses of narratives), this chapter consists of themes that are drawn from a cross-case analysis of the seven stories that I presented in Chapter 4: 1) political strife and socio-economic hardship in the country of origin (Zimbabwe); 2) Migrating to host country: A focus on documentation; 3) livelihood shifts and adaptations in South Africa and 4) lack of institutional support, poor access to social services and livelihoods in South Africa.

**Chapter six:** represents the 3<sup>rd</sup> and deeper level of analysis which is interpretive in nature and which discusses the findings of the study under five key elements: 1) the family plays a key role in influencing the migration and livelihood decisions of participants 2) Implied and ascribed identities frame the livelihood opportunities that are available to Zimbabwean migrants with disabilities in Cape Town, South Africa; 3) Zimbabwean migrants with disabilities are resilient, self-determined and flexible in adapting to shifts in livelihood activities in South Africa); 4) Various identity markers such as disability, nationality, poverty, gender, and migrant status intersect to frame the livelihood experiences of Zimbabwean migrants with disabilities in Cape Town, South Africa.

**Chapter seven:** draws the conclusion of this thesis as well as presents recommendations that emerge from the findings of the study and that are directed to; 1) United Nations Migration Agency; 2) Governments of Zimbabwe and South Africa; 3) Disabled People's Organisations; 4) Migrants with Disabilities and 5) Researchers.

## CHAPTER TWO: LITERATURE REVIEW

### 2.0 Introduction

In this chapter, I present the literature review pertaining to migration, livelihoods and disability. As I have stated in the first chapter, there is a general dearth of studies on the livelihood experiences of migrants with disabilities, and even less or nil studies of Zimbabwean migrants with disabilities in South Africa. I was therefore left with no choice but to draw from general migration and livelihoods literature, albeit paying distinct attention to migrants with disabilities in instances where I found such literature. I made use of publications in scientific journals, internet search, books and policy briefs to frame the literature review. In the following section, I start off by reviewing the international perspectives on migration and disability, then I narrow down the review to the context of Africa and specifically, Zimbabwe and South Africa. The discussion in this chapter unfolds under five sub-headings; 1) migration and disability: an international perspective; 2) migration and disability: an African perspective; 3) migration and livelihoods; 4) migration, disability and livelihoods; 5) From Zimbabwe to South Africa: situational analysis.

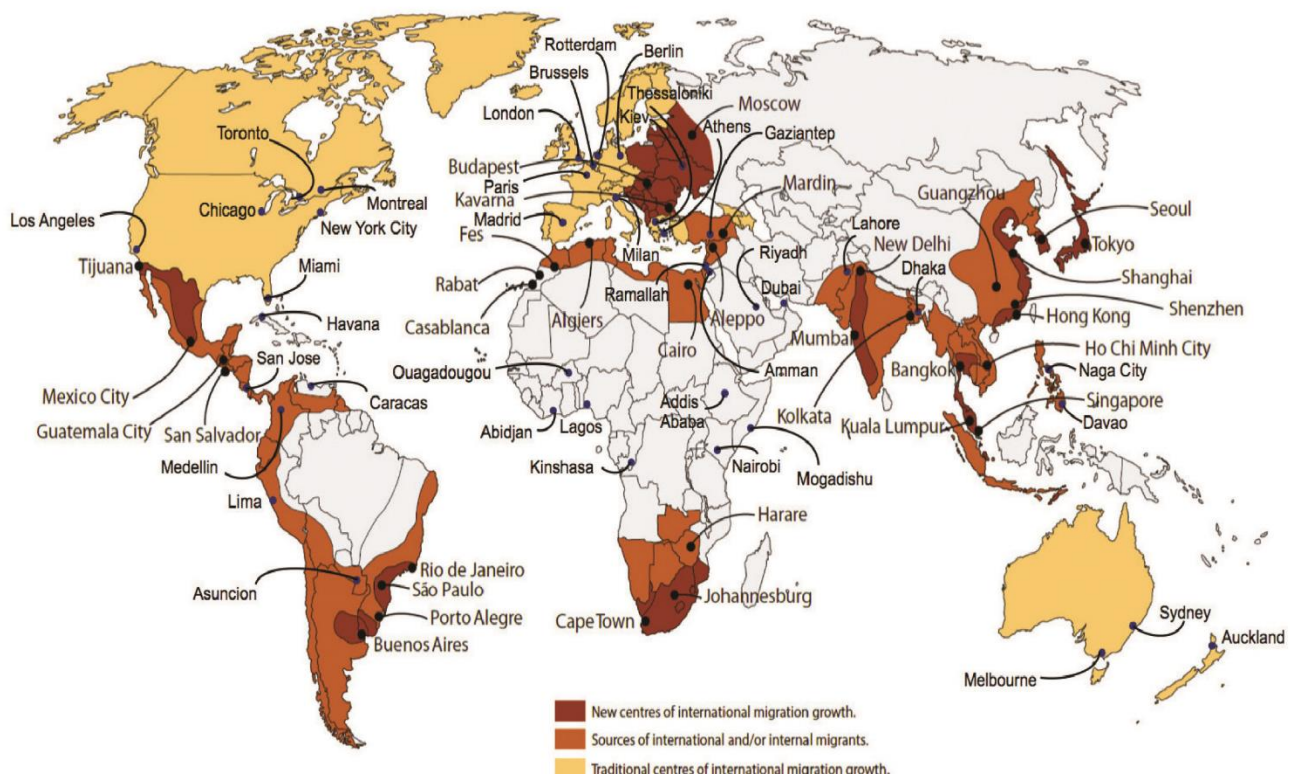
### 2.1 Migration and disability: An international perspective

The World Migration Report states that the first port of call for any study that is related to migration is numbers (United Nations Migration Agency, 2018). I therefore begin this section by articulating international and local statistics on migration, to give an overview of the numbers of people that are moving from one place to the other. The United Nations Migration Agency, states that there were about 244 million migrants in the world, as of 2015. Such a statistic means that about 3.3% of the global population is made up of migrants; a figure which has been described by the United Nations Migration Agency as being representative of a small minority group of people, albeit the fact that the lack of proper documentation of some migrants seems to suggest that such a statistic could be an underestimation of the total number of migrants. Furthermore, migration statistics do not seem to be disaggregated on the grounds of disability, thereby making it difficult to measure the number of PWD who are on the move.

The United Nations Migration Agency (2018) notes that very few people voluntarily choose to settle in countries other than their countries of origin. As such, most people migrate within their



own nations hence in 2009 there were about 740 million in-country migrants globally. An unanticipated increase in numbers of international migrants has been recorded in recent years, largely due to important geopolitical and economic events that include the 2008 global financial crisis and the prevailing conflict in Syria (United Nations, 2017). The same source states that for instance, in 2017, the highest number of about 80 million migrants were living in Asia, followed by Europe with 78 million migrants. At third place was North America with 58 million migrants, followed by the continent of Africa which had 25 million migrants, Latin America and the Caribbean with 10 million migrants and lastly Oceania with 8 million migrants (United Nations, 2017). As previously stated, migration statistics that are disaggregated on the grounds of disability are hard to come by.



**Figure 2.1: Migration patterns (Source:**

[https://www.google.com/search?q=world+maps+on+migration+statistics+2017&rlz=1C1GGRV\\_enZA782ZA789&tbm=isch&source=iu&ictx=1&fir=Ye1zo46rgagcTM%253A%252CwThlfVfUwScztM%252C\\_&usg=AI4](https://www.google.com/search?q=world+maps+on+migration+statistics+2017&rlz=1C1GGRV_enZA782ZA789&tbm=isch&source=iu&ictx=1&fir=Ye1zo46rgagcTM%253A%252CwThlfVfUwScztM%252C_&usg=AI4))

Figure 2.1 above, shows international migration patterns in relation to new centres of international migration growth, sources of international and/or internal migrants and traditional centres of international migration growth. The increasing number of migrants has been attributed, by the United Nations (2017), to the fact that contemporary means of transport have made it cheaper, faster and easier for persons to move from one country to another in search of safety, education, quality of life and/or sustainable livelihoods for themselves and their

families. Increased levels of displacement, both within and across borders, are also partly due to transnational and civil conflict, and extreme violence which occurs outside the actual war zones (United Nations Agency of Migration, 2018). The same source states that at the time when the world report on migration was being written, a high number of more than half a million Rohingya refugees was recorded as fleeing from “Myanmar to Bangladesh since late August 2017, adding further to the world’s displaced population” (p. 3). Much as the figures may seem small by international standards, the United Nations Agency of Migration states that the increasing migration statistics are worrying. However, and in relation to the topic of this study, these reports are silent on statistics of migrants with disabilities.

As I mentioned in Chapter one, the latest world migration report (United Nations Agency of Migration, 2018), is devoid of an overview of the location of migrants with disabilities, albeit paying attention to the age and gender dimensions of migrants. Along the same vein, the international migration report (United Nations, 2017) states that about 48.4% of international migrants are women and the age group of more than 75% of such migrants are aged between 20-64 years. The lack of availability of information on migrants with disabilities in such high profile international documents may mean that their needs, concerns and contributions are regarded as unimportant side matters. This marginal position of disability, may contribute to the persistent exclusion of PWD in the livelihoods development terrain, in a scenario where disability adds a layer to their economic vulnerability as further discussed below.

The UN Monitoring Report associates the poverty of PWD with the general exclusion and marginalisation of PWD in mainstream society, including in conflict situations (United Nations, 2011). Berghs and Kabbara (2015) note that, although conflict is a well-known cause of migration, humanitarian responses tend to neglect the livelihoods of PWD, within the framework of migration, choosing instead, to concentrate on child and adult mortalities. HelpAge (2014) further highlights the invisibility of PWD in migration and livelihood patterns of conflict times and the ageing refugee population that is likely to be disabled. Additionally, the Women’s Refugee Commission (2013) documented the neglect of Syrian refugees with disabilities through lack of provision of services for daily living. The situation of lack of recognition of migrants with disabilities in international research, policy and practice, appears to also prevail in Africa as further discussed below.

## 2.2 Migration and disability: An African perspective

There is a mythical belief that the continent of Africa is endowed with massive displacements and migration due to, high levels of poverty, misery, starvation, underdevelopment and conflict, among other things (Flahaux & De Haas, 2016). The same authors note that the media and some scholars often “paint portraits” of “mass exodus” of Africans who are desperate to run away from poverty to seek “greener pastures” in Europe, in situations which are described as “the portrayal of Africa as a continent on the move” (...p.2). According to Flahaux and De Haas, such perspectives are not grounded on empirical evidence, but they are framed by the negative reporting which began in the colonial era, through media, research and policy. Flahaux and De Haas (2016), note that an African migrant is generally associated with: lack of proper documentation, human trafficking, smuggling and huge numbers of refugees in migration boats who are desperate to enter Europe. However, some scholars argue that most of Africa’s migration does not target Europe at all, but other African countries (Sander & Mambo, 2003; Schoumaker *et al.*, 2015). Furthermore, most African migrants have valid documents such as passports and visas thereby deconstructing the fallacious belief that they are largely illegal immigrants (Flahaux & De Haas, 2016)

According to De Haas (2007) and (Flahaux & De Haas, 2016) the migration of African people to other countries is motivated by the fact that the continent has now realised increased levels of ambition and abilities. The reality is that Africa on its own is awash with migration diversity, in a context where most Africans who migrate, do so for work or study purposes or family reasons (Schoumaker *et al.*, 2015). That is not to say that forced migration, which is motivated by conflict, does not exist (DeJesus, 2018); but it is to say that it is equally important to pay attention to social processes that drive migration, such as the search for education, to join a spouse or to seek an improved lifestyle. In resonance with such an assertion, research has indicated that 86% of the migration that goes on in Africa has nothing to do with conflict (Bakwell & Bonfiglio, 2013).

However, there is a scarcity of data on migration that takes place among African countries; statistics often show measurements of migration from African countries such as Senegal, Ghana, South Africa and Morocco, to wealthy countries in the Global North (Bakwell & Bonfiglio, 2013). Bakwell and Bonfiglio state that there is no data that indicates holistic migration patterns, hence perspectives of huge and increasing African migration and determinants of migration are difficult to validate. Along the same vein, reliable statistics of

migrants with disabilities among African countries are scarce, if not unavailable (DeJesus, 2018). Such a scenario implies that migrants with disabilities are either non-existent or they are not recognised in migration and livelihoods policy and practice. I articulate the link between migration and livelihoods in the following section.

### **2.3 Migration and livelihoods**

According to FAO (2017), the common language derived from the stereotyping of migrants in the migration discourse is that immigration should be restricted due to the challenges it presents, or migrants need to be strictly managed because they are “troublesome” people; yet there are numerous benefits that can be derived from migration. As such, several international organisations have seen the need to examine the balance between the benefits and problems of migration, resulting in a critical analysis of the link between migration at international level, economic growth and human development (United Nations Agency of Migration, 2018). The United Nations (2017) argues that if migration is supported by enabling policies, it can make a significant contribution to sustainable and inclusive economic development in both countries of origin and host countries, albeit being silent on disability. Host countries benefit significantly:

“...as migrants often fill critical labour gaps, create jobs as entrepreneurs, and pay taxes and social security contributions. Some migrants are among the most dynamic members of the host society contributing to the development of science and technology and enriching their host communities by providing cultural diversity (UN 2017:1).

In line with the above quote, the world migration report indicates that migration “...can also result in the transfer of skills, knowledge and technology—effects that are hard to measure, but that could have considerable positive impacts on productivity and economic growth” (United Nations Agency of Migration 2018:4). The same source states that immigration increases the number of workers within an economy; hence it raises the gross domestic product (GDP) of the host nation, as well as assists in enhancing measures that are taken to address labour shortages and job mismatches. In some cases, and in accordance with the United Nations Agency of Migration, some migrants have better knowledge and skills than nationals, and migrants often take professional and innovative risks, that may turn out to be beneficial in

spheres that include arts, science and technology as well as in the entrepreneurship terrain as discussed below.

According to Timberg (2005) and Azmat (2013), some migrants are entrepreneurs who create employment for themselves and for nationals of South Africa. Temporary menial jobs in mining and agriculture have been more publicised as the preserve of migrants than entrepreneurial activities. Yet, according to Petrin (1994) and Khamar (2007), entrepreneurship adds sustainable and substantial value to the economy through wealth creation and accumulation. It is against this background that such initiatives assist in both personal and national development whilst also countering gross injustices of the past and bringing marginalised groups into meaningful economic participation (Massey, 1998; Tsuda, 2006; Van Ngo, 2009). It is striking to note that the same authors do not refer to PWD; such indifference to PWD may be interpreted to mean that PWD have no place in the entrepreneurial terrain of host countries including South Africa. Nevertheless, beyond the benefits that accrue to host countries, migrants themselves also benefit in various ways that are discussed in the following paragraph.

The world Report on Migration (United Nations Migration Agency 2018), states that migrants often earn more in the host countries, in comparison to what they would earn in their countries of origin. It is therefore not surprising that migrant earnings often improve the standards of living of the migrants' families directly if they are living with their families in the host country or indirectly if the families are in the countries of origin but are receiving remittances from the migrant. One wonders if the situation also applies to PWD, given the fact that the report appears to assume that all migrants are non-disabled. However, some authors note that migration also contributes towards a reduction of child mortality due to improved lifestyles (Clemens, Montenegro & Pritchett, 2009; Gibson & McKenzie, 2011). In any case, the same authors note that the benefits of migration stretch beyond economic dividends to include the positive role that is often played by migrants in recovery and post-conflict rebuilding of societies, in spite of the challenges that are explained below.

The employment of foreign nationals, including Zimbabweans, has led to accusations by South African nationals, that migrants "take" their jobs (Holsher, 2016). These accusations have significantly channelled energies which have exposed migrant labourers to horrible living conditions, which put people not only at risk of disease but also disability. The International

Labour Organisation (ILO) elucidates the concept of reasonable accommodation at work and directs employers to develop an awareness of the different conditions that are experienced by PWD, and to seek to address the barriers that they may encounter (ILO, 2016). However, it may be difficult for employers in South Africa to grant such reasonable accommodation to migrant workers with disabilities, for fear of being accused by nationals of favouring or siding with migrants (Aljazeera, 2013); even though migrants face additional challenges that I articulate below.

If breadwinners migrate to other countries leaving their families behind, such migrants are inevitably separated from their families and this may result in them experiencing considerable emotional turmoil (D'Emilio *et al.*, 2007; Nobles, 2013). Emotional distress can also be experienced by the migrant's family members who are left in the country of origin and who must adjust to living without him or her. According to D'Emillio *et al.* (2007), if children are separated from their families, they may be negatively affected for the whole of their lives, due to lack of daily physical contact with their parents and the absence of parental support and guidance during their development. There is also a diverse range of personal risks that can be experienced by the migrants themselves; the journey to other countries may be unsafe and the migrants can also get injured at work (Kahn *et al.*, 2003), thereby negatively impacting on the livelihood experiences of migrants.

Some migrants may experience several health-related challenges, as in the example where about 27% of male migrants from Senegal, living in Ghana, were infected with HIV as compared to non-migrant men from the same area who had a 1% rate of HIV infection (Lurie *et al.*, 2000; Brummer, 2002; Fernando & Congress, 2015). One may argue that a contributory factor to HIV infection is that compared to non-migrants, migrants are more vulnerable to engaging in unsafe sexual practices outside the confines of their mainstream intimate partner relationships. Additional risks of migration include vulnerability to human traffickers, abusive employers who regard migrants as easy targets of exploitation, and deceitful employment agencies, which may all add to untold physical and emotional suffering (Lurie *et al.*, 2000; Brummer, 2002). Nevertheless, it is worrying to note that migrants with disabilities remain marginalised, in their search for better livelihoods in host countries. Below, I discuss the link between migration, disability and livelihoods.

## 2.4 Migration, Disability and Livelihoods

Migration has a profound influence on one's desire to belong to the host country and to be recognised as a citizen, yet a migrant carries the "yoke" of a migrant status which complicates the acquisition of citizenship status (Joppke 2010; Anderson, 2015). The scenario depicting the search for belonging prevails among both migrants with and without disabilities in both the Global North and the Global South (Nawyn, 2016). However, Nawyn argues that at a broader level and even in wealthy Global Northern countries, PWD are usually confined to inaccessible, disabling spaces, which are littered with barriers that continuously cast them to the peripheries of society. As noted earlier by Harris (2003) and Quayson (2007), PWD have historically taken the pigmentation of whatsoever is regarded as a "commodity" that lies at the margins of society, thereby projecting them as a problem and a burden to the non-disabled community. The perpetuation of such mainstream historical views may influence the framing of the parameters under which migrants with disabilities are expected to experience their livelihoods.

According to Swain *et al.* (2014), migrants with disabilities are constantly confronted with the politics of invalidation, wage slavery and inaccessible environments. These local challenges tend to push PWD into intra-state battles as they struggle to penetrate exclusionary spaces that are segregatory (Goggin & Newall, 2005). Disability enlarges the "graph" of marginalisation, as migrants with disabilities are commonly looked down upon as "good for nothing" people who are consequently prejudiced and excluded from most facets of life, in ways that thwart their aspirations of decent citizenship thereby compromising their livelihoods (Swain *et al.*, 2014).

Quayson (2007) argues that disability attracts negativities associated with illness, deformity, mental problems and crime. In some cases, these stipulations of negative views are collated to further portray the migrant with disability as not worthy of acceptance. Quayson further suggests that PWD are regarded as a liability rather than an asset and thus, excluded in socio-economic participation. Like "ink" that has been thrown all over, so is the snap of an 'otherised' migrant (Cisneros, 2008), eyed with the lens of lack of documentation, dependency, and shame, while at the same time viewed as an unnecessary vehicle of community destabilisation. Migrants with disabilities are also viewed as carriers of disease and 'putative criminals' that are nothing more than just a burden to the host country (Harper & Raman, 2008).

Non-disabled persons may experience confusion in relation to their interaction with PWD; disability may evoke reflexivity, which reminds non-disabled persons of how fragile life can be (Hughes 2012; Soldatic & Meekasha, 2012). According to Harris (2003) and Kaye, *et al.* (2011), disability often disrupts the “order” that non-disabled persons may be used to, thereby creating a platform upon which the livelihood experiences of PWD may turn out to be a collection of “oppressions.” In other words, disability often resembles the “gate-crasher” who challenges the existential order of a community and in the absence of a citizen identity, one may be exposed to increased levels of vulnerability (Hughes, 2012). It is therefore not surprising that feelings of anger, bitterness and hatred towards PWD and migrants may arise, to an extent that their livelihoods and well-being may be negatively impacted. According to Hughes, confusion may also abound for migrants with disabilities themselves in relation to what they are entitled to and what they are not entitled to in the host country, given laws that may cushion the livelihoods of some of them and not others as further discussed below.

In South Africa, the White Paper on the rights of PWD, published in 2016, details the inclusive national policy regarding PWD in an effort to address inequalities that were birthed by the Apartheid system (Department of Social Development, 2016). The purpose of the 2016 White Paper on the Rights of PWD is in part, to realise the integration of PWD into employment whilst, at the same time, cushioning those who are unemployed by allowing them to apply for disability grants aimed at promoting financial independence (Surrender *et al.*, 2010; Department of Social Development, 2016). A disability grant is provided to an adult aged between 18 and 59 years through a referral process to the Department of Social Welfare, by a medical doctor who would have examined the person and drawn a conclusion that the individual is unable to work on the grounds of disability (Department of Social Development, 2016).

Citizens, permanent residents and migrants with refugee status as documented by the Department of Home Affairs (DHA) are eligible to get relevant grants while asylum seekers and non-refugee migrants are ineligible (Department of Social Development, 2016). As of 1st October 2018, the disability grant was pegged at R1700 per month (South African Social Security Agency, 2018). However, the figure has been described by some as low, given that Statistics South Africa (2018) has reported increased levels of poverty in the country. There is a dearth of studies about the extent to which migrants with disabilities gain access to the



monthly disability grant. However, in the following section I examine some of the reasons why PWD may decide to migrate from Zimbabwe to South Africa.

## **2.5 Push-Pull Factors: from Zimbabwe to South Africa?**

The economy of Zimbabwe has been declining at an unprecedented rate; shifting the country from being Africa's "bread basket" to be the world's worst economy, with the official inflation rate rising "...from 231 million percent in July, 2008 to an annual inflation rate of over 90 sextillion percent" (Duri *et al.*, 2013:16; Cliffe, 2018). The index of Economic Freedoms (2018) lists Zimbabwe among the 47 countries in Sub Saharan Africa with catastrophic economic and political challenges. The situation forced the government to "dump" its own Zimbabwe Dollar currency, which had evidently become worthless and to adopt the United States Dollar at the beginning of 2009. Although Zimbabwe is credited with a literacy rate of over 90%, a figure that is not reflective of the distinct inclusion of PWD, Duri *et al.* (2013), note that the formal unemployment rate in the country has been pegged at more than 80%. With a failing local industry, most university graduates have become informal fruit and vegetable vendors in an effort to eke out a living. The livelihood status of PWD, who have historically been marginalised in education and employment, could therefore be worse as they compete with non-disabled formally unemployed people in the informal sector.

The Zimbabwe government, through the Social Welfare Assistance Act Chapter 17:06 (Government of Zimbabwe, 1988), directs the Department of Social Welfare to offer assistance to PWD and their families. But, the department lacks resources hence it is unable to extend support to PWD (Mandipa & Manyatera, 2014; Manatsa, 2015); including the approximately US\$20 (R260) monthly disability grant that is meant to be awarded to persons who have been certified as disabled by a medical doctor. Harmonised social cash transfers, food deficit mitigation, public assistance and health assistance form part of the social protection mechanisms directed towards persons with disabilities on paper, but implementation is a challenge due to lack of resources. Therefore, some persons with disabilities go in search of "greener pastures", joining the mass exodus of Zimbabweans to South Africa. According to Chiumia (s.a) and Africa Check (2013), an estimated one million to three million Zimbabweans are believed to have moved to South Africa in what Meldrum (2007), in his Mail and Guardian report calls "Africa's most extraordinary exodus from a country not at war..."

Apart from the migration of PWD, there is also a possibility that some Zimbabwean migrants may acquire disability whilst domiciled in South Africa, due to among other things, health challenges and xenophobic attacks (Brand South Africa, 2013). In some areas, most of the informal dwellings of foreigners are burnt down or are pulled down and as the physical attacks escalate, some migrants die, and some get injured (Aljazeera, 2009). Humanitarian aid groups have labelled such attacks as “labour matters” in which local farmers and other employers are accused of hiring and favouring foreign nationals (Aljazeera, 2013). According to Brand South Africa (2013), the horrific xenophobic attacks could be caused by the fact that although South Africa holds economic promises for migrants, the country has its own challenges which include an unemployment rate of approximately 25%. However, such a statistic is not disaggregated on the grounds of disability hence it is difficult to know the measure of unemployed PWD.

## **2.6 Conclusion**

In this chapter, I have reviewed literature pertaining to the topic of this study under six headings; 1) migration and disability: an international perspective; 2) migration and disability: an African perspective; 3) migration and livelihoods; 4) migration, disability and livelihoods and 5) From Zimbabwe to South Africa: situational analysis. Most literature that pertains to migration and livelihoods is devoid of the livelihood experiences of PWD, thereby raising questions about their location in the “territory” of migration and livelihoods. This a gap which I sought to fill through this study. In the next chapter, I outline the methodology which I used to undertake this study.

## **CHAPTER 3: METHODOLOGY**

### **3.0 Introduction**

In this methodology chapter, I outline the philosophical standpoint upon which this study is grounded. I also articulate the theoretical framework which guided the study as well as the qualitative narrative approach which I chose. Among other things, I explain the reasons why I selected such a methodology as well as my use of the narrative interviewing (NI) approach to generate data. I outline the ethical considerations that I upheld throughout this study and my data management and analysis techniques. I end the chapter by discussing issues of quality and trustworthiness that relate to this study. I outline my philosophical standpoint in the following section.

### **3.1 Philosophical standpoint**

In this study, I used the qualitative narrative approach, positioned within the constructivist paradigm (Patton, 2002; Josselson, 2013). A constructivist standpoint regards knowledge as that which is constructed by a person in the process of interacting with his or her environment (Schwandt, 2000). As such, both the researcher and the research participants come together to construct knowledge; the researcher can therefore not be disconnected from the research process (Creswell, 2012). Such a co-construction of knowledge was suitable for this research because an exploration of the livelihood experiences of Zimbabwean migrants with disabilities in South Africa required dialogue and interaction between the researcher and the participants. According to Patton (2002,) and Josselson, (2013), a constructivist standpoint asserts that scientific knowledge is created by scientists and it is not discovered via the pursuance of strict scientific methods in a laboratory to produce numbers. Gilbert (2002:223) asserts that “We Live in Stories not Statistics” - a constructivist standpoint was therefore most suitable for this study. In the following section I outline the conceptual framework within which this study is located.

### 3.2 Conceptual Framework

In this study I used a conceptual framework which includes the intersectional model and the push-pull model. According to Awid (2004:1) “intersectionality is a tool for analysis, advocacy and policy development that addresses multiple discriminations and helps us to understand how different sets of identities impact on access to rights and opportunities.” Crenshaw (1989; 1991) was very influential in shaping the intersectionality theory and is credited for coining the intersectionality term within the legal context. Crenshaw (1989; 1991) used intersectionality to reject minimalistic usages of race and gender as separate entities when analysing oppression. These silo approaches, as Crenshaw posits, are limited in effectively tackling the nuances involved in the subordination of disabled people. Crenshaw (1989; 1991) states that patterns of oppression are not only intertwined but are influenced by the intersecting social systems, namely race, gender, social class, citizenship status, sexuality, disability and other identity categories. Intersectionality thus enables us to study the ways through which several social life attributes interconnect to simultaneously frame the experiences of disabled people and migrants (Crenshaw, 1989; Crenshaw & Harries, 2009; Siebers, 2013).

I used intersectionality to see how different social life attributes such as poverty, gender, disability and nationality intersect to shape the livelihood experiences of Zimbabwean migrants with disabilities in South Africa. As asserted by Siebers (2013), identity markers are fluid concepts that reciprocally construct one another, as people try to position themselves; they are therefore complex embodiments which include both social and bodily factors. The intersectional model also permits researchers to pay attention to issues of difference (Crenshaw, 1989; Crenshaw & Harries, 2009; Meekosha, 2011) because similar identity markers do not intersect in the same ways in all places and across all people in the world to frame similar experiences. For example, the livelihood experiences of migrants with disabilities in South Africa may be different to those of migrants with disabilities in Kazakhstan. In relation to this study, it was therefore important to pay attention to the contextual, social political and economic issues shape the experiences of disability and livelihoods among participants.

I also used the principles of the push-pull model which in part resonate with the intersectional model by stating that social life attributes such as age, class, and gender influence the migration of people. Push-pull factors are aspects that cause people to leave one place to go and settle in another, thereby framing migration patterns (Rosenberg, 2018). Rosenberg states that in most

cases, push-factors take a forceful posture which often compels people to move involuntarily or by choice, including economic hardships or threats of violence. The pull factors often comprise of what people regard as positive elements that may be prevalent in for example a different country, and that draw people to the host country, to seek “greener pastures” (Gilbert, 2017). Push-pull factors are not necessarily opposites, but they all intersect in shaping the ways through which people migrate from, for example, one country to another. However, the push-pull model has been challenged on the grounds that migration is not only because of under-development but development as well (Bakwell & Bonfiglio, 2013). Push factors are those situations that make individuals want to move from their current locations such as, lack of basic services, unemployment, wars and conflict and lack of economic opportunities among others. The “absence” of such challenges in other locations creates pull factors that attract people to migrant receiving locations (Fischer, 2009). I outline the research methodology that I used in this study, in the following section.

### **3.3 Research Methodology**

I chose to use narrative inquiry as the research methodology because in seeking to explore the livelihood experiences of Zimbabwean migrants with disabilities in South Africa, I regarded a narrative approach as the most suitable. Some scholars assert that a narrative approach enhances the understanding of people’s experiences by allowing people’s stories to be collected (Patton, 2002; Clandinin & Caine, 2008; Creswell, 2012). According to Creswell (2012), the narrative approach contains several data collection tools that include narrative interviews (NIs), which I used in this study to generate data as further explained in section 3.6 of this chapter. As the researcher interacts with participants, he or she engages in dialogue with them, thereby generating stories, studying their experiences and seeking to make meaning out of such experiences (Gray, 2009; Esin *et al.*, 2013).

Narrative inquiry is not free of critiques; opponents argue that the narrative approach allows people to just say whatever comes to their minds, hence narratives cannot be rated as “truthful” (Esin, 2011). However, the same author argues that narratives do not wholly emerge from the single minds of people, but they are intimately related to broader issues such as people’s cultures and institutions that are much larger than the single person who is narrating his or her story. That is not to say that in narrating their stories people do not have some “hidden agendas”, but it is to say that participants are not obliged to reproduce all the past events of their lives in exactly the same way as the events happened (Riessman, 2005). Duff and Bell

(2002) argue that even if people were to “manufacture” their stories, narratives open the window via which researchers can enter the life worlds of participants.

### **3.4 Ethical principles and considerations**

The ethical approval to undertake this study was issued by Stellenbosch University (6638/2018), (Appendix 1). The upholding of ethical principles in research is important because they enhance the ability of the researcher to ensure that participants do not experience any research related harm during and after the research process (Gray, 2009). The same author states that ethical considerations are also important because they assist the researcher to ensure that the study process does not in any way increase the vulnerability of participants to harm, particularly in the case of populations that are already vulnerable. Below, I discuss the ethical considerations that I upheld in undertaking this study.

#### **Autonomy**

Autonomy deals with the issue of ascertaining that participants can make decisions without being forced (Gray, 2009). I upheld this principle by not offering any unnecessary incentives that may have caused participants to take part in the study against their will.

#### **Informed consent**

For valid consent to be obtained, the aims, objectives and purpose of the study, as well as the possible risks and benefits of participating in a study have to be fully disclosed to the participants (Peta, 2017). I therefore took time to discuss the research information with the participants after giving them the written information sheet and consent forms and I allowed participants to ask any questions that they had about the study. Furthermore, I permitted the participants to choose the language which they wanted to use. All participants turned out to be Shona speaking (one of Zimbabwe’s two predominant vernaculars) so some of them spoke in Shona and some of them mixed English and Shona. Considering that I also come from Zimbabwe and I speak the same indigenous language as that of the participants (Shona), it was easier for me to engage the participants in dialogue. Each participant signed the consent form to show that they had agreed to take part in the study and two participants who could not sign used a finger imprint to signify consent.

**Beneficence**

According to Fontes (2004:3) “Beneficence concerns the provision of benefits and balancing those benefits against the risks of participation”. The findings of this study have contributed to the body of knowledge as well as informed disability and migration policy; none of the participants reported that the study had turned out to be a burden to him or her. In some ways by creating a safe platform upon which participants could narrate their stories, the study allowed participants to reflect and understand their own experiences and to be a voice for Zimbabwean migrants with disabilities in South Africa who did not get the opportunity to take part in this study.

**Non-maleficence**

Non-maleficence represents the responsibility of a researcher to do no harm to participants (Gray, 2009). I therefore made sure that the study does not cause any harm to participants throughout the research process. I did not engage in any talk or behaviour that could stigmatise the participants, I also agreed to conduct the interviews in the homes or places of work of participants, as chosen by them. However, two participants asked for counselling services, on the grounds that they had remembered some painful experiences. As I had arranged prior to undertaking this study, I referred the two participants to People Against Suffering, Oppression and Poverty (PASSOP). I had anticipated that researching sensitive topics such as the subject of this study carried the risk of causing emotional stress to some participants due to remembering difficult past experiences. However, by the time I contacted the same participants for a third sub-session of the interview after a minimum period of one week, they all informed me that PASSOP had helped them a lot and they were happy to continue with the interviews.

**Privacy and Confidentiality**

All data relating to this study was kept in a locked filing cabinet to which I am the only person who had access. I protected electronic data with a password and I would always log off my laptop when it was not in use. I used pseudonyms to “hide” the identity of the participants and in cases where I felt revealing places of stay or work would reveal the identity of participants, I concealed such information.

## **Justice**

The ethical principle of justice directs fairness in relation to the treatment that the researcher accords the participants (Creswell, 2012). In this study, I ensured justice by allowing participants to air their views; even in instances where I disagreed with such views, I did not challenge the participants. I was sensitive to what the participants wanted, thereby ensuring that the study does not turn out to be a burden to them.

## **3.5 Population and sampling**

The population for this study was all Zimbabwean migrants with disabilities who live in the Western Cape Province of South Africa. No documented statistics of the number of Zimbabwean migrants with disabilities in the Western Cape Province existed at the time of data collection. A verbal estimate, by staff at PASSOP, indicated that they were about 20 Zimbabwean migrants with disabilities in the Cape Town area at the beginning of this study. In undertaking my field work my first port of call was PASSOP, the organisation which introduced me to the first research participant. However, I recruited participants outside of PASSOP.

## **Sampling**

I used purposive sampling to identify the first participant and thereafter I used the snowball sampling technique to identify six participants (O'Leary, 2017). Qualitative research is not concerned with generalisation, but with gathering in-depth data about each participant (Gray 2009; Robson 2011). I therefore regarded a sample of seven participants as an adequate number that would enable me to generate rich data about each participant. My sampling criteria was grounded on searching for willing informants and most of such informants turned out to be visually impaired. My area of sampling was Cape Town, South Africa, which I chose because I found it easier to access; Stellenbosch University is in the same area and there were also gatekeepers in the area, including PASSOP who made it easier for me to gain access to participants.



### Inclusion and exclusion criteria

In this study I included:

- Male and female Zimbabwean migrants with all types of impairments (physical, mental, intellectual and sensory). However, it turned out that of the seven participants, one has physical impairment and six have visual impairment.
- Participants of an adult age range of 18-65, were included; the legal age of consent in both South Africa and Zimbabwe is 18; those above 65 are regarded as elderly.
- I included Zimbabwean migrants with disabilities who had lived in the Western Cape Province for a minimum period of over three months. I considered three months to be the minimum period within which livelihood patterns could be deduced.

In this study I excluded:

- Participants with severe communication challenges (such as inability to communicate even by non-verbal means) because the study required extensive dialogue between the researcher and the participants. Persons below the age of 18 (children) and those above 65 (elderly) were excluded.

**Table 3.1: Biographic information of participants**

Name	Approximate Age (years)	Gender	Disability	No. of children	Education	Period of stay as migrants in South Africa (years)
Chido	36	Female	Physical Impairment (Amputee)	3	4 years high school	6
Blessing	52	Male	Visual Impairment	1	University degree	16
Mugwati	51	Female	Visual Impairment	7	Nil	17
Matemba	55	Female	Visual Impairment	5	7 years primary school	14
Chenai	55	Female	Visual Impairment	1	4 years high school	15

Jabulani	50	Male	Visual Impairment	1	Vocational training	13
Kativhu	59	Male	Visual Impairment	4	Nil	6

### 3.6 Data generation

*Interviewing is rather like marriage, everybody knows what it is, an awful lot of people do it, and yet behind each closed door, there is a world of secrets...* (Oakley cited in Allan & Skinner, 1991:203)

From the beginning of the narrative interviews (NIs), I tried to be as open as possible with my participants, detailing what the study entailed and how the information that I would obtain could help benefit the lives of Zimbabwean migrants with disabilities in South Africa. I agreed on times and venues that were convenient to the participants; most of them chose to be interviewed in their homes. As I previously stated, I was also born and raised in Zimbabwe and I speak the indigenous Shona language spoken by all participants, it was therefore easy for me to establish rapport with participants. The scenario helped me to reduce what Wengraf (2001) calls hierarchies of power that are common in research processes, and that may be detrimental to the generation of meaningful data. Below, I discuss the narrative interviewing approach.

#### Narrative Interviewing

According to Ziebland (2013), narrative interviewing (NI) is an approach that incites people to recount their life experiences. The NI is different from the semi-structured interview which tends to give too much power to the researcher to guide the interview process, thereby instigating the participant to answer questions that would have been prepared by the interviewer in relation to what is important to the researcher and not to the participant (Wengraf, 2001; 2013). The value of the NI lies primarily in the fact that it creates a platform upon which a participant can freely recount issues that are important to him or her in the way that he or she wants, using a language of his or her choice and under conditions of very minimal interruption from the researcher (Ziebland, 2013; Peta et al., 2018). The NI comprises of three

sub-sessions which I discuss in the following paragraph and later outline in Table 3.2, to demonstrate the way in which I conducted the NIs.

In the **first sub-session**, the interviewer asks one question in which he or she tells the participant what the focus of the study is and the experiences that the interviewer wants the participant to tell (Wengraf, 2001). The same authors state that in this question, the interviewer also tells the participant to begin telling his or her story from any point that he or she likes, the researcher promises not to interrupt the participant's telling of the story, but to just take a few notes, whilst actively listening, until the participant has finished telling his or her own story. Some scholars argue that the NI empowers the interviewee because the participant decides how to present their account, what they want to say and what not to say and when to say it (Ziebland *et al.*, 2013). The first sub-session was guided by the NI guide presented in Appendix 4. In the **second sub-session**, the interviewer asks questions that emerge from the story that would have been told by the participant in the first session; for example "you said X, do you remember anything else that happened during that time when X was happening?" The **third sub-session** is not compulsory, and the researcher can undertake this final session either on the phone or in person to get additional data that completes a story or biographical information such as the date when the participant was born, their educational level or other areas of the participant's life that could be useful in completing the story (Feher, 2011). I summarise the NI process in Table 3.2 below.

**Table 3.2: The narrative interview (NI) process**

Sub-Session	Frame of Question
<b>Sub-session 1</b> One question which elicits a whole life story	As I have discussed with you before, I am carrying out a study on the livelihood experiences of Zimbabwean migrants with disabilities living in Cape Town, South Africa. Could you please tell me about your life story, including your experiences as a Zimbabwean migrant with disability living in South Africa, your migration journey from Zimbabwe, and what your livelihood sources are? You may start from any point of your life that you choose, I will not interrupt you, but I will be recording the interview with this audio-recorder and taking just some few notes in case I have further

	questions that I may want to ask you after you have finished telling me about it all.
<b>Sub-session 2</b> Follow up on the issues that would have been reported by the participant in response to the first question.	<b>Example:</b> You said when you arrived in Johannesburg in 2004, you went straight to the traffic lights and you started begging, do you recall anything else about that time when all that was happening?
<b>Sub-session 3</b> To gather biographical information	After carrying out an initial analysis of the data that I collected in sub-session 1 and sub-session 2, I interviewed participants by phone in sub-session 3 to draw more biographical data and to fill in some gaps that I had identified in the stories.

(Chamberlayne et al., 2000; Wengraf, 2001; Peta, 2017)

### 3.7 Reflections on collecting data

When I went out into the field to collect data, I was thinking that it was going to be difficult to find Zimbabwean migrants with disabilities to tell me their stories. I had heard a lot of stories about illegal migrants, so I was aware that some migrants are legal, and some are illegal. I wondered about how I was going to extract a story from an illegal migrant who may obviously be fearful of exposing him or herself if I were to encounter one. I started imagining that I would not get any data from illegal immigrants because they would think that I am a Department of Home Affairs spy who would get information from them and get them arrested by the South African Police and be deported to Zimbabwe. I became so “fearful” as I began to imagine that maybe the illegal migrants would run away from me when I introduced my topic, resulting in my study failing to take off.

As I set out to collect data, I also imagined a lot of horrible things that included being beaten up and robbed in the townships of Cape Town, given that my targeted participants did not seem to live in the posh or affluent suburbs of Cape Town. I had heard a lot of stories about crime and gang violence in South African townships, and I had also experienced such crime during the first few months of my arrival in South Africa. Among other things, I was robbed of my bag and cut with a knife on my left hand, at a bus terminus where I board public taxis to and from Stellenbosch University. On a different day, I had watched public taxi drivers shooting

each other with guns at Bellville bus terminus. The truth of the matter is I began to doubt the reasonableness of my study.

However, my first participant contributed greatly towards enhancing my confidence to carry on with the study. The participant gave me directions to the township where she stays; she told me where to board the public taxi and promised that she would wait for me at the agreed time and at a named bus stop that is close to where she stays. When I got to the bus-stop I found her sitting on a huge stone under a tree which is located just by the side of a man-made shade. I identified her with the clothes that she had told me she would be wearing as well as her visible physical impairment. As things began to happen in the way that she had said, I gained confidence that all was going to be well. I spent many hours at her house during the first and second interview sessions during which time, I noted that perhaps the belief that all people in South African townships are violent people, who beat, kill and steal from each other is a myth. I realised that the township enjoys its peaceful and safe moments, because I was able to conduct the interview in the privacy of the participant's two roomed cabin, whilst sensing that neighbours were just peacefully getting on with their daily business.

However, the data collection process was generally not very easy, as I collected data during the Cape Town winter time and in some instances, it was raining. Some of the participants (beggars) would not want to leave their places of work and they would ask me to meet them at the traffic lights where they beg. The first time I went to the traffic lights, rain started pouring down on the participant and me, and on the second occasion, it was difficult for me to "capture" the attention of my participant who was concentrating on soliciting money from motorists. I learnt that the best that I could do was to make appointments to interview most participants on the days that they would be "off work" and in their own homes; I held successful interviews with five participants in their homes. However, two participants insisted that they wanted to be interviewed at their places of "work" (by the road side); the interviews were successful because the participants stopped begging for the entire duration of the interviews whilst we co-constructed knowledge under the huge trees that were close to their work stations. On reflection, I am grateful to all the participants, because they contributed greatly towards making the interviews a success. I am also thankful to my supervisors who, among other things and on some days, provided me with transport which made it easier for me to travel to meet with participants at the places of their choice.

### 3.8 Data management and analysis

I transcribed the interviews verbatim and in full, and I realised that during such transcriptions, I was bonding with the data, albeit the fact that the transcriptions were taking a lot of my time. I would take an average of 5 hours to transcribe each interview and as postulated by Easton *et al.* (2000), I would also invest additional time to listening to the recording and reading the transcripts again and again, and to check if what I had transcribed was correct. According to Polkinghorne (1995) the outcome of narrative analysis is stories and that of analysis of narratives is themes that emerge from the stories. I therefore analysed data at three levels; first by using **narrative analysis** to produce whole life stories that focus on presenting what the participants said without attempting to derive any meaning from it; and second through **analysis of narratives** to draw themes of commonalities and differences across the seven stories and the link that exists between the themes; and thirdly through embedding **a deeper layer of analysis in the discussion of findings** to enhance further comprehension of the data.

#### First level of analysis: Narrative analysis

In generating the stories, I drew from the seven criteria for judging a story, as articulated by Dollard (1935) and developed further by Polkinghorne (1995). The seven stage criteria as listed below helped me to determine the best structure and content of each story:

1. *Description of the cultural context in which a story happens.*

According to Polkinghorne (1995:16) cultural context means the “values, social rules, meaning systems and language conceptual networks of the culture in which he/she [the protagonist] developed.” Such considerations are important when one is plotting a story because they illuminate the ways through which culture influences the choices and actions taken by the protagonist and the meaning making process of events. I therefore in this study, paid attention to the cultural context of participants.

2. *Paying attention to the embodied nature of the protagonist in collecting and configuring data*

According to Polkinghorne (1995) the dimensions of a person’s body often influence the way through which they frame their personal goals. Such a factor is important in this study because participants are men and women with impairments. The intersection of such bodily impairments with social life attributes that include gender, nationality

poverty, and age is important in framing an “accurate” account of their livelihood experiences.

3. *The standing of **significant other people** in influencing the goals and actions of the protagonist*

By referring to significant other people, Polkinghorne (1995) focuses on persons such as family members, employers and friends who influence the choices and decisions that are taken by the protagonist. People rarely make decisions that benefit them alone, hence a consideration of the significant other people in the life of the protagonist, helps to see the role that such people play in the participant’s life. Because human life is interdependent, I therefore in plotting the stories in this study paid attention to the significant other people who influenced the thought patterns and actions of participants.

4. *Focus on the **choice and/or actions** of the key person*

According to Polkinghorne (1995), every person is different to another individual in relation to both personality and the way that he or she responds to issues. The uniqueness of people makes it necessary for researchers to pay attention to the choices and actions of the protagonist. “To understand the person, we must grasp the person’s meanings and understandings, the agent’s vision of the world and his or her plans, motives, interests and purposes” (p.16), as well as contextual problems, inner conflicts and emotions. By paying attention to each participant’s individual choices and actions and as postulated by Polkinghorne, I endeavoured to provide a rich thick description of the multidimensional nature of the interaction of each participant and his or her environment.

5. *Take into consideration the **historical continuity** of the story characters*

Because people are historical beings, they can never really be detached from their past, which remains a part of who they are. Past experiences manifest in people’s present thought patterns and behaviours (Polkinghorne, 1995). I therefore considered the past experiences of participants, in order to illuminate how such experiences may have influenced the views of their identity, thinking patterns, and the world. I have therefore dedicated the first theme in Chapter five, to giving an overview of the past experiences

of participants in their country of birth (Zimbabwe) before they migrated to South Africa (host country).

6. *The shaped story requires a **bounded temporal period***

Polkinghorne (1995) highlights the need to locate stories in a temporal way, alongside an argument that each story should have a distinct beginning, a middle and an end. In this study all participants located the beginning of their stories from the time they were born, and the ways through which they acquired disability and their access to basic education or lack thereof in the early years of their lives. The middle parts of the stories included vocational training opportunities, tertiary education and employment or lack thereof and the voyage of migrating to South Africa and the associated livelihood experiences. The stories ended with participants articulating their vision for the future.

7. *Final check: Is the story about the issue under study **plausible and understandable?***

This stage underscores the importance of constantly checking if the story is meaningful in relation to the protagonist's responses, choices and actions. The researcher checks if the protagonist's description of characters, events and occurrences, resonate with the plot and are relevant to the topic under study (Polkinghorne, 1995).

In summary and as articulated by Polkinghorne (1995), I ensured that each story moved backwards and forward between the past, the present and the future, whilst at the same time underlining primary events, persons, and actions in order to illuminate their applicability and effect on the participants' experiences and processes of making meaning. I followed Esin (2011) and noted his assertion about using a plot to bring events together. In addition, I used Polkinghorne (1995) and I decided to borrow his concept of the story "plot" as an analytical tool that puts order to stories. The seven stage criteria helped me to determine the best structure of each story, in relation to the research question, albeit without choosing what to include and what not to include, but simply re-arranging the text, of what the participants said.



## **Second Level of Analysis: Analysis of Narratives**

At this second level of data analysis, I used the analysis of narratives approach to draw themes from the data using a manual approach. I borrowed advice from Braun and Clarke (2006; 2019) and I read the plotted stories several times, whilst noting down some ideas, and separating words/sentences and labelling them with codes. I put all similar codes into categories which I then labelled as themes (Polkinghorne, 1995). According to Riessman (2005) the value of the analysis of narratives approach lies in the fact that it enables a researcher to find elements of not only similarities but also differences across the entire data set. However, in using the analysis of narratives approach, I learnt that such analysis demands that I go backwards and forward between the data that I had coded, and the whole set of data and the reviewed literature and theoretical framework (Braun & Clarke, 2006). As presented in Chapter five, I generated six main themes from all the stories that I had presented in Chapter four and that make up the whole data set. According to Wengraf (2013), critiques argue that the analysis of narratives approach results in the loss of the unique nature of a story. However, I argue that my use of both the analysis of narratives and narrative analysis approaches, as well as the inclusion of an interpretive deeper layer of analysis (third level of analysis) which is embedded in the discussion of findings, and which I discuss later on in this chapter, enhances the credibility of the study.

In generating the themes, I took cognisance of the assertion made by Braun and Clarke (2006; 2019) who acknowledges that themes are not merely buried in the data awaiting exhumation. Hence, I did not pre-design themes and try to fix data into those themes but through an inductive approach of analysis I allowed the themes to emerge freely from the data. I found such an approach to be appropriate, considering the originality of this study which focused on the livelihood experiences of Zimbabwean migrants with disabilities in South Africa. However, I did not use an inductive approach only, but as postulated by Bergstrom (2010), I was also looking out for themes that relate to the conceptual framework which I used in this study; factors that intersect to frame the livelihood experiences of participants as well as pertinent push-pull factors, thereby also taking a deductive approach to data analysis.

### **Third level of analysis**

The third level of analysis is integrated in the discussion of findings, thereby representing a deeper level of analysis which is aimed at making meaning out of the views that Zimbabwean migrants with disabilities jointly value and share within the genus of narrating their stories. Although all the three levels of data analysis produce knowledge of different intellectual forms, all the knowledge is valuable.

### **3.9 Reflections on analysing data**

When I was analysing data, I was amazed by the extent to which the participants had opened up to me, in spite of the fact that most of them are much older than me (old enough to be my parents) except for one participant. I started to think that because I am a Zimbabwean who spoke the same indigenous language as participants, perhaps they saw me as a “caring son” who was checking out on them in a foreign country, hence they embraced me, appreciated me and found it easy to relate to me. I realised that my fears that I would not obtain relevant information at the start of the study were unfounded, because I was now sitting with a huge amount of data which was demanding a lot of time from me so that I could do justice to its analysis.

During the transcription of rich narrative interviews, I realised that the participants’ experiences were not in a linear fashion. Participants were narrating their stories in a way, which was making it difficult for me to draw “the string” of coherence of the story elements. Therefore, in plotting the stories, I sought to pull a plausible ‘string’ of the story (the beginning, the middle and the end), thereby drawing together elements of the story that refer to the same subject or the same period, but that were sitting in distant places. I have added Appendix 5 (sub-session 1, Appendix 6 (sub-session 2) and Appendix 7 (sub-session 3), as an example which shows the story of ‘Chido’ in its raw data form, to enable the reader to gain knowledge of the way in which the stories were told and how I then used the story plot of Polkinghorne to put the stories in order to form a clearer sequence (beginning, middle and end) of the story or (past, present and future).

Throughout the period that I was analysing the data, “mental pictures” of the participants and their narratives “stayed” in my mind and I would laugh at the funny things they said and cry at the emotional recounts that they raised. I was deeply touched when I remembered how the

participants had commended me for doing a good job by creating a platform for them to share their experiences, concerns and needs; an opportunity which they said they had not had before. Such acknowledgement, coupled with the support that I was getting from my supervisors, encouraged me to carry on with the study.

### **3.10 Quality and Trustworthiness**

In this section I discuss the procedures that I used to enhance the quality and trustworthiness of this study.

#### **Member checking**

One of the ways of enhancing the credibility of a study is through member checking (Creswell, 2013). As such, I upheld the principle of confirmability by using member checking to check if my interpretation of the data that I had generated was a “correct” representation of what the participants had said. I therefore engaged the participants in ways that enabled them to check the narratives that I had written and to confirm if they represented what they had said (Gray, 2009; Carlson, 2010; Peta et al, 2018). Participants “removed” parts of the data which they felt could result in other people knowing who they are as well as parts which they disagreed with; they also added some information. Through member checking I gave participants a chance to review what they had said, thereby guarding against marginalising them (Creswell, 2013; Birt et al, 2016).

#### **Thick, rich descriptions**

To address the issue of transferability, I made sure that my descriptions of the participants’ accounts are comprehensive, so that those who may want to transfer and implement a similar study elsewhere, are provided with a solid base of details upon which they can make comparisons (Ponterotto, 2006; Robson, 2011). I used thick, rich accounts to highlight the fact that the livelihood experiences of Zimbabwean migrants with disabilities in South Africa, are not framed by a single clear path, but they encompass many dimensions and many layers. I believe that the accounts are written in a way that enables readers to visualise the life worlds of participants. I also believe that my use of a data analysis approach which comprises of three parts (first, second and third levels) as discussed above, contributes towards the achievement of credibility and dependability of the study findings.

### **3.11 Reflexivity**

I have outlined my reflections during data generation (Section 3.7) and during data analysis (Section 3.9). However, in this section I buttress the fact that throughout the study process, I was keeping a field journal, in which I was writing everything that was going on in the field so as to enhance the credibility of the study. In this thesis I used first person narration which shows that I am the author of the thesis. But in some instances, I also wrote in the third person, in ways that show that I am retelling the participants' stories about their livelihood experiences in South Africa. As postulated by Robson (2011), the practice of writing in the first person helped me to engage in reflexivity and to distinctly show my thinking and the role that I played in co-constructing the knowledge instead of hiding my perspectives and the choices I made during the research process, thereby enhancing the credibility of the study.

Generally, I found it difficult to come to terms with some of the events that were narrated by the participants such as entering South Africa via the Limpopo River whilst carrying a baby on one's back, risking robbery and crocodile attacks. I was amazed by the resilience of Zimbabwean migrants with disabilities. I started to think that both the governments of Zimbabwe and South Africa must be very serious in addressing the issue of migrants with disabilities, because maybe some of them die in the process of trying to illegally enter South Africa, resulting in their children being orphaned. However, not all reported events were gloomy, because as I have stated earlier, I found myself laughing at some of the things that the participants had said. On reflection, I think that I will never forget the stories that the participants narrated and the "portraits" of the participants will remain carved in my heart, for as long as I live.

### **3.12 Conclusion**

In this methodology chapter, I have outlined the philosophical standpoint upon which this study is grounded. I have also outlined the conceptual framework which guided the study as well as the qualitative narrative approach which I chose for the study and my use of the narrative interviewing (NI) approach to generate data. I have discussed the ethical considerations that I upheld throughout this study, my data management and analysis techniques as well as issues of quality and trustworthiness that relate to the study. In the following chapter I unpack the findings of the study that emerged from the narrative analysis of data.

## CHAPTER 4: NARRATIVE ANALYSIS

*Have they found “greener pastures” in South Africa?  
Are they “burdens” or are they part of the “engine” of economic prosperity?  
Through this thesis, and through their own voices, I take you on a tour of their livelihoods!*

### 4.0 Introduction

As outlined in Chapter three, narrative analysis produces whole life stories (Polkinghorne (1995). I therefore in this chapter present my first level of data analysis which is represented by whole life stories of all Zimbabwean migrants with disabilities who took part in this study. As previously stated, I drew upon the seven stages of constructing a story as proposed by Dollard (1935) and further developed by Polkinghorne (1995) to frame the stories. Chido has physical impairment (amputee) and the rest of the participants have visual impairment (Mugwati, Chenai, Blessing, Kativhu, Matemba and Jabulani). The stories are presented in such a way that the accounts of participants speak for themselves. I use pseudonyms to conceal the identity of participants; I begin by presenting Chido’s story below.

### 4.1 Chido’s story of becoming an entrepreneur

I am a 36-year-old woman who was born and raised in Zimbabwe. I went to school in Zimbabwe until I completed my O’ levels<sup>1</sup> and then I got married in 1998 when I was sixteen years old. I later got divorced when I was 22 years old. My ex-husband is blind and I have three children with him. He divorced me after four years of marriage in 2001 when I was involved in a car accident in Zimbabwe and my leg was amputated at the hospital when I was 22 years old. The person who hit me with the car did not stop but somebody called an ambulance and I was taken to the hospital where I was treated and I started using crutches. I struggled to use the crutches because at times I would lose balance especially when someone pushed me. However, the hospital advised me to buy an artificial leg. Raising the money was hard but my family helped me so now I have an artificial leg which I bought in Zimbabwe.

Although my ex-husband is blind, he disliked the fact that I was now a disabled woman without one leg and he decided to abandon me and the children in our rural home in Murehwa while he went in search of an able-bodied woman. The artificial leg brought hope to my life as I began

---

<sup>1</sup> Four years of high school education

to move from place to place and for longer distances as compared to the time when I just had crutches. However, this artificial leg wears out as I continue to walk. Sometimes it dislocates and that means that every year I must take it to the orthopaedist to be fixed. Sometimes my foot is not “okay” and I may need to have it replaced but I often struggle to raise money to buy a replacement. However, in 2006 at the age of 24 I ventured into the flea market business and I began to buy and sell second hand clothes so that I could raise money to look after my three children. When I started operating a flea market it was doing well because it was the harvest season in Zimbabwe. Farmers were selling their maize at the Grain Marketing Board (GMB)<sup>2</sup> so they had money which they used to buy clothes from my stall. The flea market began to struggle in 2008 when the whole country began to face economic problems. During that time, it was hard to get money or to save money or to even buy food. People were just talking about inflation and large amounts of money that was like millions of dollars but that could not buy anything. A lot of people could not get jobs and life was hard. I began to struggle to feed my children.

In Zimbabwe I would hear people talking about South Africa and saying that life was better there so I also decided to go to South Africa to look for a job so that I could get money and send it back home to my children so that they could buy food and pay school fees. I did not have a passport but I just came to South Africa in 2013 when I was 31 years old. I was with my friend who had lived in Cape Town since 2009. She told me that these long-distance truck drivers organised everything at the border for illegal immigrants. I paid a bit of money to the truck driver who then paid the officials and I passed through the border without any problems. The truck was heading for Cape Town so the journey was easier because the driver took us straight to Cape Town where my friend had a place to stay.

I started to look for a job as a domestic worker and I found it after about two months of staying in Cape Town with my friend. I could not look for any professional job because I just have high school education and no job skills. I also did not have the right documents for staying in South Africa. I started to work for a White employer and my working conditions were fine as I started work at 8am and finished at 5pm. I was staying at the White man’s place, and food and other basics such as bath soap and body lotion were provided. But sometimes the White

---

<sup>2</sup> (Grain Marketing Board: The key buyer and funder of millers in Zimbabwe)

man would say he does not have money to pay me. I continued for three months until I realised that I was not going to get paid, and I decided to leave the job. The first White man that I worked for, never paid me for three months and I quit the job.

After the first job I became a domestic worker again for another White man for almost one year. This man was better because he was paying me about R1500 every month. Unfortunately he got sick with cancer and he died and my job ended just like that. I started looking for a job again and I found another White man who is originally from Portugal and I worked for him for about six months. Then one day he just said to me: “Chido I’m going back to my country so there is no-longer a job for you here.” It was hard for me to swallow but I had no choice but to become a loafer again whilst looking for another job. Life is not easy because I am a disabled woman. Some employers do not like to employ disabled people. If they call me for an interview and they see my artificial leg they just say “No! You can’t play with my kids with a leg like that.” Some games [like ball games and skip rope] are specific for the child so you find that I might be slow compared to a person who can run faster and play with the child so able bodied domestic workers have an advantage over me.

If you put yourself in my shoes you will see that in this country you will just be working but the money is not that much. The money is little for us who would have come from Zimbabwe. We have many obligations such as paying school fees for the kids back home and sending money to those looking after them so that they can buy food to survive. Don’t forget that as a domestic worker, one can never earn a lot of money, no matter what the employer’s skin colour is. Yet, everywhere I stay, I should make sure that I pay rent where I live as well as buy food. If I earn R1500 then I pay rent in Gugulethu Township for R500 for my room, then I buy food, then by the end of the day I have very little left. But I still stay in South Africa because in Zimbabwe jobs are hard to come by. But it’s only a way of surviving, however, because things do not really go well because employers pay very little.

However, after about two years of living here in South Africa, and in 2015 when I was 33 years old, I travelled back to Zimbabwe to see my children using the same illegal means. I had saved a bit of money to buy food for my children and to pay school fees for them. I also thought it was not good to live in South Africa as an illegal immigrant. I was thinking that one day I would be caught by the police officers and that would make things worse for my children back home. So, when I got home to Zimbabwe I decided to apply for a passport so that I could

become a legal immigrant in South Africa and bring my children along. I returned and applied for asylum. Now I have legal asylum status in this country so it's better for me. I decided not to work in people's houses but to start my own dressmaking business which I run from my home.

So, you see, now I am sewing things from home for people who place orders with me. That is how I am surviving. Compared to my previous work I think it is better to do my own things. I am now setting targets for myself for what I want to do during the day and how much work I should put into it and at what time. I can decide on the time and place that I want to go to on any given day. At times I get more money than the little that employers used to give me. I have even managed to bring two of my older children here in South Africa. My first-born child finished four years of high school education in Zimbabwe, but I could not afford to take him further with education. He also came here and is working at a Steers food outlet. My second born child also finished four years of high school education and he also came here in November 2017. I want him to go back to Zimbabwe to finish the last two years of high school education but I don't have enough money yet.

The last-born child is the one who is back home staying with my mother whom I send money monthly. My ex-husband does not care about the well-being of the children. I called and told him that our son had passed his ordinary level school leaving certificate exams (four years of high school education) and we should help him to go further with his education but he simply said that he did not have money. You see, usually when a man marries another wife he starts focusing on that new family forgetting that he has other children. But you see I feel that I have done well. Although I have failed to send my first-born child to University, at least I managed to pay for him to finish seven years of primary school and four years of high school before he came to South Africa; the bottom line is that he is not completely uneducated. I am trying to do better with the last two children. I personally think that disabled persons should be given opportunities to show what they can do with their own brains.

Disability does not mean that one is brainless but a disabled person can do even more than those who think they are able bodied in everything, I have always been against handouts. I strongly believe that there are empowerment activities that should be done by the government for disabled people. Imagine how successful I could be if I could get a business place from which I could run my sewing business. Right now I am operating from home and for a customer



who does not know me or my other contacts they cannot access me. In a business complex I can be seen by many people so I can get more clients and I can pay my rentals with ease just like able bodied people. I could even employ a lot of people if my sewing business grew big but because I am a disabled migrant the business systems here overlook me.

To think that disability takes away my family as well as my income and in addition, a government hospital requires me to pay lots of money is just unfair. If they do not want us to be medically treated for free then they should just subsidise the cost so that we share the costs with the Government. Every now and then we hear issues concerning the youths and child marriages. People such as me are not spoken about because they think disability means I am useless. Do you know how it feels to be a divorced disabled mother with three children to look after? I know you may never know how it feels because you are a man but when I used to think about my life and everything we were hoping to achieve in our lives as a family I would break down and cry.

I finally accepted that I was now alone without a husband and I could move on from where I was. I just wish my husband could help me financially in raising these children. Right now I am the one paying their school fees and all the other bills. If only people in my situation could be protected by some sort of government law so that disabled people do not face the same hardships as I faced. But I am also grateful to this government of South Africa because here when my leg pains me I go to Gugulethu clinic. They examine my artificial leg and when they see that some edges of the stump are not aligned they fix it for free. At Old Mutual Centre, a hospital with an orthopaedic centre, they crafted a beautiful artificial leg for me free of charge which is good for me. That kind of good and free medical treatment helps me so that I continue to work and look after my children. In Zimbabwe it would have been difficult. For the future I look forward to establishing my business in a proper place and to employ some of the local people in my company, to make more money and to build my house in Zimbabwe, so that when I go back home I will have my own place to stay and I am not renting. That is all I can tell you about my life, thank you for coming to talk to me.

#### **4.2 Blessing's story of being educated but failing to get formal employment**

I was born in 1966 so I am now 52 years old. I lost my sight when I suffered from measles at the age of five, because I had not been immunised against measles. My parents told me that they struggled to know what had really happened to me. As a result, they consulted religious prophets and traditional healers but I still could not be healed. I went to school at Capota School for the Blind in Masvingo, Zimbabwe for both my primary and high school education. The school is run by the Dutch Reformed Church and throughout my schooling I got good grades. After high school I enrolled at the University of Zimbabwe to study for a degree in administration. After University I worked at Mt Darwin hospital as an administrator on a temporary contract. After that I worked at various hospitals in Masvingo on a temporary basis because I just could not get a permanent job maybe because I am blind.

I got married customarily in 1991 when I was 25 years old; our marriage was blessed with a daughter who was born in 1992. I later decided to divorce my wife after seven years because I felt I didn't need a wife as I had thoughts of migrating from Zimbabwe at the time due to the frustration of earning little money and temporary jobs. My belief was that I could do better in South Africa. I started thinking that my journey to South Africa had to be mine and mine alone not with a wife and a child because I was going to be an illegal immigrant. I met my ex-wife, who is also blind at the University of Zimbabwe while we were both studying there. She is now a teacher and she is currently working at a school in Mrehwa in Zimbabwe. My child now stays with my brother at Manyame Air base. My brother has sons only so he was happy to adopt my daughter after my divorce, and my ex-wife agreed to the arrangement.

When I left Zimbabwe to seek for better jobs in South Africa I decided to go via Botswana so that I could first check things out there before going to South Africa. It was also during that time around 2002 when politics in Zimbabwe became so difficult to a point where even family members could not see eye to eye due to differences in political views. I had different political ideas from my brother so we started fighting. In Masvingo where I come from, the situation was so bad that people would burn the houses of people who supported political parties which they did not like. At that time the salaries of people who were employed were only enough to take them to and from work (transport) and the salaries could not pay for anything else. So, I

can just say the bad political and economic situation in Zimbabwe at the time pushed me to cross the border into South Africa via Botswana.

Upon arrival in Botswana by bus, I went to the United Nations High Commissioner for Refugees (UNHCR) officials and I told them that I had come to seek refugee status because of the political problems that were back home in Zimbabwe. Because I am blind they felt sorry for me so they housed me at a lodge called TIN which is in Gaborone for a fortnight before they took me to a refugee camp in Francistown close to the Zimbabwean border because the cost of the lodge was becoming too high. The refugee camp administrator interviewed me and saw that I was totally blind. He then queried how I was going to manage to survive in a refugee camp because the toilets were pit latrines which could be dangerous for a blind person. He was worried that if anything went wrong with me, he was going to be fired from his job. He then sent me back to the Gaborone UNHCR office, after he had called the officials in Gaborone to tell them that there was no space for a blind person in the refugee camp in Francistown. Because I was an unaccompanied blind person, the argument was that there was no one to cook for me. At that time refugees in the Francistown refugee camp were receiving monthly food hampers, and they would prepare their own meals. That time I decided to use my disability to my advantage so I chose not to tell the refugee camp administrator that I could actually cook for myself. No blind person had ever stayed in the refugee camp, so the Camp Administrator was confused as to how best to deal with me. I saw that as a chance for me to be spoilt by an “ignorant” official and system. The camp administrator gave me money so that I could go back to Gaborone to the UNHCR offices. My bus fare was paid up and I also got pocket money to use during the journey. When I arrived, the Gaborone UNHCR office had already booked me into a hotel for two days after which I was relocated to a school for the blind called Mochudi.

My big problem was getting a job because I did not have refugee documents. In Botswana interviews for applicants of refugee status are conducted in the refugee camps and if one is successful, he or she is given the proper documents immediately. But because I was living outside the camp, I was not interviewed, hence I could not get the refugee documents that would enable me to legally look for a job. Officials at the school started to complain that they were supposed to be catering for students and not an idle adult blind person like me. I also started to feel uncomfortable because I was way past the age group of the students and the activities that were taking place at the school for the blind. One day I woke up and decided that enough was enough, so I told the school officials that I was going back to Zimbabwe. When I

arrived in Zimbabwe I did not even think of going back to my home, so the moment I reached Bulawayo, I got on another bus that was heading for South Africa.

At the South Africa-Zimbabwe border I declared that I did not have a passport, a move which my brother who is a flight lieutenant with the Air Force of Zimbabwe had once advised me to do. I told the border officials that back home things were not well and I had come to seek refugee status in South Africa. In early 2002 things were bad in Zimbabwe both politically and economically so the officials understood my case and granted me entry into South Africa on condition that I was going to be accompanied by immigration officials to see the Mayor of the Musina Province. After hearing my story the Mayor felt sorry for me. He bought me food and gave me money so that I could travel to the UNHCR office in Pretoria where he believed I would get the most help. When I reached my destination I did not know where the UNHCR offices were so I asked for directions from the police and they offered to accompany me to the offices.

At the UNHCR offices I was interviewed by the Commissioner who made it very clear that he was unable to help me until I get the refugee documents. He called a human rights lawyer called Jephta and asked him to assist me. Jephta accompanied me to the Department of Home Affairs in Marabastad in Pretoria where I told my story. In less than 10 minutes I was offered asylum status documentation and Jephta the lawyer accompanied me back to the UNHCR offices. The officials arranged for me to be housed in a hotel for almost seven days after which they asked me to move to an apartment in a block of flats in Pretoria opposite the Bosman train station. This block of flats housed orphaned children of refugees who were being looked after by a Rwandese couple that was on a UN salary roster.

Every morning I would have my breakfast then go into town to look for a job till lunch time when the mid-day meal was due. After having lunch, I would return to town, only to come back in the night for supper, then I slept. I continued with the routine for about three months, until I got a job at an organisation for blind people called Etrereni training centre in Garankuwa opposite George Mukharli hospital. As an educated person I sought a decent job, but they made it clear that no such job was available for migrants with disabilities and I had to do just about anything there, from cleaning the grounds to washing dishes. The week ended, and I expected a good wage that Friday only to be given R150 - I laughed when they told me that the wage was not going to be increased.

My other blind work mates were South African nationals, so they were also receiving grant money and were staying close to the organisation, so they were not spending any money on transport, a cost that was weighing heavily upon my shoulders. It became clear to me that this job was just meant to keep the blind people busy and not necessarily to reward them with good salaries. At that time the monthly grant was R720 per person, but the situation was different for me as a blind migrant because I was not getting the grant. I was told that I could live at the organisation, but they would deduct accommodation fees from my weekly wage of R150. However, it turned out that the accommodation was fully occupied so the only option was for me to commute from where I lived to my workplace and back.

After working for about three months, I was unhappy, and I felt like returning to Zimbabwe. But then I decided to move to Cape Town. I presented my case to the UNHCR Commissioner in Pretoria and he wrote a letter for me to take to the Cape Town Refugee Centre (CTRC). In addition, he also bought me a bus ticket and gave me R1000 pocket money. Upon my arrival in Cape Town, I visited the CTRC and the officials assisted me by assigning me free accommodation at a camp where they house homeless persons. I later got a menial job at an NGO called Global, and I was earning enough to take care of myself, but the NGO closed due to lack of donor funding. I struggled to get a job, so I began to beg in the streets; the “job” was profitable, but I got frustrated after realising that the person who assisted me to beg was making more money than me. For example, a person may want to give me money but if the traffic light turns green, the person may wave at my assistant to go to him on the other side of the road to get the money. But then the assistant would not tell me the right amount of money that he would have been given. Instead of a R100 he would lie that he was given R10 and he would pocket the rest of the money. Some people would put coins in the plate that I would be carrying and give my accompanying assistant bank-notes so that the notes are not blown away by the wind. But then the assistant was dishonest, because he would keep the notes to himself, thereby leaving me to believe that all we have been given are coins.

Employing an aid is not difficult since in the communities, where we live, there are people who have experience walking with blind persons even in trains. The verbal contract requires that I share equally the daily proceeds, yet the reality is that the aid usually pockets more money. Days were never the same but on a good day I could get R1000. One day some White person gave me a tin and said that I should only open it once I got back home because he had blessed

me. When I opened the tin, it had over R2000 plus what we had collected the whole day. Fortunately, by then, my aid was my girlfriend who is also from Zimbabwe so there was no need to split the money.

I only stopped begging when I was offered a general hand job at an institution for the blind in Khayelitsha, but again I was earning very little money. The donor funds were coming in for the project, but they were being squandered unprofessionally by the officials. I could not question the way they were running the place as I felt they would simply tell me that they are South Africans and I am a foreigner, hence, a second-class citizen. The only thing that I was getting for free at that institution for the blind was beer; the officials would buy a lot of beer and we would drink and take some beer home; that was nice because I love beer.

Things changed when a refugee organisation called Scalabrini was formed by some Italians. They employed me as a Receptionist because they were looking for someone who had experience working with refugees. Scalabrini successfully advocated for me and my colleagues from Angola, Rwanda and Congo to receive grants, but only after a two-year court battle. A petition was filed with the courts and in the same way that South Africans do, my colleagues and I began to receive grants of R2000 per month. Apart from the grant, I sometimes proof-read braille books on a part time basis but the income is not guaranteed because they only call me to do the job when there is a need.

I can't say I have earned a lot of money in South Africa, but I can just say that I have managed to survive. I have not remarried but I have just had several girlfriends over the years. I do not send money back home because my daughter is fine in my brother's custody, so my money is just for me. My major challenge now is with the documentation which needs to be renewed every two years, it's just a headache. I wish they could just give me permanent residence because I have been here for more than 15 years now.

Some people have challenges with Xenophobia, but I have not been affected, because I now speak fluent Xhosa (local indigenous language) so people may think I am a local, yet I am a foreigner. In 2008, I survived Xenophobia because I had lots of support in Langa where I was staying, because I was very popular with the locals. I have only been robbed twice by Coloured people for all the time I have stayed in South Africa. In Mitchell's plain I was robbed, when I

was coming from work, by people who knew me. They asked to escort me, and I was happy, but they put a knife on my neck and then they stole my money from me.

I should not be mistaken for a racist, but here in South Africa Coloureds and Whites are more tolerant of blind people, but very seldom do Blacks do that. The only problem with Coloured people is that once they help you to cross the road they expect to be paid money and if you don't pay they rob you or insult you. One day I was coming from work, they waylaid me and put me between a building and a truck, then they took my cell phone and my money, but life just must go on. I can just say that's my whole life story. I don't think I have anything more to say. I am hurt by the fact that in-spite of my University degree; South Africa has failed to give me a job in the formal sector because I am a visually impaired migrant. In future, maybe someone somewhere will give me a job that is relevant to my qualifications.

#### **4.3 Mugwati's story of begging for a living**

I was born in 1967 in Zimbabwe so now I am 51 years old. I have seven children with my husband who is also visually impaired. I got blind when I was four years old after suffering from measles but my mother told me that she did not think about measles at the time. My mother started thinking that it was witchcraft. She took me to traditional healers and religious prophets but they failed to cure me of blindness. My husband who is also blind and I live here in Cape Town with our youngest child because our other six children are now grown and they are doing their own things here in South Africa but in Johannesburg. My husband and I came to South Africa in 2002 but we did not have the correct documentation for migration but we managed to make our stay legal in 2005 after acquiring passports.

I left Zimbabwe during that period when the local currency became worthless and it was difficult to find food to eat. At that time my husband and I would go and try to queue for mealie-meal or cooking oil. We were always met with harsh words. Others would even say that blind people should not get mealie-meal because they will sell it. How could I have sold mealie-meal when the limit was a 10kg bag per family? Why would I re-sale the mealie-meal as though I do not eat or as if I do not have children to feed as well? Things were very bad so we decided to come to South Africa to search for a better life.

In Zimbabwe we were surviving through begging. We would go from bus to bus in major bus ranks or move around in areas where there were a lot of people so that we could beg and get money to support our big family. We taught our children to take begging seriously. So, for example, they knew that if they were starting school in the morning up until noon they would just come home to change their school uniform, eat, and then get on a public-taxi to go to town to beg until six or seven in the evening then we all came back home. In fact, I can just say we have successfully raised our seven children through begging.

When we came here in 2002, it was me and my husband. We did not have passports so we used illegal means to enter South Africa. Learning from others, we entered South Africa through the Limpopo River but there are people who waylay illegal immigrants and rob them of everything. We fell victim to the robbers and we lost everything that we had. After earning some money through begging in South Africa we went back home to obtain passports and thereafter asylum papers so now we travel safely. We stayed in Johannesburg until 2009 then we decided to come to Cape Town.

We moved from Johannesburg because we saw that there were now too many blind beggars in Johannesburg so the money we were getting was now low so we thought another city would be better. All we have been doing since we got to South Africa is begging and we are still begging. We beg because we know that there is nowhere we can be employed, we are not educated, and we have no skills. As blind people, police do not harass us, but our accompanying children always have problems with the police especially if they wonder around without us. It is only after the police bring them to us to confirm if indeed they are our children that they are released. If they are lucky to be in possession of a phone, they call us and we talk to the police then they are released.

Our children stayed in Zimbabwe whilst we were begging in South Africa but they could not write their final high school examinations because we did not have money for examination fees. So, we just asked them to join us in South Africa and help us to beg. Some blind persons who do not have children face the trouble of finding children from elsewhere to help them beg but as for us we beg with our children. We made sure that before our children came here to South Africa they had passports then we organised asylum papers for them once they arrived. This we do because we do not want our children to be arrested by the police because, can you imagine what a blind person like me would do if their child was arrested or deported?



The beauty of life in South Africa is that when we get sick we are treated at any government health facility for free without many challenges. The only problem is that the nurses complain that people from other countries are using and finishing medicines that are meant for local people. It's clear that they do not treat us well because they shout at us saying we are foreigners. Generally, the treatment we get from local people, though not from all of them, is very bad. It is difficult to complain about how we are treated in South Africa because we are foreigners. Whenever we visit the clinics it is as if we are going to die of while waiting in the queue. They don't care that we are disabled. They keep us waiting whilst they have tea and chat with each other. It is as if we don't matter. We stand in the queue for hours and sometimes the whole day only to return home around seven at night without having been attended to. If ever we are lucky to see the doctors we are asked to come the following day of which we will have to join the queue again.

We also once tried to apply for grants here in South Africa with the help of some people but they told us that the big bosses had disqualified us because we are foreigners. Foreigners do not get grant money because they say we do not have South African IDs; surely what is that? I think it's nonsense. But then, since we have been here, there is an organisation for blind people that we once heard of but they never showed up to meet us. You are the first person whom we have met to tell our story. At one point we were recognized as "refugees" by another organisation and we got a few Rands for nearly a year but with time the asylum status was rejected and they said they wanted "proper" refugee status and that was the end of that. They said the asylum documents we had were no longer useful maybe because we were now too many blind people here in Cape Town, I don't know.

I am hurt by the fact that a blind person is seen as nothing even in Zimbabwe. People can gather to eat, even the government can distribute food packages without even recognising that we exist. It is only towards elections that politicians approach us and promise us "castles in the air." Even if I was to be given a piece of land to build a house, how do I build when I do not have an income? The government of Zimbabwe should learn to build houses for blind people. There is quite several organisations that work with blind people in South Africa, only that they cater for their own people. You will never see a South African person begging at the traffic lights because they are well taken care of through grants and assistance from these disabled people's organisations (DPOs) and their government.

I have found South Africa to be better than Zimbabwe. The money that I and my husband get from begging is usually more than what we got in Zimbabwe where we could not save anything. At least we can save and send money back home so that our children could go to school although we failed to raise examination fees. It is my desire to see the Zimbabwean government giving grants to disabled persons because as it stands it's not easy to survive. I personally would be thankful if the Zimbabwe government would give us funds for cooperatives so that I can also access my cooperative money and a place to set up a small business. If I get both the grant and the cooperative money, I can be able to do something better and earn a better living in my own country.

The government of South Africa should also understand us and decree that there is no need for disabled migrants to have permits because no one is willing to give us employment since we are both blind and migrants. We cannot even compete on the job market so we just go and beg at traffic lights without disturbing anyone. Whoever is willing just gives us money and food and those that do not want to give us anything, they simply drive off. Now my six children are grown and they are doing menial jobs. Hopefully for the future we will be able to raise money for this young one to write exams and maybe go to University. I also think that it's important for blind people to have their own houses because renting is difficult. I would like to work hard so that I can have my own house in Zimbabwe. I don't think the government will build the house for me so I just have to build the house for myself. That is all I can say about my life and thank you for coming to talk to me.

#### **4.4 Chenai's story of aspiring to set up a massage parlour**

I was born in 1963 so I am a 55-year-old mother of one child, a daughter. I lost my vision at the age of five after I had fallen sick with measles. My mother told me that most children of my age were affected by measles at that time because that is when the civil war was going on in Zimbabwe and there was a shortage of medicines and immunisation programmes in the country. But although my mother knew about the link between measles and eye sight, she still believed that I could be healed of blindness by traditional healers. So, we started to move from one healer to another, but all of them did not have the "power" to restore my sight. I attended

schools for the blind. I began my primary school education in Kadoma at Jairos Jiri Centre and then proceeded to Capota School for the blind in Masvingo for my high school education.

After completing four years of high school education at the age of 17, I applied for a job. I was driven by the excitement of being a school leaver and wanting to experience the world of work. I was offered a job at my former high school (Capota School), so I started to make writing board chalks whilst my colleagues were weaving trays and baskets, a job which I also ended up doing. The items were sold to various local buyers to fundraise for school activities. I worked at Capota School for the Blind, until the time when the local currency in Zimbabwe started to lose value, which meant that our salaries were delayed, and, in some cases, we went for months without pay. After some months we would then get back-pay which by then would not buy anything; because of hyperinflation, the money would have lost value. The employer decided to retrench some workers, so I was also affected. Along with others, I was given a small amount of money as a retrenchment package and I went to stay with my family in Chivhu. At that time, I was 37 years old.

Things got worse in the country. Basic commodities became so scarce that I would travel all over the country searching for them. Wherever I would hear that mealie meal or paraffin was available in some part of the country, I would go there to buy. If paraffin was said to be available in Masvingo (160kms away), I would go there and buy it in large quantities to resale at a profit, on the black market in Chivhu when I returned. The same applied to basic commodities such as sugar, cooking oil, soap and bread flour. But in the end the shortage of such commodities became worse and running the business was harder. I therefore decided to come to South Africa in 2004, after hearing from friends that life was better in South Africa; at that time, I was 41 years old.

Since I did not have a passport, I asked others about how people enter South Africa and I was told that people simply use the Limpopo River. I therefore came to South Africa via the river. But the long walk to and from the river is a painful one and at that time my baby was strapped on my back. With other people who did not have passports, we successfully crossed the Limpopo River wiping our children's mucus from their noses, getting pricked by thorns and blood oozing out from our skins, it was hard, but we made it to Johannesburg. After crossing the river, it was a long walk again and this time we were told not to make any sounds as it would attract robbers. However, one way or the other the robbers found us and robbed us. The

point is that even if I am blind, I need to look after my family. I want the best for my child, so I must use my brains, and earn a living, that is why I came to South Africa.

When I got to Johannesburg in 2004, I went straight to the traffic lights and started begging, moving to different traffic lights. Sometimes I would just sit in one place and beg. The people in South Africa were very helpful. Johannesburg was easy for me when we started begging there because I used to make a meaningful income. Later, the place became flooded by other blind people, so in 2009 and with my friend, we moved to Cape Town after five years. When we arrived in Cape Town the place was kind to us; money was good, and people were so generous. Now things have become so hard, there is no more money here and we are hardly making enough. I do not know why things have become so difficult. I think the cost of living has also gone up in South Africa. People do not have much to spare so they cannot give much to blind beggars. In 2010, I decided to send my daughter back home to Zimbabwe so that she could attend school there, whilst staying with my mother, while I continued to beg for a living.

I remember that in the process of begging in the trains there was a White man who used to see me, and he developed a liking for me. He used to give me money until one day he told me that there was a place where they were offering massage courses and that he was willing to pay for me to attend the course. I managed to complete the course and I got my certificate but getting a permanent place of employment is difficult because I am blind. There is a place I usually go to once a week every Friday to massage people, but the money is not enough. To even think of getting a place to do private practice, it is not easy because I do not have the documents needed for registration such as the South African ID, besides, they don't like disabled migrants in business here. In addition, blindness is not a good thing because I cannot compete and win against people who can see; sighted people regard blind people as useless people. However, where I go to massage, at the place where I work one day a week, the clients seem to have accepted my massage and they are comfortable with my blindness.

There is an organisation that specialised in the welfare of refugees that once came and gave my colleagues and I grant money of about R1000 per month for about eight months until the programme just disappeared. It must have been a group of social workers who identified migrants with visual impairment. They held meetings with us in Wynberg and we opened bank accounts with Bidvest bank using our asylum documents that we had at that time. For some months we would get something but the last time they talked to us we only got face towels and

that was it. In 2011 they stopped assisting us altogether. No one gave us an explanation as to why we were no longer getting help. The operation was secretive and up to today we do not know who those people were; they appeared and disappeared.

But that assistance was very helpful because we do not get grant money from the South African government due to lack of relevant documentation. In the process of begging some people shout at us and call us all sorts of names, it is not easy to please some of them. If you dress up well and get a nice hair style, some people say that I am pretending to be blind and I am a con-artist because I look well. At the same time, I cannot go on the streets to meet people dressed like a piece of junk, so I just accept it and take in those comments but it's very hard. I use my young sister as an assistant, but the money is not enough.

When it comes to accessing health services I always pray to God that I do not get sick because the treatment we get at the hospital is very bad. There is no special attention for disabled or blind persons at all, maybe because we are migrants. Sometimes you can be in the queue with everyone else then you hear wheelchairs. When you ask the person next to you they will tell you that its disabled people on wheelchairs who have just arrived and are being attended to. All this happens while we are in the queue and I tell you it is quite painful; disabled people of this country are treated well, but we are not treated well. Because I am blind, and I am not a local I come last. Some people just dislike us, which is why sometimes we are victims of xenophobic attacks.

The first xenophobic attack that was close to me, happened when I was still staying in Khayelitsha in 2012. So, I heard about it when I was coming back from work (begging). The house where I stayed was near the police camp, so I quickly rushed home with the help of the police and took my daughter and a few things then we went to stay at the shelters that had been availed to migrants by the police. In those halls there were problems. We were competing for food handouts, and for using the toilet and many other basic services. We ended up going home to Zimbabwe in 2013, but when we got there we found that things were still bad, so it was difficult to earn a living. I tried to revive my tuck shop business, but it was hard. Begging was even worse because most people were suffering. I decided that I would travel between Zimbabwe and South Africa since I now have travel documents, just checking out things to see what would be best for me. After a while, when I saw that the xenophobic attacks had died down, I decided to come back to South Africa.

Yes, South Africa is better. The food is cheaper, and I get more money, but the money is never enough for me to make any real progress in life. I send money back home to pay for my daughter's education. When I first came here, I brought her with me, but I later decided to send her back to my mother for schooling. I cannot get enough money to build even a small house for myself on the piece of land which I got in Zimbabwe. I want my future life to be better, so I am hoping that I will get more money here and go back to Zimbabwe to build my retirement house. Anyway, that is all I can tell you about my life. That is my story, thank you for coming to talk to me.

#### **4.5 Kativhu's story of creating employment for South African nationals through begging**

I was born in 1959 and now 59 years of age. I was born with my sight. I became blind one day when I was about seven or eight years of age, after my eyes had been painful. After a few days I completely lost my sight. I grew up not understanding what had happened to me. It is only when I had grown up a little that they explained to me that I had suffered from measles. In 1973, as a child, I was enrolled at Masase primary school for the blind, in Mberengwa. I dropped out of school when I was in grade five. I just woke up one day feeling like school was not the thing for me and just decided not to go. My parents did not force me because they also thought that school was useless for a blind person. The woman that I later married, is a blind girl that I first met at this school. We got separated when she moved to another school and met later in life. Since we were now adults we got married have five children.

My first son was born in 1985. He is here in Cape Town doing his own thing. My second child was born in 1987 and also doing his own thing in Johannesburg. My daughter who was born in 1989 is here in Cape Town and working as a house maid. From that time, I took a break. I then fathered another child, a daughter in 1998. She also works as a house maid. In 2002 I had my last-born son who is still going to school. The reason I decided to come to South Africa in 2003 was that back home the money had lost value. There was inflation and the political situation was bad. I came here to search for a better lifestyle. The people here are generous considering that I have been able to raise money through begging. At some point I was using the money that I received from people to pay school fees for some of my children back home. For that I am very grateful to the people of South Africa.

I often go back home to visit my wife who is staying in Zimbabwe with our youngest child. I have a passport now hence travelling is no longer a challenge. I also send money back home. Life has been made easy now that we have the money sending systems like “Mukuru.com”. At times I use cross border bus drivers to send the money. Buses charge 10% of the money I send, and the recipients just collect it when the bus arrives in Zimbabwe. I keep sending them money because I am a family man and my last-born son is still in school. He needs all the help I can give him to finish school. I am careful not to spend my money on things like alcohol and prostitutes because those are the things that can empty a man’s pocket. I love my wife so much. I cannot even cheat on her because I know that infidelity comes with diseases such as AIDS and poverty hence I do not want to expose my wife to all that. After all my wife at some point was staying here with me so she trusts me. She only went back home after she fell and broke her leg. We then agreed that since she could no longer manage to beg, it was best that I work and take care of her, whilst she is at home in Zimbabwe.

Begging is all I have done since arriving in Johannesburg in 2003. I have not had a chance to do anything else. As for grants, what I understand is that the government of South Africa values citizenship so if one is not a citizen one cannot get a grant. I survive on the money I am given in the streets. Since you are not a journalist I will tell you how much I can make while begging. If you go and publish it like a journalist you will have done me wrong. On a good day, when God would have opened the doors for me, I can make as much as R500 but on not so good days I make less. However, there is never a day that I can fail to raise R100. I do not know of any organisations for disabled people. None of them has talked to me in any way.

When it comes to employing an assistant, it’s not difficult at all. I live in the same area with most of them. We just meet and discuss business terms. An assistant can actually come to me after seeing that I am struggling by myself. If we agree on terms then he can work with me. For the past eight years since 2010 I have worked with this same person. In the beginning we used a percentage rate to share what we would have been given. As a group of blind persons who are here in Cape Town we then agreed that the percentage system was not fair. We considered that these people are also doing the same job and working the same hours. Eventually we agreed that we share the money equally amongst ourselves and our assistants. Since 2010 I have not had a problem with my assistant. We share the money 50/50.

Some time back in the days, there was once an organisation that assisted us when we had asylum papers. I don't remember the name of the organisation, but it had to do with refugees and it gave us some grants though it wasn't for a long time. I have no idea what happened to them and I never made a follow up since they are the ones that would come to us and we never went to them. When they just stopped coming I continued with my "work" of begging because even when they were helping us, I did not stop coming to the traffic lights to beg. The way it works is that as a blind person, you just pick a place that is good for "business", then you stand there and beg.

When I am not at the traffic lights I just stay here at home listening to the radio, at times playing music. We are quite several blind people here. If you just go at the back of those buildings you will see some of the blind people there. That is how we network and at times when I am relaxing at home, I relax with friends who are also blind. This place however has its own authorities who are responsible for it. The Law Enforcement officers often come to harass us when we are begging at traffic lights. The major reason they give us is that it is dangerous to beg from the traffic lights because there is a high risk of us being knocked down by cars. Generally we do not have many problems with them.

But if there is a chance that you can talk to your bosses at your University, may you please put a word out for me that I need a white cane that reflects my blindness to others. Even when I am walking in the night white canes reflect so that I do not run the risk of being run over by cars on my way home. I will be thankful if you can get me a cane that I can fold. Unlike back then when I used trains, I now use minibus taxis to come to work. Trains for some reason can no longer be relied on and in minibus taxis there is no space to put my cane. I end up becoming a problem to other passengers so a cane that I can fold is better.

It is my wish to spend all my time with my family, but it is not possible because I have to work. I stay in Khayelitsha site B and have not changed places since 2007. My landlord he lives at his work premises and just comes to collect his rental money. It is a huge house and only foreigners stay there, each person or family in their room. As for now all the rooms are full. The reception I get from the community is very good since they now understand how other blind persons and I live. We have become one big family. At times they call us magweja<sup>9</sup> which is a bad term to mean foreigners, but we have come to identify with that name and it doesn't bother us anymore. I am not going to stop "working" because I believe that it is only through



hard work that my life and that of my family will be better. How can I build a house for my family in Zimbabwe if I don't work? I believe that hard work will enable me to achieve my dream in future. I can just say that is my whole life story, I have nothing more to say, but I am happy that you came to talk to me, I hope to see you again in future.

#### **4.6 Matemba's story of aspiring to enter the formal labour market**

I was born in Zimbabwe in 1963 so I am now 55 years old and a mother of five children. My parents told me that I lost my sight at the age of two or three years because of measles although I don't know anything about what was happening at the time. I attended primary school up to grade seven at Jairos Jiri School for the Blind in Gweru. At the age of 13 my parents ran out of money to send me to high school and I just stayed at home. I went to Bulawayo for vocational training at the age of nineteen where I learnt to weave baskets and chairs, cooking and braiding hair and I passed. It was then at school in 1983 when I was 20 years old that I met a sighted man who impregnated me and sent me to live with his parents in his village. I stayed there for about seven months during which I gave birth to my son. The father of my child never came to see me and the baby. In December of that same year (1983), his parents asked me to go where he stayed. They escorted me and my son to his house and "dumped" us there. He did not welcome us. He told me that he had a sighted wife who was coming to live with him in a few days and instructed me to go to my rural home. I felt very inferior because of my blindness. I thought I could not compete with the able-bodied woman that this man had found. I left heading back to my village of birth.

In 1987 I told my mother that I had decided to go back to Bulawayo to look for a job using the skills I had learnt at the vocational training centre. She warned me not to look for the man who had impregnated and dumped me. That man got news from people that I was now in Bulawayo and he came to me trying to reconcile with me but I turned him down. I started working at a Jairos Jiri workshop in 1987 at the age of 24, doing all the things that I had been taught at the vocational school. Every month end I would get paid and the money was good for me. I was getting paid on commission and as a hard worker, I was earning enough money to take care of myself and my child. At around the same time (1987) I met a blind man who later married me and became the father of my four children.

The economic situation in Zimbabwe became very bad. The Jairos Jiri centre struggled to get raw materials for us to use. My friends and I decided to leave as there was no more work for us to do. We then got into full time begging in Victoria Fall, Zimbabwe, where we targeted tourists. Sometimes we were returning home occasionally to see our families. Other blind people at that time were already coming to South Africa. After other blind people advised us that it was better here than in Zimbabwe, my husband and I decided to come to South Africa. We did not have passports when we came here illegally in 2004 when I was 41 years old. Some paid some South Africans who then assisted us to illegally cross the border by creating a passage for us through a fence which they had cut open. It was not an easy journey as we ended up walking a very long distance in the bushes to a place where we would get the transport that would bring us to Johannesburg. Imagine going through a fence illegally into a foreign country then having to walk through a bush for a long distance in the night and we are blind. It is painful. The only thing that kept us going was the hope of a better life.

Finally we got here to Cape Town. I have not had any problems with any tribe, nationality or race in this country. The people here tend to treat blind people very well. We began the life of begging although we have been getting very little. If you spend a week in the house without coming to the traffic lights to beg that's when you will ask God: "how am I going to feed my family? That is why I have to always be here otherwise we will starve to death." My husband got sick and died in 2008. I must soldier on with searching for a better life so that I can provide for my family. I struggled to get papers in the beginning, but I later got a passport and asylum papers.

The big problem I face as a blind person is getting a place to stay. Landlords usually tell us blind people that they cannot accommodate people who cannot see. The problem is not unique to South Africa because we experienced the same thing even back home in Zimbabwe. In 2005, my husband and I were allocated a piece of land by the government in Zimbabwe to build a house in Cowdry Park, in Bulawayo. I want to build my house with the little money that I save from here, so that one day when I go back home on retirement I have a place to stay. The house is still not complete, I am struggling to build it because there is still a lot of work to be done on it. There was a man I had trusted in the beginning to manage the building of my house. I used to send him money and he would lie to me about the progress of the house. At one point he told me that with all the money I was sending him my house was now at window level. I got so excited and decided to go back home to celebrate only to find out that the house was only at

foundation level. I begged him to give me just bricks and door frames so that I could build a single room for me and my children to stay and he refused. The life of a blind widow is not easy.

I once heard about government grants but since I do not have the right papers I cannot apply. I think they want South African IDs - asylum papers do not work. When I used to sing and beg in trains I met a man who advised me to go to the nearest Home Affairs office. I went to Khayelitsha near where I stay. I was received well and told to get into a hall to fill in some forms for refugee status. I submitted all the papers which they wanted and when I thought things were starting to move, everything just went quiet until my asylum papers expired. Now I do not have any documents that can qualify me for anything, let alone a grant. I only have my passport which is valid.

Because I do not have papers for asylum, I am limited to staying in South Africa for three months at a time. But when I cannot go home there are buses or truck drivers that my friends and I know. We give them our passports to go and get them stamped at the boarder so that it reflect that I have gone home and returned. The money I make is not enough. Before I can spend, first I remove money for rent plus the money for my passport to go and get stamped. Only then can I remove money for food and other things.

I have a sugar disease (Diabetes) which causes my feet to swell. That's the reason why you see me sitting down today because they are swollen and hurting. Whenever I get sick, I go to the clinics or hospitals were I am treated well. I remember last year my legs started swelling and got painful. I had to be admitted in hospital. I was admitted from the 26<sup>th</sup> of September to the 12<sup>th</sup> of October 2017 and did not experience any bad treatment from the nurses. I can confidently say I was well taken care of. However there is only one thing that I wish I could have and that thing is a job.

If I could get a job and work like I used to do before things went bad in Zimbabwe, I would be very grateful. I have resorted to begging but that is not the way that I want to live. In all honesty I do not like or enjoy begging, but it is the only means I have of survival right now. I do not have any other way. There are some jobs that as a person who cannot see I can also do like packing goods or packing clothing suits in those plastic packets. Do you think I can fail to do that? I long to have a job. If someone can teach me how to do any job then I will do it and earn

a decent living. Even my children and grandchild can also be proud of me unlike when I am just here begging. Yes! I have started building my house, but you see, it is important for me to complete the building so that we can go to live in it. Anyway that is my story, I am happy that you have come here to talk to me about my hard life.

#### **4.7 Jabulani's story of begging albeit vocational skills**

I am a 51-year-old man born in 1968. My sight began to diminish when I was seven years old after I fell sick with measles. The doctors told my parents that I was having cataracts that needed to be removed when I was a bit older. For about seven years my parents consulted religious prophets and traditional healers trying to find a quick solution while waiting to be operated on. Nothing changed and my eyesight continued to deteriorate. At the age of 14 my parents took me back to the doctors who said it was too late for my sight to be restored. In addition they said the traditional healers had further damaged my eyes. My parents had concentrated on taking me to traditional healers and religious prophets so that I could be healed of blindness, whilst school was passing me by.

I went back to the village and continued to stay with my parents until my father died when I was 18 years old. I started to go to the Assembly of God church where the church people suggested that I go to school at Jairos Jiri, an organisation for disabled people. The school then said that I was too old to start Grade One because I was already 18 years of age and I had never seen the door of a classroom. The Jairos Jiri people said I could do a vocational course. However, that was in 1991 when there had been a strike at that school and property had been vandalised. They said they were not enrolling new students anymore on a full-time basis for vocational courses. It was only in 1993 that they accepted me to study full time for a two-year programme. I completed the course for weaving baskets, and making sofas and chairs at the end of 1994 and I passed.

Upon completing my studies, I joined a project called Zimbabwe Brush Ware. This project specialised in making brooms, brushes and different types of car, to home and office mats. I worked and earned a monthly salary while also learning and perfecting the art of broom and brush making. I worked there for five years until year 2000 when our customers started complaining that the materials we were using to manufacture our products were now of a poor quality. The country had started going through difficult times which therefore meant that our operations were no longer the same as before. The project closed and I went to another similar

project for the blind from 2000 to 2003. By 2003 things had stopped functioning properly and getting paid became a challenge so I also left and decided to try something different. I started buying various products that included bath and wash soap for resale in farming areas where people did not have easy access to basic commodities.

Looking back, I see that the support I had when I started working in 1996 helped me marry my wife who is sighted. I had my first child in 1997 and my second child in 1999 then my third child in 2005. In 2004 before my third child was born my informal business of buying and selling was no longer viable. This was caused by cheap soaps that were coming from Mozambique and were being sold at a very low price compared to my price. My market was in Chipinge, which borders Mozambique, and that made it impossible for me to compete with goods from across the border. In 2005 things started to get worse and I could hardly make ends meet. What even made the situation worse is that at that time the government started destroying people's houses, saying that all structures that were not approved by Council were illegal and they should be destroyed. Unfortunately, I was a backyard dweller and the house I lived in was also destroyed. I ran out of options and relocated to my aunt's homestead in the rural areas with my family. By then I no longer had a source of income and life had become tough. I heard from friends that life was better in South Africa and decided to leave home to come and find work here in South Africa.

I travelled by bus to South Africa, together with my wife and a friend who is a wheelchair user. I left my children in Zimbabwe under the care of my mother. I arrived in South Africa, Johannesburg in 2005 and I started to do the "job" of begging until 2008 when I moved to Cape Town. I was unable to find a job of weaving baskets and making brushes and brooms. Life in Johannesburg was not easy because I stayed at a place where rent was paid on a weekly basis, so most of the money that I earned from begging was going to rentals. I was granted asylum status in 2005 and that is the identity document I still use today. Upon arriving in Cape Town in 2008, I got a place to stay in a high-density suburb where I was paying rent monthly, so life was better, at least I could save some money to send back home to my children.

It is through this begging that I have managed to send my children to school, feed and buy them clothes. I do all this so that my children can get an education. They can get employed and they will not have to do the same work of begging in the streets that I am doing. My first-born child is now taking a degree course at a University in Zimbabwe, the second one is in the last year

of high school and the third one who is the last born is in grade seven now, which is the last year of primary school. My first-born child got lucky and was awarded a scholarship by some people. I don't remember their names. Now I only worry about the younger ones for school fees. I am also lucky to have my wife here with me whom I walk with when I am begging in the streets. She does not have any disability, so she sees everything. Whatever we get we use it towards the upkeep of our children as well as taking care of other things that we need to run a household. We don't go back to Zimbabwe regularly. Our visits are spaced between three years so we send money back home to our children. The oldest one is staying at University and the other two are living on their own. They are coping because the other one is now 17 and the other is 13.

When we meet here in Cape Town as foreigners alone there are no problems. We get along with every foreigner here but the problem is with people from here, who do not see us as anything. When you get into a public taxi at times they say a lot of hurtful things. Some say what is a blind foreigner doing here, why could he not just have stayed back home and get looked after in his home than coming all the way to our country to irritate us? It is only that God chose this life for me. I have lived with these insults for a long time and now just choose to ignore it and not to keep it in my head.

The asylum status I have, has been of some use because in the past when the CTRC from Wynberg came to us they required to see the asylum papers before they could give us assistance. They started by giving us R800 per month for the first three months then they stopped for a while. Thereafter the money was reduced to R300 per month for reasons that were never communicated to us. For us it was still good money because it helped us to supplement what we were earning in the street through begging. For the past four to five years the CTRC has been telling me each time I go there that they no longer assist people from Zimbabwe but rather countries like Burundi, Nigeria, Somalia and the Democratic Republic of Congo (DRC). I do not know why Zimbabweans are being left out, maybe because Zimbabweans are now too many in this country.

I have had health problems twice since I got to Cape Town. The treatment was good, and I got free tablets. I cannot complain about the way I was handled except for the fact that unlike back home where disabled people are given preference and made to jump the queue, here you stand just like anyone else. You can get to the clinic and spend the whole day before you are treated.

With this kind of job of begging, you cannot afford to spend the entire day at hospital and not come to work because my daily income is greatly reduced.

We do not have problems with the police and law enforcement agents when we are begging. The only problem is that when I go to report a crime, maybe someone has stolen from my house or I have been robbed, they first ask which country I come from. Once they know that I am a foreigner they ignore me, so I report nothing. If they see that the thief or robber is a South African they do nothing. They protect their own thieves and robbers. One time I was robbed while going to my aunts' funeral who passed away while living here in South Africa. The funeral was near the airport next door to a local long-distance bus garage. I don't remember the name of the garage. We were a group of people who had hired a car to go to the funeral and as soon as we got off the car right in front of the gate, two men approached us. My wife is the one who was carrying a handbag with our asylum papers, money and cell phones inside. These two men came and snatched the bag from her and ran away. We reported the matter to the police and we never heard anything from them again, they simply did not care.

When the xenophobia (violence) happened in 2008, we were not really affected. They targeted small shops that are owned by foreigners as well as houses of foreigners which were known to have nice property. To be careful with our lives we just went to sleep at the police station until morning. His People Church officials came and took us to Goodwood where we stayed for two or three weeks. We returned to our lodgings when the violence ended. Our lodgings were not attacked because people know that we are just beggars and do not have much. Whenever we get money we send it home to our children. We don't buy much in South Africa. Even if we are to make money, I think that it does not make sense for us to build a house in South Africa, because it is not our own country. I think it's better to get the money from here and to send it home to establish our own home, because when all has been said and done, we will return to our own country. Who knows? Maybe the government of South African can chase us any time, so we have to have something to fall back on. In a nutshell, I can just say that is the story of my life and how I have earned a living in Zimbabwe and in South Africa...thank you for coming.

## **4.8 Conclusion**

In this chapter I have presented seven narratives of Zimbabwean migrants with disabilities who are living in Cape Town, South Africa. As I stated earlier, such a presentation represents my first level of data analysis. I presented the stories of Chido who has physical impairment (amputee), and Mugwati, Chenai, Blessing, Kativhu, Matemba and Jabulani who all have visual impairment. Whilst the stories in this chapter have spoken for themselves, I present a further analysis of the stories in the next chapter which are framed around an analysis of narratives approach, which produces themes.



## CHAPTER 5: ANALYSIS OF NARRATIVES

### 5.0 Introduction

As previously stated, the outcome of narrative analysis is stories and that of analysis of narratives is themes. In this chapter, I present the themes that emerged from the seven stories that participants told about their livelihood experiences in South Africa, thereby representing my second level of analysis (analysis of narratives). The themes that I present in this chapter are: 1) political strife and socio-economic hardship in the country of origin (Zimbabwe); 2) Migrating to host country: A focus on documentation 3) livelihood shifts and adaptations in South Africa and 4) lack of institutional support, poor access to social services and livelihoods in South Africa. To remind the reader of what they are, I map the aim and objectives of this study below, as well as show how they are interlinked with the themes that emerged from a cross-case analysis of the narratives and the chapters in which the objectives were fulfilled.

**Table 5.1: Mapping aim, objectives and themes.**

Aim	Objectives	Fulfilment of Objectives	Themes
The aim of this study is to describe the livelihood experiences of Zimbabwean migrants with disabilities in South Africa in their own words.	<ul style="list-style-type: none"> <li>- To identify the factors that “push” PWD out of the country of origin (Zimbabwe)</li> <li>- To gather narrative descriptions from Zimbabwean migrants with disabilities about their</li> </ul>	<ul style="list-style-type: none"> <li>- Objective fulfilled in Chapter 5 (analysis of narratives)</li> <li>- Objective fulfilled in Chapter 4 (narrative analysis)</li> </ul>	<ul style="list-style-type: none"> <li>- Political strife and socio-economic hardship in the country of origin (Zimbabwe).</li> <li>- A focus on documentation and implications for livelihood experiences in the host country (South Africa).</li> </ul>

	<p>livelihood experiences in Cape Town, South Africa.</p> <ul style="list-style-type: none"> <li>- To identify contextual factors that influence the livelihood experiences of Zimbabwean migrants with disabilities in Cape Town, South Africa.</li> <li>- To describe the effect of the intersection of various identity markers such as disability, nationality, poverty, gender, and migrant status, on the livelihoods of Zimbabwean migrants with disabilities in</li> </ul>	<ul style="list-style-type: none"> <li>- Objective fulfilled in chapter 5 (analysis of narratives) and finally in chapter 6 (deeper layer of analysis)</li> <li>- Objective fulfilled in chapter 5 analysis of narratives and finally in chapter 6 (deeper layer of analysis)</li> <li>-</li> </ul>	<ul style="list-style-type: none"> <li>- Livelihood shifts and adaptations in South Africa.</li> <li>- Lack of institutional support, poor access to social services and livelihood experiences in South Africa.</li> </ul>
--	--	---	---

	Cape Town, South Africa.		
--	-----------------------------	--	--

### **5.1 Theme 1: Political strife and Socio-Economic hardship in the country of origin (Zimbabwe)**

Although this theme does not discuss the livelihood experiences of participants in the host country (South Africa); the theme is necessitated by the seven stage criteria that I used to judge a story as postulated by Polkinghorne (1995). Polkinghorne asserts that people are historical beings, hence they can never really be detached from their past, which remains a part of who they are. It is thus important to revisit the past experiences of participants, as they shape and are interlocked with their livelihood experiences in South Africa. Below I discuss the sub-themes of: prevalence of measles, educational background of participants, political and economic instability, gender, disability and migration.

#### **Prevalence of measles**

All participants except for one, reportedly suffered from measles during the early years of their childhood, leading to loss of sight. There is evidence that the liberation war that was ongoing in Zimbabwe during the childhood years of participants with visual impairment, may have resulted in the healthcare system being a victim of war. Some children who were born during or just before this period, could not be immunised against measles, resulting in them becoming visually impaired. The war of liberation was persistent for a period of 15 years (1964-1979) and it ended with negotiated independence in April 1980 (Muwati *et al.*, 2010). According to Siem (2017) it is not uncommon for healthcare facilities to be negatively affected during times of conflict, in ways that may have a negative impact on the delivery of healthcare services. The tragedy of the matter is that, in absence of vibrant political, and socio-economic structures and vital health systems resulting from the civil war, measles immunisation was compromised during the childhood years of participants. Participants reportedly became visually impaired which contributed in ways that later narrowed their opportunities to advance their education as well as limit their livelihood choices, later in life (Sanders, 1992).

It is also striking to note that all blind participants believed their parents did not have a full understanding of the condition that had affected their children. In some instances, and as exemplified by Jabulani's narrative in Chapter 4, the result was the concurrent consultation of

traditional healers, religious prophets and the formal health care delivery system in a desperate search for a cure. Such an approach is not surprising, given that the traditional conceptualisation of disability in Zimbabwe, associates disability with evil spirits, witchcraft and the breaking of traditional taboos (Peta, 2017). There is evidence that the non-complementary health care consultations may delay the enrolment of some participants in school, as disability, religion and culture intersect to frame their experiences of accessing education as further discussed below.

### **Educational background of participants**

The findings of this study indicate that in Zimbabwe, some children with disabilities (CWD) manage to access basic education through special schools. A lack of tertiary education often results in them struggling to secure employment in both their country of birth and in the host country (South Africa). Literature indicates that CWD face physical barriers that hinder them from accessing education (UNESCO, 2012; Australian Human Rights Commission, s.a). However, the findings of this study indicate that whilst the enrolment of some participants in school was delayed, some participants had access to basic education in Zimbabwe. They eventually failed to access higher education for various reasons that include lack of funding, and inadequate or inappropriate career guidance.

The findings of this study contradict the findings of the studies undertaken by the Australian Human Rights Commission (s.a.) and UNESCO (2012), (as noted in the above paragraph), which indicate that the education of CWD is limited by challenges that are related to physical access. There is evidence that apart from physical access, both resource availability and the undervaluing of education of CWD by families plays a significant role in determining access to education. For example, and as noted in Chapter four, Kativhu deliberately dropped out of school when he was in Grade five and his parents who did not value education for their CWD, did not encourage him to return to school. Along the same vein, the parents of Jabulani did not facilitate his enrolment in school until he was 18 and it was too late for him to start Grade one in mainstream school. As previously mentioned the focus of Jabulani's parents was on seeking a cure for blindness from religious prophets and traditional healers, with the aim of "fixing" his eyes first before he could go to school, in a scenario where disability, religion and culture intersect to create a platform which limited Jabulani's livelihood choices later in life.

As opposed to pursuing tertiary education, most participants pursued vocational skills training, except for Blessing who holds a University degree. For example, and as noted in Chapter four, after four years of high school education, Chenai only learnt to make writing-board chinks and to weave trays and baskets at Capota School for the Blind where she had previously learnt. As noted by Shakespeare (2008; 2017), there is a general fallacious belief that PWD are sub-standard beings who just need basic education, vocational skills and no tertiary education. Drawing from the findings of this study, such widely held stereotypes result in practices that place PWD at a disadvantage when they search for employment opportunities later in life (Islam, 2015), including in both their own country and in the migrant receiving country.

That is not to say that vocational skills are “useless” or sub-standard, but it is to say that a narrow focus on such skills at the expense of tertiary education, limits the livelihood choices of PWD. But one can also argue that even if PWD obtain tertiary education as in the case of Blessing who has a University degree, disability still adds a layer of disadvantage in the terrain of livelihood choices in both the country of origin and the host country. Whichever way, there is evidence that when vocational skills or tertiary education acquired by participants can no longer guarantee them a decent source of livelihood in their country of origin, it prompts them to seek “greener pastures” in neighbouring South Africa, thereby confirming what Meldrum (2007) in his Mail and Guardian report calls Africa’s most extraordinary exodus of a country not at war. There is evidence that both economic problems and political instability in Zimbabwe contribute to the migration of PWD to South Africa as further discussed below.

### **Economic and political instability**

The findings of this study indicate that both economic and political challenges in Zimbabwe are major push factors that influence the choice of participants to migrate to South Africa. There is evidence that various livelihood strategies in Zimbabwe were negatively affected by the harsh economic climate, which resulted in the country’s economy being described by Duri et al (2013) as the world's worst economy. As noted in Chapter 2, the same author notes that the unemployment rate in Zimbabwe has been pegged at more than 80%, thereby leaving participants with no choice but to seek “greener pastures” in neighbouring South Africa. The political turmoil in Zimbabwe in the 2000s, the time that most participants reportedly started migrating to South Africa is also another push factor that contributed towards the migration of PWD to South Africa. The rise in political tensions in Zimbabwe (Raftopolous, 2006) caused tensions and unrest that in some instances negatively affected family relations.

The narrative of Blessing is an example which shows that different political affiliations between Blessing and his brother resulted in rising conflict between them, which in part contributed to Blessing's decision to migrate to South Africa, via Botswana. Furthermore, and in resonance with the findings of a study carried out by Raftopolous (2006), the razing of houses to the ground and displacement of people because of political unrest was also reportedly a push factor for some participants. There is therefore evidence that the intersection of disability, economic challenges, and political instability frames "push" factors that result in participants moving to the migrant receiving country (South Africa).

### **Gender, disability and migration**

The findings of this study show gendered push factors, in relation to the decision of participants to migrate from Zimbabwe to South Africa. For example, the narratives of Chido and Matemba indicate that the fathers of their children abandoned the women, leaving them to fend for their children on their own in Zimbabwe. The intersection of disability, gender, poverty and single marital status "pushed" the women to seek "greener pastures" in South Africa so that they could single-handedly fend for themselves and their children. According to a study undertaken by Peta (2017), it is not uncommon for women with disabilities (WWD) to be regarded by both disabled and non-disabled males as sub-standard beings on the grounds of disability. As previously stated and in the context of Zimbabwe, disability is commonly associated with spirits, witchcraft and taboos; even in instances where men may genuinely love women with disabilities, they may be discouraged by their families from marrying or living with the women on the grounds that they are disabled. The tragedy of the matter is that children may also be despised for the reason that their mothers are disabled.

Nevertheless, the situation appears to be different for men with disabilities; it is striking to note that all male migrants with disabilities, apart from Blessing "moved" to South Africa with their wives, where spouses supported each other in fending for their children, a choice which female participants do not appear to have. There is evidence that the factors that motivate participants to migrate from Zimbabwe to South Africa are not rigid but flexible, depending on each participant's unique and gendered livelihood experiences. However, there are also similarities of "push" factors in the narratives of both male and female participants, including education, politics, and the economy (Goggin & Newall, 2005). Both male and female migrants, married and unmarried were reportedly "pushed" out of Zimbabwe by economic problems and political

unrest. Below, I unpack the second theme which focuses on the journeys of participants from Zimbabwe to the host country (South Africa), with a focus on documentation.

## **5.2 Theme 2: Migrating to host country (South Africa): a focus on documentation**

As explained in Chapter 1, the relatively stable political standing of South Africa, and the country's vibrant economy, combine to become "pull-factors" for migrants from various countries including Zimbabwe (Africa Check, 2016). Diminished success in "fighting" to establish and sustain livelihoods in Zimbabwe, to their own countries of origin, may result in PWD considering migrating to lands that presumably "flow with milk and honey." Oblivious of the fact that South Africa has its own challenges that include reduced economic growth and an unemployment rate of over 25% (Africa Check, 2016), participants reportedly believed that they could establish better livelihoods in South Africa. Nevertheless, and as noted in Chapters 2 and 4, borders present an almost impenetrable barrier (Goggin & Newall, 2005). In cases where PWD manage to migrate to other countries, they must negotiate new social, political and economic spaces, in contexts where disability adds a layer of disadvantage to their migrant status and their search for belonging.

There is evidence that all participants entered South Africa illegally, except for Blessing who candidly declared his lack of appropriate travel documentation upon arrival at the border, where he got official assistance from UNHCR. Furthermore, and as noted in Chapter 4 and at the age of 31, Chenai who uses an artificial leg, paid a truck driver to facilitate her illegal entry into South Africa. At the age of 41, Matemba, who is blind, also illegally and for a fee, entered South Africa in 2004 through a fence that was cut by some South African nationals for her and other illegal immigrants to pass through. Matemba who is also blind walked for long distances through the bushes until she reached a place where she was able to get transport to Johannesburg, a place where she would search for employment, even though she did not have a work permit.

The fact that some participants travelled through bushes and unlawfully "bought" their passage into South Africa whilst risking robberies, or that some participants travelled via the Limpopo River risking crocodile attacks, dispels the standpoint of the United Nations Migration Agency (2018) that it is uncommon for people to make the choice to settle in countries other than their country of origin. The narratives of participants indicate that the need to access improved

livelihoods, far outweighed the risks associated with illegal border crossing from Zimbabwe to South Africa. Furthermore, the scenario contradicts the assertion made by the United Nations (2017) that contemporary means of transport make it cheaper, faster and easier for persons to move from one country to another in search of safety, education, quality of life and/or sustainable livelihoods for themselves and their families. There is evidence that disability adds a layer of disadvantage to the migration journeys of participants to South Africa, albeit South Africa's favourable migration policies that seek to accommodate Zimbabwean nationals as further discussed below.

As noted in Chapter 2, South Africa rolled out a package of migration policies which sought to legally accommodate Zimbabwean migrants (Crush *et al.*, 2017). South African migration policies include the "special dispensation permit" which was initially approved in April, 2009 (Maromo, 2017) and which allowed Zimbabweans to live and work in South Africa for one year (Polzer, 2009; Crush *et al.*, 2017), on the grounds that Zimbabweans could make a significant contribution to the development of the South African economy (Oneale, 2013). One may therefore argue that participants may not have been privy to such information, given that PWD are generally denied access to services and information in appropriate formats such as Braille for blind persons (Islam, 2015). It may also be that the intersection of disability and a lack of tertiary education or critical skills on the part of some PWD as required by the regulations of the Department of Home Affairs (South Africa), may have disqualified some participants from applying for work permits through the South African High Commission offices in Zimbabwe. Whichever way, participants found their way into South Africa in ways that negatively impacts on migration statistics as further discussed below.

The illegal entry of most participants in South Africa supports the assertion made by the United Nations Migration Agency (2018) that the lack of proper documentation among migrants results in an underestimation of migrant statistics, as the details of such participants are not "captured" by the formal migration information system. Nevertheless, there is evidence that all participants except for Blessing who declared his status at the border, were able to regularise their stay in South Africa after a period of no less than two years of being illegal immigrants. One may therefore argue that migration statistics that may not be accurate at the time when PWD enter the host country, are commonly updated as the illegal migrants later seek to regularise their stay. Such regularisation reportedly becomes necessary for participants who intend to broaden their base of access to livelihood opportunities, in ways that signal to



authorities the need to continuously review statistics and strategies of supporting PWD within the migration and livelihoods terrain.

It is striking to note that none of the participants mentioned that they had considered migrating to Europe at any one point in their lives. Such a scenario concurs with the observation made by Flahaux and De Haas (2016) which states that the belief that all African migrants are desperate to enter Europe in search of better livelihoods is a misconception. In any case and as noted in Chapter 2, some scholars argue that most of the continent's migrants target Africa and not Europe (Sander & Mambo, 2003; Schoumaker *et al.*, 2015). But one may also argue that it may be more difficult for participants to obtain proper documentation to enter Europe, hence they settle for neighbouring South Africa. In Theme 3 below, I discuss the livelihood shifts and adaptations of participants in the host country (South Africa).

### **5.3 Theme 3: Livelihood shifts and adaptations in host country**

There is evidence that most participants failed to enter the formal labour market due primarily to the intersection of disability, migrant status, lack of tertiary education and lack of proper documentation. As discussed in Chapter I, the United Nations (2017), states that the education and skills of migrants can make a significant contribution to sustainable and inclusive economic development of host countries. The United Nations points to the filling in of critical labour gaps, payment of taxes and social security contributions by migrants as contributory factors to the socio-economic development of host nations. Nevertheless, the findings of this study raise questions about such perspectives in relation to migrants with disabilities, in situations where most participants were unable to secure formal employment. Such a scenario indicates a lack of empowering policies that distinctly relate to the formal employment of migrants with disabilities.

The United Nations (2017), argues that if migration is supported by enabling policies, it can make a significant contribution to sustainable and inclusive economic development. The findings of this study show that regardless of education and skills, most participants at one time or another, resorted to begging in the host country as a means of livelihood. According to Schweik (2007) begging involves the act of beseeching others to donate a favour, cash or kind unconditionally. While Schweik has questioned whether begging is a psychological problem, a means of livelihood or a social menace, one can argue that the lack of support for migrants with disabilities in the host country, even in instances where they would have obtained proper

documentation, leaves them with no choice but to resort to begging in order to realise their primary need of earning a living. While some participants such as Chido reported that they despise “hand-outs”, there are also some participants who argued that begging as a source of livelihoods should not be looked down upon. Such participants have found the venture to not only be profitable but to also enable them to raise their children and to send them to school. Kativhu, Jabulani and Matemba were proud to have raised their children with money obtained from begging, with the help of sighted helpers, with whom they equally share their proceeds.

As noted in Chapter 4, the begging arrangement between visually impaired participants and sighted assistants, came about after the community of visually impaired migrants agreed “union style” that their helpers were equally doing the same work if not more, hence they deserved an equal “wage.” The scenario resonates with the assertion made by Woubishet’s (2005:186) that “begging is a business, which demands commitment, competitiveness, tactfulness and alertness. The fit survives while the novice and the uncompetitive lose in the social contest for the scarce resource, the alms.” One may argue that by pursuing begging as a livelihood source, some migrants with disabilities created employment for South African nationals for an equal share of daily takings. The reality is that even if participants were to prefer to obtain paid work or to undertake entrepreneurial activities as compared to begging, disability and their migrant status often intersect to deny them space in both formal employment and entrepreneurship.

The findings of this study concur with the assertion made by Shakespeare (2018), which states that the longstanding history behind the exclusion of PWD from formal employment, has led PWD to earn a living through either handy-craft work or peasant work, freak shows (making a living from their bodily difference) or to beg. Whilst there is evidence that some participants had various skills, which if given the opportunity, they could use to contribute to the development of the host nation through formal employment or entrepreneurship, they reportedly found it difficult to penetrate such a terrain. For example, Chido’s dream is reportedly that of “moving” her informal dressmaking business from her home to a proper business centre where she may be strategically located in ways that not only earn her an increased income, but where she can also contribute towards creating employment for South African nationals.

Chenai is reportedly keen to use the skills she gained from a massaging course in South Africa to venture into private practice. However, in both cases, the intersection of disability and the

migrant status of the participants in the context of prejudice, marginalises them in the South African entrepreneurial business environment. That is in spite of the fact that the United Nations (2017) points at entrepreneurship of migrants as a contributory factor to the socio-economic development of host nations. As Khamar (2007) argues, entrepreneurship contributes towards both personal and national development while also bringing marginalised groups into meaningful economic participation (Massey, 1998). What further complicates the experiences of the participants who are illegal migrants, is that appropriate documentation is a key requirement for entrepreneurial capital support, in a terrain which is characterised by its own challenges as further discussed below.

The rising unemployment rates of local graduates (Statistics South Africa, 2018) makes it even more difficult for foreign nationals to get employment. There is evidence that some participants who engaged in wage labour were either under-paid or in some instances they were never paid. As noted in Chapter 4, Chido, a former housemaid left her second employer in South Africa without being paid three months wages. These findings confirm conclusions by Brummer (2002) and Lurie *et al.* (2000) that, additional risks of migration include vulnerability to abusive employers who regard migrants as easy targets of exploitation. Such vulnerability may add to untold physical and emotional suffering, thereby raising questions about the United Nations Migration Report (2017) which only mentions women and children as examples of vulnerable migrants. Yet as noted by Pisani and Grech (2015), PWD form part of the collective migrant groups, hence they are not immune to oppression, in a host country scenario where they must swiftly make shifts and adaptations in relation to the kind of work they undertake in order to establish livelihoods for themselves.

The intersection of disability, migrant status and background education confined participants to the peripheries of livelihood sources. Their options were commonly situated around activities that are seemingly 'fit' for disabled migrants. These activities exposed them to exploitation and ridicule by community members who question both their impairments and justification for migrating to South Africa. However, there is evidence that participants did not passively receive oppression, but that they employed different strategies of establishing livelihoods, thereby claiming their agency and showing resilience. According to Das (1995) and Humphrey (2008), diversity and changes in livelihood sources and experiences of migrants shows the ability of people to respond and adapt to contextual and critical events in the foreign country. One may therefore argue that given the right support, Zimbabwean migrants with

disabilities may contribute to the development of the host country (South Africa). Under Theme 4, below, I discuss the subject of institutional support, access to social services and livelihoods.

#### **5.4 Theme 4: Lack of institutional support, poor access to social services and livelihood experiences in South Africa**

This theme outlines the subject of institutional support, access to social services and livelihoods under the sub-headings of social grants, disabled people's organisations, law enforcement agents and access to health care.

##### **Social grants**

Most participants reported that they did not receive social grants; a scenario which they attributed to the fact that they did not have proper migration documents. Only citizens, permanent residents and migrants with refugee status as documented by the Department of Home Affairs (DHA) are eligible to get relevant grants, while asylum seekers and none refugee migrants are ineligible (Department of Social Development, 2016). For example, Blessing started receiving a disability grant after he had attained official refugee status. The situation resonates with the provisions of the South African White Paper on the rights of PWD, on the awarding of a disability grant to marginalised groups that include migrants (Department of Social Development, 2016). As discussed in Chapter 2, the Department of Social Development, through the White Paper, allows PWD including migrants to apply for disability grants aimed at promoting financial independence. However, there is evidence that most participants (six out of the seven) were not fully aware of the requirements for receiving a monthly disability grant from the South African government. According to Hancock (2011) and Shakespeare (2017), lack of information on available social protection programmes presents access barriers for PWD who are usually not well informed on what they qualify for and what they must do to fulfil the requirement. Graham *et al.*, (2013) points out that various barriers still exist even for South African nationals in accessing social grants. However, most participants had at one point or another interacted with representatives of organisations of persons with disabilities that had sought to support them as further discussed below.

##### **Disabled People's Organisations (DPOs)**

Most participants reportedly received some assistance from DPOs in the host country but for limited periods of time. However, participants had little knowledge of the organisations they

had interacted with and in most cases, participants did not know or remember the names of the organisations. The support from DPOs reportedly lasted for a few months and ended abruptly, leaving participants wondering about the reasons why the support had ended. The scenario depicts a charity model of disability, under which support and services are commonly designed and imposed on PWD, with very little if any consultation with them, in a terrain where disability, poverty and the migrant status of participants intersect to frame their marginalisation (Harris & Enfield, 2003). The irony of the matter is that when PWD begin to expect what may be perceived as different or increased levels of generosity, they run the risk of being judged as ungrateful or too demanding, and therefore deserving of abandonment. It is therefore not surprising that some support that was being extended to Zimbabwean migrants with disabilities ended abruptly and without an explanation of what was going on, in a scenario where it may be difficult to seek the protection and support of law enforcement agents as discussed below.

### **Law enforcement agents**

As noted in Chapter 4, most participants who begged at traffic lights were reportedly confronted by law enforcement officers who discouraged them from using such intersections, alongside an argument that they could be run over by cars. Some participants expressed gratitude for the support and “protection” they got from the South African Police Services (SAPS), when for example xenophobic attacks arose; the SAPS reportedly offered them safe shelter or accompanied them to their homes to get their belongings. However, some participants are reportedly disgruntled about how SAPS handled reported cases of robbery that would have been perpetrated against Zimbabwean migrants with disabilities. As highlighted in Chapter 4 and in some instances, when children of participants who assist their parents with begging wander away from their parents, they are reportedly and briefly detained by law enforcement officers and eventually reunited with their parents. Nevertheless, participants are reportedly worried about what they would do if their children are detained for longer periods of time. The scenario brings to the fore the issue of the legal gap that exists in South Africa, with regards to undocumented migrants with disabilities (Cape Times, 2008). The same source notes confusion surrounding policy guidelines in relation to how law enforcement agents should deal with undocumented migrants in various contexts that include livelihoods and access to medical care as further discussed below.

### **Access to medical care**

Most of the participants had reportedly at some point successfully received free medical attention, even though some participants complained about the negative attitudes of some health care staff, in scenarios where disability, poverty and migrant status intersected to frame the oppression of participants. Such negative attitudes may have arisen from the assumption that migrants are people of questionable health, who only “come” to South Africa to “steal” services from the domestic health care systems that are meant for South African nationals (Southern African HIV Clinicians Society & UNHCR, 2007). Participants reported long queues and derogatory language from health care practitioners in a scenario of citizenry politics where disability, poverty and the migrant status of participants intersected to frame their marginalisation (Grove & Zwi, 2006; Harper & Raman, 2008). However, one may argue that negative attitudes of health care staff have been commonly reported among both citizens and non-citizens, with and without disabilities (Peta, 2017). Furthermore, Nawyn (2016) argues that at a broader level and even in wealthy Global Northern countries, PWD are rarely respected in various facets of life including in health care. The findings of this study indicate that disability, poverty and the migrant status of participants intersect to frame their marginalisation within the health care delivery system in South Africa, albeit receiving free health care in some instances.

In relation to health, South Africa has inclusive health policies, but the reality is that disability, nationality, poverty and the migrant status of participants result in some of them experiencing delays in accessing health care in clinics that are characterised by negative attitudes of health care staff (Vergunst, 2016). One can align such experiences to the fact that migrants with disabilities are commonly regarded as persons who weigh heavily on domestic health care systems (Southern African HIV Clinicians Society & UNHCR, 2007). It is imperative to note that regardless of the ailment, Zimbabwean migrants with disabilities are not immune to the fallacious belief that migrants carry diseases that overburden the public health system which is already in shambles (Grove & Zwi, 2006; Harper & Raman, 2008). The tragedy of the matter is that unhealthy migrants may not be able to establish meaningful livelihoods that contribute to the development of the host country.

## **5.5 Conclusion**

In this chapter, I have presented the four themes that emerged from a cross-case analysis of the seven narratives of participants that make up this study. The themes are: 1) political strife and socio-economic hardship in the country of origin (Zimbabwe); 2) migrating to host country: a focus on documentation 3) livelihood shifts and adaptations in South Africa and 4) lack of institutional support, poor access to social services and livelihoods in South Africa. In the next chapter I present the discussion of findings which is embedded with the third and deeper layer of analysis.

## CHAPTER 6: DISCUSSION OF FINDINGS

### 6.0 Introduction

This chapter represents a discussion of findings which is embedded with an interpretive deeper level of analysis, which seeks to illuminate the meanings of the key philosophies that are embedded in what Zimbabwean migrants with disabilities mutually share and value. This chapter is equally important because at the first level of analysis, I presented the stories as they are, without trying to make meaning out of them; at the second level I discussed the themes that I drew from the stories in ways that sought to make meaning out of the stories (Braun & Clarke, 2006). At this third level and as postulated by Hancock *et al.* (2009), the deeper level of analysis develops from the second level, and as stated above it deals with key collective experiences of livelihoods shared by Zimbabwean migrants with disabilities. I remind the reader that the research question for this study is: How do Zimbabwean migrants with disabilities experience their livelihoods in Cape Town, South Africa?

#### 6.1 Key Finding No. 1

The desire to support the development of children plays a key role in influencing the migration decisions of participants

There is evidence that most participants value the development of their children in ways that propel them to seek “greener pastures” in South Africa, in an effort to support such development. Some participants left their children in the custody of relatives in the country of origin while others migrated with all their children. Others migrated with their children at different stages of the migration process. Although most participants are not formally educated, they place high value on the formal education of their children (Gutuza & Khosa, 2015). In their search for “greener pastures”, they are reportedly and in part, bent on earning enough money which enables them to pay school fees for their children. It is therefore not surprising that in an effort to achieve such support, most participants risked the vulnerabilities of illegal migration and unlawfully entered South Africa.



All participants appear to be more pre-occupied with what they can earn as opposed to the psychological impact that their livelihood strategies may cause on them and their children. As noted in Chapter two, literature indicates that if breadwinners migrate to other countries leaving their families behind, such migrants are inevitably separated from their families in ways that may result in the migrants experiencing considerable emotional turmoil (D'Emilio *et al.*, 2007). The same authors state that emotional distress can also be experienced by the migrant's family members who are left in the country of origin and who must adjust to living without the migrant. According to D'Emilio, if children are separated from their families, they may be negatively affected for the rest of their lives, due to lack of daily physical contact with their parents and the absence of parental support and guidance in the context of their development. Antman (2012) confirms the impact of migration of parents on children, the elderly and spouses who are left behind in scenarios where the disintegration of families becomes prevalent. However, the fact that most participants who leave their children in Zimbabwe strive to fend for the same children signals that the parents love their children, but they are split between establishing better livelihoods in South Africa to financially support the children, and staying close to the children. However, according to Miller (2017), children who are separated from their parents may begin to experience trauma and to question their own value and self-worth, resulting in them struggling to establish trusting relationships later on in life.

In some instances, spouses are separated for various reasons, in scenarios where one spouse migrates to South Africa to seek greener pastures, whilst the other spouse stays in the country of origin with the children. It is striking to note that in such scenarios the migrant partner reportedly continues to uphold family values by being faithful to the other partner. As previously mentioned, the focus is on raising enough funds to pay school fees for children to and to also build houses in the country of birth. There is evidence that most participants are determined not to lose focus on the primary reason of their migration (to earn enough money to support their families), hence they guard against engaging in harmful sexual relations and criminal activities as further discussed below.

The findings of this study indicate that participants focus on earning an "honest" living, in the host country, albeit the fact that they may have entered South Africa illegally. As discussed in Chapter 2, migrants are commonly stereotyped as troublesome people with criminal tendencies, who therefore need perpetual surveillance (FAO, 2017). However, participants were reportedly subjected to ridicule, discriminatory attitudes, derogatory name calling, and

robbery in environments where some of them were vulnerable to xenophobic attacks. However, some participants managed to find humour in the name calling, choosing instead not to fight the marginalisation but to focus on raising enough funds to support their children including sending them to school. Despite the above challenges, Zimbabwean migrants with disabilities remained resilient, seeking to constructively address challenges and attitudes which they encountered. I discuss Key Finding No. 2 below.

## **6.2 Key Finding No. 2**

Implied and ascribed identities frame the livelihood opportunities that are available to Zimbabwean migrants with disabilities in South Africa.

All participants associate the challenges they experience in relation to establishing stable livelihoods in the host country (South Africa) to implied and ascribed “inferiorised” identity markers that fall outside that of a citizen or permanent resident (Sibers, 2013). The narratives of most participants indicate that such “inferiorised” identity markers include; disabled, poor, migrant, undocumented migrant, asylum seeker and refugee. In relation to the topic of this study, such social life attributes reportedly frame the livelihood experiences of participants in the host country in ways that limit the participants’ livelihood choices as well as reduce the level of remuneration which they may get if ever they are offered employment. According to Sibers (2013), individuals possess layers of socially constructed identities and people that prescribe or ascribe these identities determine the level of importance and urgency that each identity is accorded. As such, the “othering” of Zimbabwean migrants with disabilities in the host country dictates the nature of the livelihood means that the migrants can access, before they are even permitted space to explore their capabilities, in scenarios that are characterised by what Swain *et al.* (2014) calls politics of invalidation.

According to Sibers (2013), the reality is that the superior identity of citizen or permanent resident always prevails over that of identities that are perceived as “inferior.” Literature indicates that migrants are commonly better off in host countries than in their countries of origin in relation to their livelihood status (United Nations Migration Agency, 2018). But one may argue that as disability adds a rung to the ladder of disadvantages of migrants, the question of whether Zimbabwean migrants with disabilities are better off in South Africa (host country)

than in Zimbabwe (country of origin) does not have a clear cut obvious answer. Participants appear to be oblivious of the package of migration policies, which sought to legally accommodate Zimbabweans (Polzer, 2009; Crush *et al.*, 2017), hence one can say that such a package is not a “pull” factor. However, considering that Cape Town boasts a vibrant economy and popularity among tourists, participants may be drawing more income from Cape Town, South Africa than they would in Zimbabwe, including through begging, albeit the fact that participants collectively mourn their inability to make enough money to invest back at home (Zimbabwe).

As discussed in Chapter 2, Swain *et al.* (2014), state that migrants with disabilities are constantly confronted with the politics of invalidation, wage slavery and inaccessible environments. Disability enlarges the “graph” of marginalisation, as migrants with disabilities are commonly looked down upon as “good for nothing” people who should be excluded from most facets of life. This tends to thwart their aspirations of decent citizenship thereby compromising their livelihoods (Swain *et al.*, 2014). Having experienced different forms of discrimination, participants made swift shifts and adaptations to their livelihood activities, in an effort to identify and establish sustainable livelihood strategies and to “protect” themselves from abuse. It is striking to note that amidst all the challenges they experienced, Zimbabwean migrants with disabilities remained resilient, moving interchangeably between begging, domestic work, entrepreneurship and menial jobs as further discussed in Key Finding No. 3 below.

### **6.3 Key Finding No. 3**

Participants exhibit collective resilience, self-determination and flexibility in adapting to shifts in livelihood activities.

There is evidence that whilst participants were experiencing different forms of discrimination, they made swift shifts and adaptations to their livelihood strategies, devising various ways of protecting themselves from exploitation and abuse. It is striking to note that amidst all the challenges they experienced in the host country, Zimbabwean migrants with disabilities remained resilient, moving interchangeably and among other things, between begging, domestic work, entrepreneurship and menial jobs. As discussed in Chapter 2, Swain *et al.*

(2014) state that migrants with disabilities are constantly confronted with the politics of invalidation, wage slavery and inaccessible environments. This tends to thwart their aspirations of decent citizenship thereby compromising their livelihoods (Swain *et al.*, 2014). Whichever way, and as previously stated, Zimbabwean migrants did not passively receive oppression or give up, but they collectively remained resilient and determined to improve their livelihood status in a challenging livelihoods terrain of the host country.

It is striking to note that whilst participants remained resilient in establishing stable livelihoods for themselves in the host country, they never forgot about their country of origin. The desire of most participants is that of getting good jobs, making enough money and building retirement homes in Zimbabwe. Such a scenario signals the resolve to strive to earn a living in a country where one is denied citizenship but bearing in mind that when all has been said and done, participants will reportedly return to their country of birth.

#### **6.4 Key Finding No. 4**

Various identity markers such as disability, nationality, poverty, gender, and migrant status intersect to frame the livelihood experiences of Zimbabwean migrants with disabilities in South Africa.

This study reveals that various identity markers such as disability, nationality, poverty, gender, and migrant status intersect to frame the livelihood experiences of Zimbabwean migrants with disabilities in South Africa. Early migration studies primarily focused on male migration and the nature of employment accessible to them, because men were viewed as the bread-winners who move from place to place in search of employment, to provide for women and children (Borjas 1994; Dustman *et al.*, 2016). However, the findings of this study and some emerging studies indicate that, in cases where some households are headed by women, women actively participate in migration and the search for better livelihood strategies (Antman, 2012). According to Eagly (2009), the notion that women should be confined to the home looking after the family, while men go out and work and remit money back home, is slowly fading in the migration terrain. As noted in the previous chapter, women with disabilities are commonly abandoned by their male partners and left to fend for children on their own. As such, women with disabilities reportedly feel that they have no choice but to seek to occupy the public space in an effort to establish livelihoods that enable them to fend for their children, in scenarios

where disability, nationality, migrant status, gender and poverty intersect to frame their livelihood experiences.

Women with disabilities are equally “pulled” to South Africa by the “promise of greener pastures.” The equal participation and collaboration in identifying and pursuing livelihoods as evidenced by the findings of this study, appears to break down gendered and able-bodied power relations in the migration discourse, thereby creating a level playing field (Antman, 2013). One may therefore say that some female migrants were being paid very little or working for no wage at all, a scenario which applies to male migrants. However, unlike men, most women’s vulnerabilities were further influenced by experiences of rejection by their husbands and/or partners on the basis of their impairments and thus left to raise and support their children alone. In search of better livelihoods, they faced rejection, poverty and ridicule back home throughout the migration process and even in the host country. One may therefore argue that it is the intersection of disability, gender, poverty and migrant status which results in some female migrants being confronted with multiple layers of oppression and exploitation compared to male migrants.

## **6.5 Conclusion**

In this chapter, I have presented the discussion of findings derived from a deeper layer of analysis of the livelihood experiences of Zimbabwean migrants with disabilities in Cape Town. As indicated above, there is evidence that the desire to support child development plays a key role in influencing the decision-making processes of participants in relation to migration and livelihoods. Participants are not troublesome criminals in the host country; they make swift shifts and adaptations to their livelihood activities, in a quest to identify and establish sustainable livelihood strategies. Various identity markers such as disability, nationality, poverty, gender, and migrant status intersect to frame the livelihood experiences of Zimbabwean migrants with disabilities in South Africa. In the next chapter, I outline the recommendations that arise from this study, limitations of the study, as well as draw a conclusion of the entire study.

## **CHAPTER 7: RECOMMENDATIONS AND CONCLUSION**

In this chapter I outline the recommendations and conclusion of this study. There is evidence that PWD occupy active space in the migration terrain, hence there is need to pay attention to their needs, concerns and experiences, with the aim of promoting their well-being and optimizing their potential in economic and social citizenry.

### **7.1 United Nations Migration Agency**

- The fact that the latest world migration report, published by the leading United Nations Migration Agency (2018) pays very little if any attention to the livelihoods of PWD, albeit stating that women and children are vulnerable migrant groups is “catastrophic”. Such a scenario may be interpreted to mean that PWDs are not part of vulnerable migrant groups; their needs and concerns run the risk of not being treated with the utmost attention they deserve. As the highest international body of migration, the United Nations Migration Agency ought to take the lead in pushing forward the agenda for inclusion of migrants with disabilities. The Agency can draw from the United Nations Convention on the Rights of Persons with Disabilities (CRPD), (United Nations, 2006) Article 11, which directs state parties to take measures that ensure the safety and protection of PWD who are in risky situations. Article 18(1a) of the same CRPD also directs member states to recognize the liberty of movement, residence and nationality choices indiscriminately of PWD. Total acknowledgement and implementation of article 11 and 18 can propel total realisation of liberties that are guaranteed migrants with disabilities.

### **7.2 Governments of Zimbabwe and South Africa**

- The government of Zimbabwe could formulate a disability policy which pays attention to the livelihoods of PWD. The fact that Zimbabwe has never had a disability policy and that the country is being guided by an outdated Disabled Persons Act (Government of Zimbabwe, 1992), which prohibits discrimination of PWD in employment situations, without giving PWD the right to work, leaves a lot to be desired. However, the

Constitution of Zimbabwe (2013), in section 83 (a) articulates the commitment of government to enabling PWD to be self-reliant. There is therefore an urgent need to formulate a new disability policy that aligns with the Disabled Persons Act, the Constitution of Zimbabwe and the United Nations Convention on the Rights of Persons with Disabilities (United Nations, 2006). Such advancement at policy level should be translated to action which empowers PWD and their families, so as to reduce the instances through which they risk losing their lives whilst illegally entering South Africa.

- The government of South Africa could also consider reviewing the White Paper on Persons with Disabilities (Department of Social Development, 2016), with the aim of paying attention to migrants with disabilities who may not have refugee status, but a different legal status. There is evidence that migrants with disabilities are entering and will continue to enter South Africa; an enabling policy system holds the advantage that reliable statistics may be collected and the needs and concerns of migrants with disabilities themselves may be appropriately addressed. Such a policy will also enable migrants with disabilities to access social services such as the disability grant and health care services, as these are key enablers of participation in the development of the nation. That is not to say South Africa should carry the “burden” of housing migrants with disabilities from Zimbabwe as dictated by article 18(1b) of the UNCPRD (2006) on the liberty of movement and nationality, but it is to say that both governments should work together. Such cooperation allows monitoring of such migration, facilitating the voice of the migrants and designing and implementing appropriate policies that benefit both the governments, the PWD and their families.

### **7.3 Disabled People’s Organisations**

- Disabled People’s Organisations in both the country of origin (Zimbabwe) and the host country (South Africa) could address the livelihood concerns of PWD and their families. For example, DPOs in the country of origin should lobby government to design a disability policy which directs the promotion of self-reliance among PWD, in line with the provisions of Section 83 (a) of the Constitution of Zimbabwe (2013) as mentioned above. DPOs should also share appropriate information about migration, so as to prevent surprises among PWD when they reach their destination. DPOs in the

host country should also not shun PWD on the grounds that they are migrants; DPOs are known to lobby governments to establish laws that do not discriminate against PWD. The fact that such DPOs may then turn round and discriminate against migrant PWD, goes against the provisions of the CRPD (United Nations, 2006) to the detriment of the well-being of PWD.

#### **7.4 Migrants with Disabilities**

- Before taking the huge and risky step of illegally migrating to South Africa, migrants with disabilities should work together with DPOs and civil society to engage in self-advocacy, thereby contesting the oppression that characterise their livelihoods terrain in the country of origin. If migration is necessary, migrants with disabilities should make an effort to seek information from appropriate spaces about migrating to South Africa, thereby avoiding illegal passages through which they risk losing their lives. Migrants should be made aware of all the CRPD statutes including article 18(1b) of the CRPD which encourages them to utilize relevant processes to make use of immigration proceedings for documentation, which may be needed to expedite exercise of the right to freedom of movement.

#### **7.5 Researchers**

- I call for further research in this understudied area. Researchers could relook migration and disability theories to extensively interrogate livelihoods of migrant PWD. An interdisciplinary approach should be prioritised and funded adequately through shared research on disability, migration and livelihoods.

#### **7.6 Limitations of research**

This study was confined within Cape Town, a part of the Western Cape Province, yet South Africa has nine provinces which may also be housing Zimbabwean migrants who may have varied livelihood experiences in the diverse context of South Africa. Most willing informants turned out to be blind persons, hence the study did not capture a wide diversity of impairments except for physical and visual impairment. Physical access to participants for 2<sup>nd</sup> and 3<sup>rd</sup> face to face interviews was a challenge and had to be conducted via the telephone.



## **Conclusion**

This study was motivated by my experiences of living with my disabled brother and uncles, as well as my voluntary work with disability NGOs. The study explored the livelihood experiences of Zimbabwean migrants with disabilities and it has made recommendations that inform both policy and practice. The use of the narrative methodology and narrative interviews was appropriate because it facilitated the co-construction of knowledge in settings where the researcher and the participants were in dialogue. The intersectional model enhanced an understanding of the intersection of different identity markers that frame the livelihood experiences of PWD in the context of South Africa. Push-pull factors enabled an understanding of the factors that “push” participants out of the country of origin and the “pull” factors that draw them to the host country. The voice of the participants deconstructs the myth that migrants with disabilities are unable to represent themselves in migration dialogue.

## References

AfricaCheck. 2013. *How many Zimbabweans live in South Africa? The numbers are unreliable* [Online]. Available: <https://www.africacheck.org/reports/how-many-zimbabweans-live-in-south-africa-the-numbers-are-unreliable> [2018, February 23].

AfricaCheck. 2016. *Where do South Africa's international migrants come from?* [Online]. Available: <http://www.africacheck.org> [2018, February 23].

Aljazeera. 2009. *Migrant workers at risk in South Africa* [Online]. Available: <http://www.aljazeera.com/news/africa/2009/11/2009112110571766836.html> [2018, March 12].

Aljazeera. 2013. *Xenophobia and its discontents in South Africa* [Online]. Available: <https://www.aljazeera.com> [2018, June 22].

Allan, G. & Skinner, C. 1991. *Handbook for research students in social sciences*. Routledge Falmer.

Anderson, B. 2015. *Immigration and the worker citizen*. In *Citizenship and its others*. Palgrave Macmillan, London.

Antman, F.M. 2012. Gender, educational attainment, and the impact of parental migration on children left behind. *Journal of Population Economics*, 25(4):1187-1214.

AWID. 2004. *Intersectionality: A tool for gender and economic justice* [Online]. Available: <https://www.awid.org/publications/intersectionality-tool-gender-and-economic-justice> [2018, June 17].

Azmat, F. 2013. Opportunities or obstacles? Understanding the challenges faced by migrant women entrepreneurs. *International Journal of Gender and Entrepreneurship*, 5(2):198-215.

Bakewell, O. & Bonfiglio, A., 2013. *Moving Beyond Conflict: Re-framing mobility in the African Great Lakes region*. Working paper for the African Great Lakes Mobility Project (Vol. IMI working paper 71). Oxford: International Migration Institutes, University of Oxford.

Bell, J.s. 2002. Narrative inquiry: More than just telling stories. *TESOL quarterly*, 36(2): 207-213.

Berghs, M. & Kabbara, N., 2015. Disabled People in Conflicts and Wars. In S. Grech and K.Soldatic (eds.). *Disability in the Global South: The Critical Handbook*. US: Springer.

Bergstrom, P., Process-based assessment for professional learning in higher education: Perspectives on the student-teacher relationship. *The International Review of Research in open and Distributed Learning*, 11(2):33-48.

Birt, L., Scott, S., Cavers, D., Campbell, C. & Walter, F. 2016. Member checking: a tool to enhance trustworthiness or merely a nod to validation? *Qualitative health research*, 26(13):1802-1811.

Borjas, G.J. 1994. The economics of immigration. *Journal of Economic Literature*, 32 (4):1667-1717

Brand South Africa. 2013. *South Africa: economy overview* [Online]. Available: <https://www.brandsouthafrica.com/investmentsimmigration/business/economy/econoverview> [2018, February 13].

Brand South Africa. 2014. *Refugees and asylum seekers* [Online]. Available: [https://www.brandsouthafrica.com/tourismsouthafrica/travel/documents/refugees\\_asylum](https://www.brandsouthafrica.com/tourismsouthafrica/travel/documents/refugees_asylum) [2018, May 17].

Braun, V. & Clarke, V. 2006. Using thematic analysis in psychology. *Qualitative Research*.

Braun, V. & Clarke, V. 2019. Reflecting on reflexive thematic analysis, *Qualitative research in Sport, Exercise and health*, 11(4): 589-597.

Brummer, D. 2002. "Labour Migration and HIV/AIDS in Southern Africa," working paper, International Organization for Migration, Regional office for Southern Africa.

BUWA. 2015. Moving stories, women and migration in Africa. *Buwa a Journal on African Women's Experiences*. 6:2-49

Cape Times. 2008. Tip-offs lead to deportation of illegal aliens at Century City [Online]. Available: <https://www.iol.co.za> [2018, December 4].

Carlson, J. A. 2010. Avoiding traps in member checking. *The Qualitative Report*, 15(5):1102-1113

Chamberlayne, P., Bornat, J. & Wengraf, T. (ed.). 2000. *The turn to biographical methods in social science: Comparative issues and examples*. Psychology Press.

Chiumia, S. s.a. *How many Zimbabweans live in South Africa?* [Online]. Available: <http://africacheck.org/reports/how-many-zimbabweans-live-in-south-africa-the-numbers-are-unreliable/>. [2019, February 6].

Cisneros, D. 2008. Contaminated Communities: The Metaphor of 'Immigrant as Pollutant' in Media Representations of Immigration. *Rhetoric and Public Affairs* 11 (4): 569–601.

Clandinin, D. & Caine, V. 2008. Narrative Inquiry. In Lisa M. Given (ed.), *The Sage Encyclopedia of Qualitative Research Methods*. Thousand Oaks, CA: SAGE Publications, Inc.

Clemens, M.A., Montenegro, C.E. & Pritchett, L. 2009. The place premium: Wage differences for identical workers across the US border (Working Paper No. RWP09-004). *Boston, MA: Harvard Kennedy School*.

Cliffe, L. 2018. The politics of land reform in Zimbabwe. In *Land reform in Zimbabwe: constraints and prospects*. Routledge.

Crenshaw, K. 1989. Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics. *The University of Chicago Legal Forum*, 140,138-167.

Crenshaw, K. 1991. Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color. *Stanford Law Review*, 43(6), 1241-1299.

Crenshaw, K. W. & Harris, L. C. 2009. A primer on intersectionality booklet. In *African American Policy Forum*, Vassar College, Columbia Law School, Poughkeepsie, NY.

Creswell, J. W. 2012. *Qualitative inquiry and research design: Choosing among five approaches*. Thousand Oaks, CA: Sage Publications, Inc.

Creswell, J.W. 2013. *Educational research: Planning, conducting, and evaluating*. W. Ross MacDonald School Resource Services Library.

Crush, J. & Tawodzera, G. 2017. *Migration and Food Security: Zimbabwean migrants in urban South Africa*. ASFUN Food Security Series, 23

De Haas, H. 2007. Turning the tide? Why development will not stop migration. *Development and Change*, 38(5):819-841.

DeJesus, K.M. 2018. Forced migration and displacement in Africa: contexts, causes and consequences. *African Geographical Review*, 37:2, 79-82.

D'Emilio, A. L., Cordero, B, Bainvel B., Skoog, C., Comini, D., Gough, J., Dias, M., Saab, R. & Kilbane, T. 2007. The impact of international migration: Children left behind in selected countries of Latin America and the Caribbean. *United Nations Children's Fund (UNICEF)*, New York.

Dollard, J. 1935. *Criteria for the life history: With analyses of six notable documents*, s.i.

Duri, K., Stray-Pedersen, B. & Muller, F. 2013. HIV/AIDS: The Zimbabwean situation and trends. *American Journal of Clinical Medicine Research*, 1(1), 15-22.

Dustman, C., Schonberg, U. & Stuhler, J. 2016. *Labour supply shocks, native wages, and the adjustment of local employment* (No. 1617) Centre for Research and analysis of migration (CReAM), Department of Economics, University College, London.

Eagly, A.H. 2009. The his and hers of psychosocial behaviour. An examination of the social psychology of gender. *American Psychologist* 64(8):644

Easton, K.L., McComish, J.F. & Greenberg, R. 2000. Avoiding common pitfalls in qualitative data collection and transcription. *Qualitative Health Research*, 10(5):3-707.

Economic Freedoms. 2018 [Online]. Available: <https://www.heritage.org/international-economies/commentary/2018-index-economic-freedom&ved> [2019, July 10].

Eldis. 2000. *Livelihood strategies* [Online]. Available: <http://.eldis.org/go/topics/resource-guides/livelihoods-and-social-protection/what-are-livelihoods-approaches/livelihood-strategies> [2018, February 11].

Esin, C., 2011. Narrative analysis approaches. In N. Frost (Ed.), *Qualitative research methods in psychology: Combining core approaches* (pp. 92-117). Berkshire: Open University Press. <https://www.heritage.org/international-economies/commentary/2018-index-economic-freedom&ved> [2019, January 10].

Esin, C., Fathi, M. & Squire, C. 2014. Narrative analysis: The constructionist approach. *The Sage Handbook of Qualitative Data Analysis*. 203-216.

FAO. 2017. *The state of food security and nutrition in the world 2017. Building resilience for peace and food security*. FAO, Rome [Online]. Available: <http://www.fao.org/3/a-i7695e.pdf> [2018, May 16].

Feher, B. 2011. Understanding the homeless experience in Hungary through a narrative approach. *European Journal of Homelessness*, 5(1).

Fernando Chang-Muy, J.D. & Congress E.P. eds., 2015. *Social work with immigrants and refugees: Legal issues, clinical skills, and advocacy*. Springer Publishing Company.

Fischer, F. 2009. *Democracy and expertise: Reorienting policy inquiry*. Oxford University Press.

Flahaux, M. & De Haas, H. 2016. African migration: trends, patterns, drivers. *Comparative Migration Studies* 4 (1).

Fontes, L.A. 2004. Ethics in violence against women research: The sensitive, the dangerous, and the overlooked. *Ethics & Behavior*, 14(2):141-174.

Gibson, J. & McKenzie, D. 2011. *Eight questions about brain drain*. The World Bank.

Gilbert, K.R. 2002. Taking a narrative approach to grief research: finding meaning in stories. *Death Studies*, (26):223-229

Gilbert, M. 2017. Joint commitment. In *The Routledge handbook of collective intentionality* (pp. 130-139). Routledge.

Goggin, G. & Newall, C. 2005. *Disability in Australia: Exposing a Social Apartheid*. Sydney: University of New South Wales Press.

Government of Zimbabwe. 1988. *Social Welfare Assistance Act (1988)*. [Online]. Available: [http://www.africanchildforum.org/clar/Legislation%20Per%20Country/Zimbabwe/zimbabwe%20welfare\\_1990\\_en.pdf](http://www.africanchildforum.org/clar/Legislation%20Per%20Country/Zimbabwe/zimbabwe%20welfare_1990_en.pdf) [2018, July 30].

Graham, J., Haidt, J., Koleva, S., Motyl, M., Iyer, R., Wojcik, S.P & Ditto, P.H. 2013. Moral foundations theory: The pragmatic validity of moral pluralism. In *Advances in experimental social psychology*, Academic Press

Gray, D.E. 2009. *Doing research in the real world*. London: Sage Publications Limited.

Grove, N.J. & Zwi, A.B. 2006. Our health and theirs: forced migration, othering and public health. *Social science & medicine*, 62 (8).

Gutuza, R.F. & Khosa, M.T. 2015. An assessment of the involvement of parents in secondary schools in Buhera district in Zimbabwe's Manicaland province. *Global Journal of Advanced Research*. 2(10): 1676-1682

Hancock, T. 2011. Health promotion in Canada: 25 years of unfulfilled promise. *Health Promotion International* 26 (2):267

Hancock, J. & McKenzie, T.C. 2017. People with disabilities and income-related social protection measures in South Africa: Where is the gap? *African Journal of Disability* 6:1-11

Harper I. & Raman P. 2008. Less than human? Diaspora, disease and the question of citizenship. *International Migration*, 46 (5):3-26

Harris, A. & Enfield, S. 2003. *Disability, equality and human rights: A training manual for development and humanitarian organisations*. Oxfam GB.

Harris, J. 2003. "All Doors Are Closed to Us": A Social Model Analysis of the Experience of Disabled Refugees and Asylum Seekers in Britain. *Disability & Society* 18 (4):395-410.

HelpAge. 2014. *The Hidden Victims of the Syrian Crisis: Disabled, Injured and Older Refugees*. London: HelpAge and Handicap International.

History Online. 2018. History of slavery and early colonisation in South Africa [online]. Available: <https://www.sahistory.org.za/article/history-slavery-and-early-colonisation-south-africa> [2019, February 6].

Holscher, D. 2016. Subjectivities of survival: conceptualising just responses to displacement, cross-border migration and structural violence in South Africa. *Social Work* 52 (4), 53-72.

Hughes, B. 2012. "Fear, Pity and Disgust: Emotions and the Non-Disabled Imaginary." In N. Watson, A. Roulstone and C. Thomas (eds) *Routledge Handbook of Disability Studies*, London: Routledge.



IFRC. s.a. *What is a livelihood?* [Online]. Available: <http://www.ifrc.org/en/what-we-do/disaster-management/from-crisis-to-recovery/what-is-a-livelihood/> [2018, January 30].

ILO. 2016. *Promoting diversity and inclusion through workplace adjustments (A practical guide)*. International Labour Office: Geneva.

Islam, M.R. 2015. Rights of the people with disabilities and social exclusion in Malaysia. *International Journal of Social Science and Humanity*, 5(2):171.

Izugbara, C.O. & Undie, C.C. 2008. Who owns the body? Indigenous African discourses of the body and contemporary sexual rights rhetoric. *Reproductive Health Matters*, 16(31):159-167.

Joppke, C. 2010. *Citizenship and Immigration*. Cambridge: Polity Press.

Josselson, R. 2013. *Interviewing for qualitative inquiry: A relational approach*. Guilford Press.

Kahn, K., Collinson, M., Tollman, S., Wolff, B., Garenne, M. & Clark, S. 2003. "Health consequences of migration: Evidence from South Africa's rural northeast" (Agincourt). In *Conference on African Migration in Comparative Perspective*, Johannesburg, South Africa.

Kaye, H.S. Jans, L.H. & Jones, E.C. 2011. Why don't employers hire and retain workers with disabilities?. *Journal of Occupational Rehabilitation*, 21(4):526-536.

Khamar, B. 2007. Off-label use of medicines: Medical research and medical practice. *Indian Journal of Ophthalmology*, 55(6):411.

Lurie, M., Williams, B., Sturm, A.W., Garnett, G., Zuma, K., Gittlesohn, J. & Abdool, K. 2000. Migration and the spread of HIV in Southern Africa: prevalence and risk factors among migrants and their partners, and non-migrants and their partners. In *XIII International AIDS Conference July 2000*

- Manatsa, P. 2015. Are disability laws in Zimbabwe compatible with the provisions of the UNConvention on the Rights of Persons with Disabilities (CRPD)? *International Journal of Humanities and Social Science* 4(4):25-34.
- Mandipa, E. & Manyatera, G. 2014. Zimbabwe. *African disability rights yearbook*. Pretoria: Pretoria University Law Press (PULP).
- Maromo, J. 2017. New permit process for Zimbabweans in SA [Online] Available: <https://www.iol.co.za/news/south-africa/new-permit-process-for-zimbabweans-in-sa-0613075> [2019, February 13].
- Massey, D.S. 1998. Economic development and international migration in comparative perspective. *Population and Development Review*. 14(3).
- Meekosha, H. 2011. Decolonising disability: Thinking and acting globally. *Disability & Society*, 26(6):667-682.
- Meldrum, A. 2007. Refugees flood from Zimbabwe. [Online]. Available: <https://www.theguardian.com/world/2007/jul/01/Zimbabwe.southafrica>. [2018, November 16].
- Miller, B.D. 2017. *Cultural Anthropology*. Pearson.
- Muwati, I., Mutasa, D.E. & Bobape, M.L. 2010 The Zimbabwean liberation war: contesting representations of nation and nationalism in historical fiction. *Literator*, 31(1):147-173
- Nawyn, S.J. 2016. Migration in the Global South: Exploring New Theoretical Territory, *International Journal of Sociology*, 46(2):81-84.
- Nobles, J. 2013. Migration and father absence: Shifting family structure in Mexico. *Demography*, 50(4):1303-1314.
- O'Leary, Z. 2017. *The essential guide to doing your research project*. Sage.

Oliver, E. & Oliver, W.H. 2017. The colonisation of South Africa: a unique case. *HTS Theological Studies*, 73(3):1-8.

Oneale, L. 2013. South Africa – illegal Zimbabwean immigrants [Online]. Available: <http://guardianlv.com/2013/05/south-africa-illegal-zimbabwean-immigrants/> [2018, February 11].

Patton, M. Q. 2002. *Qualitative evaluation and research methods evaluation* (3<sup>rd</sup> ed.). Thousand oaks, CA: Sage Publications, Inc.

Peta, C. 2017. *Disability and Sexuality: Voices from the periphery*: London, Routledge

Peta, C., Wengraf, T. & McKenzie, J. 2018. Facilitating the voice of disabled women: the biographic narrative interpretive method (BNIM) In Action. *Contemporary Social Science*.

Petrin, T. 1994. Entrepreneurship and supporting institutions: An analytical approach: Entrepreneurship as an economic force in rural development. Hersching, Germany.

Pisani, M. & Grech, S. 2015. Disability and forced migration: Critical intersectionalities. *Disability and the Global South* 2(1): 421-444.

Polkinghorne, D. E. 1995. Narrative configuration in qualitative analysis. *International Journal of Qualitative Studies in Education*, 8, 8–25.

Polzer, T. 2009. Regularising Zimbabwe migration to South Africa. CoRMSA and University of Witwatersrand: South Africa [Online]. Available: [http://www.archive.kubatana.net/docs/migr/fmsp\\_regularising\\_zim\\_migtants\\_sa\\_0905.pdf](http://www.archive.kubatana.net/docs/migr/fmsp_regularising_zim_migtants_sa_0905.pdf) [2019, January 26].

Ponterotto, J. G. 2006. Brief note on the origins, evolution, and meaning of the qualitative research concept thick description. *The Qualitative Report*, 11(3):538-549 [Online]. Available: <http://nsuworks.nova.edu/tqr/vol11/iss3/6> [2018, May 17].

Quayson, A. 2007. *Aesthetic Nervousness: Disability and the Crisis of Representation*. New York: Columbia University Press.

Raftopoulos, B. 2006. The Zimbabwean crisis and the challenges for the left. *Journal of Southern African Studies*, 32(2):203-219.

Republic of South Africa: Department of Social Development 2016. *White paper on the Rights of People with Disabilities*. Government Gazzete No. 230, 9 March 2016

Riessman, C. K. 2005. Narrative Analysis. *The Sage Encyclopaedia of Social Science Research Methods*, 3:1-7. [Online]. Available: <http://citeseerx.ist.psu.edu/viewdoc/download?> [2018, May 5].

Robson, C. R. 2011. *Real world research: A resource for users of social research methods in applied settings*. West Sussex: TJ International Ltd.

Rosenberg, M. 2018. *Push-pull factors of migration*. [Online]. Available: <https://www.thoughtco.com/push-pull-factors-14344837>. [2019, November 30].

Sander, C. & Mambo, S.M. 2003. Migrant Labour Remittances in Africa: Reducing Obstacles to Developmental Contributions. In *Africa Region Working Paper Series*. Washington DC: World Bank.

Sanders, D. 1992. Health in Zimbabwe since independence: the potential and limits of the health sector reforms. *Critical health* 40: 52-62

SASSA. 2018. Who Qualifies for a Grant? [Online]. Available: <https://www.gov.za/services> [2019, February 12].

Schoumaker, B., Flahaux, M.L., Schans, D., Beauchemin, C., Mazzucato, V. & Sakho, P. 2015. Changing patterns of African Migration: A Comparative Analysis. In C Beauchemin (ed.), *Migration between Africa and Europe: Trends, Factors and Effects*. New-York: Springer-Verlag & INED Population Studies series.

Schwandt, T. A. 2000. 3 epistemological stances for qualitative enquiry: Interpretivism, hermeneutics and social constructionism.

Schweik, S. 2007. Begging the question: Disability, mendicancy, speech and the law. *Narrative*, 15(1):58-70.

Shakespeare, T. 2008. Debating disability. *Journal of Medical Ethics*, 34(1):11-14.

Shakespeare, T. 2017. *Disability: the basics*. Routledge.

Siebers, T. 2013. Disability and the theory of complex embodiment: For identity politics in a new register. In L. Davis (ed.) *The disability studies reader* (3rd ed). New York, NY: Routledge.

Siem, F.F. 2017. Leaving them behind: healthcare services in situations of armed conflict. *Tidsskrift for den Norske laegeforening for praktisk medicin, ny raekke*, 137(17).

Sikes, P. & Gale, K. 2006. *Narrative approaches to education research*. Faculty of education, University of Plymouth.

Soldatic, K. & Meekasha, H. 2012. "The Place of Disgust: Disability, Class and Gender in South African Government (2019) South Africa's Provinces [Online]. Available: <http://www.gov.za/about-sa/south-africas-provinces>. [2019, July 31].

Southern African, H.I.V. Clinicians Society & UNHCR. 2007. *Clinical guidelines on antiretroviral therapy management for displaced populations*. Meadowvale: Southern African HIV Clinicians Society. Spaces of Workfare." *Societies* 2 (4): 139–156.

Statistics South Africa. 2011. Census in brief [Online]. Available: [http://www.statssa.gov.za/census/census\\_2011/census\\_products/Census\\_2011\\_Census\\_in\\_brief.pdf](http://www.statssa.gov.za/census/census_2011/census_products/Census_2011_Census_in_brief.pdf) [2019, June 9].

Statistics South Africa. 2018. Quarterly labour force survey [Online]. Available: <http://www.statssa.gov.za/publications/P0211/P02112ndQuarter2018.pdf>. [2019, July 23].

Steyn, M. 1998. A New Agenda: Restructuring Feminism in South Africa. *Women's Studies International Forum*, 21(1)

Surrender, R. Noble, M., Wright, G. & Ntshongwana, P. 2010. Social assistance and dependency in South Africa: An analysis of attitudes to paid work and social grants. *Journal of Social Policy*, 39(2): 203-221.

Swain, J. French, S. Barnes, C. & Thomas, C. 2014. *Disabling Barriers – Enabling Environments*. London: Sage.

*The Rights of People with Disabilities for Areas of Need for Increased Potential* s.a. [Online]. Available: <https://humanrights.gov.au>

Timberg, C. 2005. *Refugees with hopes, skills find opportunity in South Africa*. Washington Post, Foreign Service, A 21.

Tsuda, T. 2006. Localities and the struggle for immigrant rights: The significance of local citizenship in recent countries of immigration. *Local citizenship in recent countries of immigration: Japan in comparative perspective*, 180.

United Nations. 2006. Convention on the Rights of Persons with Disabilities. [Online]. Available: <https://www.un.org/esa/socdev/enable/rights/convtexte.htm> [2018, March 22].

United Nations. 2011. Human Development Report [Online]. Available: <https://www.hdr.undp.org/reports>

United Nations. 2017. International Migration Report. *United Nations, New York*

UNCRPD. 2006. *Convention on the Rights of Persons with Disabilities* [Online]. Available: <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>. [2018, February 20].

UNESCO. 2012. *Inclusion in Education* [Online]. Available: <https://www.en.unesco.org/themes/incusion-in-education>. [2018, February 20].

UNESCO. 2017. *Learning to live together. Migrant/Migration* [Online]. Available: <http://www.unesco.org/new/en/social-and-human-sciences/themes/international-migration/glossary/migrant/> [2019, February 11].

UNHCR. 2017. *Asylum-seekers* [Online]. Available: <http://www.unhcr.org/asylum-seekers.html> [2018, August 30].

United Nations Division for Social Policy and Development (DSPD). s.a. *Refugees and Migrants with disabilities.* [Online]. Available: [https://www.un.org/development/desa/disabilities/refugees\\_migrants\\_with\\_disabilities.html](https://www.un.org/development/desa/disabilities/refugees_migrants_with_disabilities.html) [2018, December 21]

United Nations Migration Agency. 2018. *World Report on migration* [Online]. Available: <https://www.iom.int/wmr/world-migration>. [2018, August 19].

Van Ngo, H. 2009. Patchwork, sidelining and marginalization: Services for immigrant youth. *Journal of Immigrant & Refugee Studies*, 7(1):82-100.

Vergunst, R. 2016. *Access to health care for persons with disabilities in rural Madwaleni, Eastern Cape, South Africa* (Doctoral dissertation, doctoral thesis, University of Stellenbosch).

Wengraf, T. 2001. *Qualitative research interviewing*. Thousand Oaks, CA: Sage.

Wengraf, T. 2013. BNIW 5-day materials booklet two-Interpretation [Online]. Available: <https://tom@tomwengraf.com>

Woubishet, D. 2005. Begging as a means of livelihood: conferring with the poor at the orthodox ceremonial days in Addis Ababa. *African Study Monographs. Supplementary issue*, 29:185.

Woman's Refugee Commission. 2013. *Disability Inclusion in the Syrian Refugee Response in Syria*. New York: WRC

Ziebland, S. 2013. *Narrative interviewing*, pp. 38-48. Oxford, UK: Oxford University Press.

Ziebland, S. Coulter, A., Calabrese, J.D. & Locock, L. eds., 2013. *Understanding and using health experiences: improving patient care*. OUP Oxford.



## Appendices

Appendix 1: Research Ethics Committee: Human Research (Humanities) Approval Letter.



UNIVERSITEIT  
STELLENBOSCH  
UNIVERSITY

### NOTICE OF APPROVAL

REC Humanities New  
Application Form

22 June  
2018

Project  
number:  
6638

Project Title: Searching for “greener pastures”: A narrative study of the livelihoods of Zimbabwean migrants with disabilities in South Africa

Dear Mr Noel Dangarembwa

Your REC Humanities New Application Form submitted on 11 June 2018 was reviewed and approved by the

REC: Humanities. Please note the following for your approved submission:

**Ethics approval period:**

Protocol approval date (Humanities)	Protocol expiration date (Humanities)
22 June 2018	21 June 2019

**GENERAL COMMENTS:**

Please take note of the General Investigator Responsibilities attached to this letter. You may commence with your research after complying fully with these guidelines.

**If the researcher deviates in any way from the proposal approved by the REC: Humanities, the researcher must notify the REC of these changes.**

Please use your SU project number (6638) on any documents or correspondence with the REC concerning your project.

Please note that the REC has the prerogative and authority to ask further questions, seek additional information, require further modifications, or monitor the conduct of your research and the consent process.

**FOR CONTINUATION OF PROJECTS AFTER REC APPROVAL PERIOD**

Please note that a progress report should be submitted to the Research Ethics Committee: Humanities before the approval period has expired if a continuation of ethics approval is required. The Committee will then consider the continuation of the project for a further year (if necessary)

**Included Documents:**

Document Type	File Name	Date	Version
Research Protocol/Proposal	Noel Dangarembwa Research Proposal	11/06/2018	latest
Data collection tool	Noel Dangarembwa Narrative interview guide	11/06/2018	latest
Proof of permission	Noel Dangaerembwa Permission letter from PASSOP	11/06/2018	latest
Default	Noel Dangarembwa Reviewer responses to comments	11/06/2018	latest
Informed Consent Form	Noel Dangarembwa SU HUMANITIES Consent form Noel Dangarembwa	11/06/2018	latest
Informed Consent Form	Noel Dangarembwa Script	11/06/2018	latest

If you have any questions or need further help, please contact the REC office at  
cgraham@sun.ac.za. Sincerely,

Clarissa Graham

REC Coordinator: Research Ethics Committee: Human Research (Humanities)

*National Health Research Ethics Committee (NHREC) registration number: REC-050411-032.*

*The Research Ethics Committee: Humanities complies with the SA National Health Act No.61 2003 as it pertains to health research. In addition, this committee abides by the ethical norms and principles for research established by the Declaration of Helsinki (2013) and the Department of Health Guidelines for Ethical Research: Principles Structures and Processes (2<sup>nd</sup> Ed.) 2015. Annually a number of projects may be selected randomly for an external audit.*

## Investigator Responsibilities

### Protection of Human Research Participants

Some of the general responsibilities investigators have when conducting research involving human participants are listed below:

- 1. Conducting the Research.** You are responsible for making sure that the research is conducted according to the REC approved research protocol. You are also responsible for the actions of all your co-investigators and research staff involved with this research. You must also ensure that the research is conducted within the standards of your field of research.
- 2. Participant Enrolment.** You may not recruit or enrol participants prior to the REC approval date or after the expiration date of REC approval. All recruitment materials for any form of media must be approved by the REC prior to their use.
- 3. Informed Consent.** You are responsible for obtaining and documenting effective informed consent using **only** the REC-approved consent documents/process, and for ensuring that no human participants are involved in research prior to obtaining their informed consent. Please give all participants copies of the signed informed consent documents. Keep the originals in your secured research files for at least five (5) years.
- 4. Continuing Review.** The REC must review and approve all REC-approved research proposals at intervals appropriate to the degree of risk but not less than once per year. There is **no grace period**. Prior to the date on which the REC approval of the research expires, **it is your responsibility to submit the progress report in a timely fashion to ensure a lapse in REC approval does not occur**. If REC approval of your research lapses, you must stop new participant enrolment, and contact the REC office immediately.
- 5. Amendments and Changes.** If you wish to amend or change any aspect of your research (such as research design, interventions or procedures, participant population, informed consent document, instruments, surveys or recruiting material), you must submit the amendment to the REC for review using the current Amendment Form. You **may not initiate** any amendments or changes to your research without first obtaining written REC review and approval. The **only exception** is when it is necessary to eliminate apparent immediate hazards to participants and the REC should be immediately informed of this necessity.
- 6. Adverse or Unanticipated Events.** Any serious adverse events, participant complaints, and all unanticipated problems that involve risks to participants or others, as well as any research related injuries, occurring at this institution or at other performance sites must be reported to Malene Fouche within **five (5) days** of discovery of the incident. You must also report any instances of serious or continuing problems, or non-compliance with the RECs requirements for protecting human research participants. The only exception to this policy is that the death of a research participant must be reported in accordance with the Stellenbosch University Research Ethics Committee Standard Operating Procedures. All reportable events should be submitted to the REC using the Serious Adverse Event Report Form.

- 7. Research Record Keeping.** You must keep the following research related records, at a minimum, in a secure location for a minimum of five years: the REC approved research proposal and all amendments; all informed consent documents; recruiting materials; continuing review reports; adverse or unanticipated events; and all correspondence from the REC
  
- 8. Provision of Counselling or emergency support.** When a dedicated counsellor or psychologist provides support to a participant without prior REC review and approval, to the extent permitted by law, such activities will not be recognised as research nor the data used in support of research. Such cases should be indicated in the progress report or final report.
  
- 9. Final reports.** When you have completed (no further participant enrolment, interactions or interventions) or stopped work on your research, you must submit a Final Report to the REC.
  
- 10. On-Site Evaluations, Inspections, or Audits.** If you are notified that your research will be reviewed or audited by the sponsor or any other external agency or any internal group, you must inform the REC immediately of the impending audit/evaluation.

## Appendix 2: Consent Form



UNIVERSITEIT • STELLENBOSCH • UNIVERSITY  
jou kennisvennoot • your knowledge partner

### **STELLENBOSCH UNIVERSITY CONSENT TO PARTICIPATE IN RESEARCH**

---

You are invited to take part in a study conducted by **Noel Dangarembwa**, from the **Centre for Rehabilitation Studies** at Stellenbosch University. You were approached as a possible participant because you are a disabled Zimbabwean migrant leaving in Cape Town. Little has been researched or is known about the experiences of disabled Zimbabwean migrants in Cape Town. It is important for you to talk about your experiences, so that they can contribute towards making recommendations for both disability and migration policy in South Africa as the receiving country.

#### **1. PURPOSE OF THE STUDY**

I am carrying out a study on the livelihoods of disabled Zimbabwean migrants in Cape Town. Participation in this study is meant for six to eight disabled persons who are aged between 18 and 65 years currently living in the Western Cape. I am carrying out this study so that I can exhumate the livelihood experiences of disabled Zimbabwean migrants in Cape Town so as to influence policy and practice.

#### **2. WHAT WILL BE ASKED OF ME?**

If you agree to take part in this study, you will be asked to participate in an interview with the researcher in which you tell the researcher your whole life story, with a particular focus on your livelihood experiences and your migration from Zimbabwe, to Cape Town. You can take as much time as you want we will end the interview when you have finished telling me your story. Thereafter I can ask questions based on the story you would have told, or I can phone you on a different day to clarify some issues. I will record the interviews. You can choose a place where you want the interview to take place.

#### **3. POSSIBLE RISKS AND DISCOMFORTS**

I will ensure that whilst you are participating in this study, you are not at risk of experiencing any potential physical, emotional, psychological, legal, or reputational harm. However, if you feel stressed by remembering some painful or unsettling experiences, I can refer you for counselling at your convenient appointment period with a colleague who volunteers psychological services at PASSOP free of charge.

#### **4. POSSIBLE BENEFITS TO PARTICIPANTS AND/OR TO THE SOCIETY**

Your participation is likely to help you to reflect on your experiences, and what you share can also help others who are in a more or less similar situation, but who have not had the chance to participate in this research.

#### **5. PAYMENT FOR PARTICIPATION**

There is no money that is due to you for participating in this study. But if you use your money for transport for the purposes of this study, such money will be refunded upon completion of the interview.

#### **6. PROTECTION OF YOUR INFORMATION, CONFIDENTIALITY AND IDENTITY**

Any information you share with me during this study that could possibly identify you as a participant will be protected. This will be done by keeping all the information you share with me privately in a locked cabinet in my supervisor's office, including your names, address and phone number, so no one will have access to it. If I publish a book or an article or a report about this study, I will not reveal your real identity, I will use a pseudonym instead to hide your identity.

Information that will be audio-recorded during the interview will be kept in a laptop with a password only known to me and will not be accessible to anyone else. You can choose to review or edit the recordings. After publication of the Thesis all voice recordings and notes taken will be erased.

#### **7. PARTICIPATION AND WITHDRAWAL**

You can choose whether to be in this study or not. If you agree to take part in this study, you may withdraw at any time without any consequence. You may also refuse to answer any questions you don't want to answer and still remain in the study. The researcher may withdraw you from this study if you exhibit signs of severe emotional or psychological discomfort.

#### **8. RESEARCHERS' CONTACT INFORMATION**

If you have any questions or concerns about this study, please feel free to contact **Noel Dangarembwa** on **079-789-8518**, and/or the supervisor **Martha Geiger** at **mgeiger@sun.ac.za** or **021 938 9090**

#### **9. RIGHTS OF RESEARCH PARTICIPANTS**

You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have questions regarding your rights as a research participant, contact **Ms Maléne Fouché** [[mfouche@sun.ac.za](mailto:mfouche@sun.ac.za); **021 808 4622**] at the **Division for Research Development**.

.....  
 DECLARATION OF CONSENT BY THE PARTICIPANT

As the participant I confirm that:

- I have read the above information and it is written in a language that I am comfortable with.
- I have had a chance to ask questions and all my questions have been answered.
- All issues related to privacy, and the confidentiality and use of the information I provide, have been explained.

By signing below, I \_\_\_\_\_ agree to take part in this research study, as conducted by **Noel Dangarembwa**

\_\_\_\_\_  
**Signature of Participant**

\_\_\_\_\_  
**Date**

**DECLARATION BY THE PRINCIPAL INVESTIGATOR**

As the **principal investigator**, I hereby declare that the information contained in this document has been thoroughly explained to the participant. I also declare that the participant has been encouraged (and has been given ample time) to ask any questions. In addition I would like to select the following option:

	The conversation with the participant was conducted in a language in which the participant is fluent.
	The conversation with the participant was conducted with the assistance of a translator (who has signed a non-disclosure agreement), and this "Consent Form" is available to the participant in a language in which the participant is fluent.

\_\_\_\_\_  
**Signature of Principal Investigator**

\_\_\_\_\_  
**Date**



### Appendix 3 PASSOP Permission Letter



Tulbagh Centre Building – Room 413-414, 16 Hans Strijdom Avenue, CAPE TOWN, RSA  
Office: 021 418 2838; E-mail: [office@passop.co.za](mailto:office@passop.co.za)

17 May 2018

Dear Noel Dangarembwa

We acknowledge receipt of your request to use our Organisation as an entry point to your research study. As an organisation we will do everything possible to assist you with access to participants and any information you might need.

As an organisation our main focus is migrants from across the globe with emphasis on African migrants disabled or able bodied.

We advocate for the rights of migrant refugees and asylum seekers of which disabled persons are also part of our database.

For more information, please do not hesitate to contact us on 021 418 2838 or e mail us at [office@passop.co.za](mailto:office@passop.co.za)

Sincerely

PASSOP Para-legal Team

**PASSOP**  
PEOPLE AGAINST SUFFERING OPPRESSION & POVERTY  
37 Church Street, Wynberg Cape Town  
Tel: 021 820 4663 / 021 820 4864  
Email: [office@passop.co.za](mailto:office@passop.co.za)  
Web: [www.passop.org](http://www.passop.org)

## Appendix 4: Narrative Interview Guide

### **Narrative Interview (NI) Guide**

**Searching for “greener pastures”. A narrative study of the livelihoods of Zimbabwean migrants with disabilities in South Africa**

**The Research Question for my study is:**

How do disabled Zimbabwean migrants in South Africa experience their livelihoods?

**The Theory-Question which my Research Question unpacks, and to answer which I want to use the NI guide material is:**

1. How does migration, identity, disability and poverty influence the experiences of Zimbabwean disabled migrants (Intersectional model)

**The Type of person whom I intend to administer this NI guide is**

A disabled Zimbabwean migrant with a physical or sensory disability, aged between 18-65years and residing in Cape Town.

**The Interview guide**

As we have discussed before, I am researching on the livelihood experiences of Zimbabweans with disabilities living in the Western Cape.

May you please tell me about the story of life, including your experiences as a disabled Zimbabwean migrant living in South Africa, your migration journey, and how you are accessing a livelihood? You may start from wherever you like and I will not interrupt you. I will be recording and taking some notes in case I have further questions for you after you finish telling me your story.

## Appendix 5: Chido's Narrative - Sub-session 1

**Date of Interview – 14 August 2019**

	<b>Question</b>	<b>Narrative</b>
1.	As I have discussed with you before, I am carrying out a study on the livelihood experiences of Zimbabwean migrants with disabilities living in Cape Town, South Africa. Could you please tell me about your life story, including your experiences as a Zimbabwean migrant with disability living in South Africa, your migration journey from Zimbabwe, and what your livelihood sources are? You may start from any point of your life that you choose, I will not interrupt you, but I will be recording the interview with this audio-recorder and taking just some few notes in case I have further questions that I may want to ask you after you have finished telling me about it all.	My name is Lucia Chinake, I came here to Cape Town in 2013. Oh! things were just hard in Zim, I just said let me go. If I stay I die, if I go I may die, but maybe I may survive, but let me just go. You see in life a person must work, if you don't work you are like a dead person. Some people are lazy they don't want to work, but I saw that I must work. Some people are afraid to come to South Africa, because they say oh! there are robbers and thieves in South Africa, but surely if you fear the thief of South Africa, what can you do in life. I decided, enough is enough with this suffering in Zimbabwe, I am going to South Africa. You see, people will say oh! don't go, oh! don't do this, or oh! you meet a thief in South Africa, but so what, life must go on. I am here in South Africa now I am working. That is the story of my life, I work, I earn my money I live my life, that's all I can tell you about my life.

## Appendix 6: Chido's Narrative - Sub-session 2

**Date of Interview – 14 August 2019**

	<b>Question</b>	<b>Narrative</b>
1	You said you came here to Cape Town in 2013, do you remember any incident about that time when that was happening?	Oh! Sorry I should have told you more. I was with my friend who had lived in Cape Town since 2009, so she told me that these long-distance truck drivers organised everything at the border for illegal immigrants. I paid a bit of money to the truck driver who then paid the officials and I passed through the border without any problems. So, the truck was going to Cape Town, so the journey was easier because the driver took us straight to Cape Town where my friend had a place to stay. Hey! In Zimbabwe, I would hear people talking about South Africa and saying that life was better there, so I also decided to go to South Africa to look for a job so that I could get money and send it back home to my children, so they could buy food and pay school fees.
	You said in Zimbabwe, you would hear people talking about South Africa and saying that life was better there, so you decided to go to South Africa to look for a job so that you could get money and send it back home to your children, so they could buy food and pay school fees, do you remember anything else about that time when all that was happening?	I started to look for a job as a domestic worker and I found it after about two months of staying in Cape Town with my friend. I could not look for any professional job because I just have high school education and no job skills. I also did not have the right documents for staying in South Africa. But hey! I started to work for a White man and my working conditions were fine as I started work at 8am and finished at 5pm. I was staying at the White man's place, and food and other basics such as bath soap and body lotion I was given. But sometimes the White man would say he does not have money to pay me. I continued for three months until I realised that Oh! I was not going to get paid, and I decided to leave the job. The first White man never paid me for three months and I quit the job and I became a domestic worker again.
	You said the first White man never paid you for three months and you quit the job you became a domestic worker again. Do you remember	After the first job I became a domestic worker again for another White man for almost one year. This man was better because he was paying me about R1500 every month. Oh! Life is not easy, he got so sick with cancer and hey! He died, and

<p>anything else about that time when all that was happening?</p>	<p>my job ended just like that. I started looking for a job again and I found another White Portugal man and I worked for him for about six months. But you see, one day he just said to me: “Chido I’m going back to my country so there is no longer a job for you here.” It was hard for me to swallow but I had no choice but to become a loafer again, whilst looking for another job. Life is not easy because I am a disabled woman, some employers just don’t like to employ disabled people. If they call me for an interview and they see my artificial leg, they just say “No! You can’t play with my kids with a leg like that.” Some games [like ball games and skip rope] are specific for the child so you find that I might be slow, a person who can run faster and play with the child becomes better, so able bodied domestic workers have an advantage over me.</p> <p>Now, If you put yourself in my shoes you will see that in this country, you will just be working but the money is not that much. Oh! the money is little, like for us who come from Zim, we have many things to do such as paying school fees for the kids back home and sending money to those looking after the kids, so they can buy food to survive. Don’t forget that as a domestic worker, one can never earn a lot of money, no matter what the employer’s skin colour is. Yet, everywhere I stay, I should make sure that I pay rent where I live as well as buy food. If I earn R1500, then I pay rent in Gugulethu Township for R500 for my room, then I buy food, then by the end of the day I have very little left. But I still stay in South Africa because in Zim, jobs are hard to find. But it’s only a way of surviving, however, because things do not really go well because employers pay very little. Uh! I decided to travel back to Zimbabwe to see my children.</p>
<p>You said you decided to travel back to Zimbabwe to see your children, do you remember anything else about that time when all that was happening?</p>	<p>Oh! Remember I told you that I came here as an illegal. It’s because I don’t have much school. I just did my ‘O’ levels and I got married. Later I got divorced. My leg is amputated, at the hospital. The person who hit me with the car did not stop, but somebody called an ambulance and I was taken to the hospital where I was treated</p>

		<p>and I started using crutches. I struggled to use crutches because at times I would lose balance especially when someone pushed me. The hospital told me to buy an artificial leg. But to get the money was hard, but I got help from my family, so now I have artificial leg. I am married but I am separated, my ex-husband is blind.</p> <p>But here in South Africa, I saved a bit of money to buy food for my children and to pay school fees for them. I also thought it was not good to live in South Africa as an illegal. I was thinking that one day I would be caught by the police and that would make things worse for my children back home and I. So, you see, when I got home to Zimbabwe, I decided to apply for a passport so that I could become a legal immigrant in South Africa and bring my children along. I came back to South Africa and applied for asylum, now I have legal asylum in this country, so it's better for me. Ah! I decided not to work in people's houses but to start my own dressmaking business which I run from my home.</p> <p>For the future I look forward to establishing my business in a proper place and to employ some of the local people in my company, to make more money and to build my house in Zimbabwe, so that when I go back home I will have my own place to stay and I am not renting.</p>
	<p>You said you decided not to work in people's houses to start your own dressmaking business which you run from home, can you give me an example of how you run your business?</p>	<p>So, you see, now I am sewing things from home for people who place orders with me. That is how I am surviving. Aaah! I think it is better to do my own things. I am now setting targets for myself for what I want to do during the day and how much work I should put into it, and at what time. I can decide on the time and place that I want to go to, on any given day. At times I get more money than the little that employers used to give me. I have even managed to bring two of my older children here in South Africa. My first-born child finished four years of high school in Zim, but I could not afford to take him further, so he also came here and is working at a Steers food outlet. My second born child also finished four years of high school and he also came here. But</p>

		<p>hey! I want him to go back to Zimbabwe to finish the last two years of high school education, but I don't have enough money yet. I think I am doing well, even though my husband left me.</p>
	<p>You said your husband left you, do you remember anything else that happened during that time when all that was happening?</p>	<p>My ex-husband is blind, but he did not want me because I became a disabled woman. He does not like that I don't have one leg. So he decided to run away from me and the children in our rural home in Murehwa. He went to look for an able-bodied woman. But you see, the artificial leg brought hope to my life. I began to move from place to place and for longer distance. Before the artificial leg, I just had crutches and Uumh! crutches are harder to use. But this artificial leg wears out as I continue to walk, sometimes it moves from position and that means that every year I must take it to the orthopaedist to be fixed. Sometimes, my foot is not "okay" and I want to have it replaced, but I often suffer to raise money to buy a replacement.</p> <p>But, I went into the flea market business and I began to buy and sell second hand clothes so that I could raise money to look after my three children. When I started operating a flea market it was doing well because it was the harvest season in Zimbabwe. Farmers were selling their maize at the Grain Marketing Board (GMB) so they had money which they used to buy clothes from my stall. The flea market began to suffer when the whole country began to face financial problems. During that time, it was hard to get money or to save money or to even buy food. People were just talking about inflation and large amounts of money that was like millions of dollars but that could not buy anything. A lot of people could not get jobs and life was hard. I began to suffer to feed my children.</p> <p>The last-born child is the one who is back home staying with my mother whom I send money monthly. My ex-husband does not care about the children. I called and told him that our son had passed his O level and we should help him to go further, but he simply said "Aaah! I don't have</p>

		<p>the money?” Hey! it’s a real curse. You see, let me tell you these things because you are still young. Usually when a man marries another wife he starts focusing on that new family forgetting that he has other children. My husband began to think that I am brainless. But you see I feel that I have done well. Although I have failed to send my first-born child to University, but at least I managed to pay for him to finish seven years of primary school and four years of high school, before he came to South Africa; so, he is not completely uneducated. I am trying to do better with the last two children, so I think that disabled persons should be given chances to show what they can do with their own brains.</p>
	<p>You said your husband began to think that you are brainless, do you remember anything else about that time when all that was happening.</p>	<p>Disability does not mean that one is brainless, but a disabled person can do even more than those who think they are able bodied in everything. You see, I have always been against handouts. I strongly believe that there are empowerment activities that should be done by the government for disabled people. Imagine how successful I could be if I could get a business place from which I could run my sewing business. Right now, I am operating from home and for a customer who does not know me or my other contacts they cannot come to me. In a business complex, I can be seen by many people, so I can get more clients and I can pay my rentals with ease, just like able bodied people. You see, I could even employ a lot of people if my sewing business grew big, but because I am a disabled migrant the business systems here overlook me.</p> <p>To think that disability takes away my family as well as my income and a government hospital requires me to pay lots of money, is just unfair. If they do not want us to be treated for free, then they should just reduce the cost so that we share the costs with the Government. Every now and then we hear issues concerning the youths and child marriages, people such as me are not spoken about because they think disability means I am useless. Do you know how it feels to be a divorced disabled mother with three children to look after? I know you may never know how it</p>



		<p>feels because you are a man, but when I used to think about my life and everything we were hoping to achieve in our lives as a family, I would break down and cry.</p> <p>I finally accepted that I was now alone without a husband and I could move on from where I was. I just wish my husband could help me financially in raising these children. Right now, I am the one paying their school fees and all the other bills. If only people in my situation could be protected by some sort of government law so that disabled people do not face the same hardships as I faced. But I am also grateful to this government of South Africa because here when my leg pains me, I go to Gugulethu clinic. They examine my artificial leg and when they see that some edges of the stump are not aligned they fix it for free. At Old Mutual Centre, a hospital with an orthopaedic centre, they crafted a beautiful artificial leg for me free of charge, which is good for me. That kind of good and free medical treatment helps me so that I continue to work and look after my children. In Zimbabwe it would have been difficult. That is all I can tell you about my life, thank you.</p>
	<p>Do you have anything else that you would like to tell me</p>	<p>No, not at all, otherwise we can talk the whole day, if I think of something else, I will bip you on your phone, thank you for coming to talk to me, it helps me to look back on my life and to see the good things that God has done for me.</p>

## Appendix 7: Chido's Narrative - Sub-session 3

**Date of Interview – 23 August 2019**

	<b>Question</b>	<b>Narrative</b>
1.	You said you went to school in Zimbabwe, where you born in Zimbabwe and how old are you?	Oh! Yes! I was born in Zimbabwe, I don't remember the year, but I know I am 36 years old.
2.	Do you remember when you got married?	Ah! I remember, it was too early, I am embarrassed to say. I don't know why I was rushing for marriage. I just finished school in 1998, when I was sixteen years old that is the same year that I got married.
3.	You said your husband left you, do you remember when that was?	Oh! No! It didn't take very long before he left me. He divorced me after four years of marriage in 2001 when I was involved in a car accident in Zimbabwe and my leg was amputated at the hospital.
4.	Do you remember how old you were when your leg was amputated?	Yes!, Yes! Yes! I remember, very well, I can't forget, I was 22 years old.
5.	Did you get the artificial leg in Zimbabwe or here in South Africa?	Not here, but I bought the artificial leg in Zimbabwe.
6.	When did you venture into the flea market business?	Ah! It all started in 2004, when I was 24 years old. That is when I went into the flea market business and I began to buy and sell second hand clothes so that I could raise money to look after my three children.
7.	Do you remember how old you were when you came to South Africa?	Oh! yes, yes, I can't forget that day. I just came to South Africa in 2013 when I was 31 years old.
8.	You said you travelled back to Zimbabwe to see your children and to pay school fees for them. Do you remember when that was?	It was after about two years of living in South Africa, and in 2015 when I was 33 years old, I travelled back to Zimbabwe to see my children, using the same illegal means.
9.	You said your second born child finished four years of high school education and he also came here in November; do you remember when that was?	It was in 2017. But I want him to go back to Zimbabwe to finish the last two years of high school education.