

https://dspace.org/

Exploring the psychological needs of cross-border unaccompanied minors in Johannesburg: how cross-border unaccompanied minors are challenging psychosocial programmes

Johnston, Libby

2012-08-24
http://hdl.handle.net/10539/11791

Downloaded from a DSpace repository. https://dspace.org/

EXPLORING THE PSYCHOSOCIAL NEEDS OF CROSS-BORDER UNACCOMPANIED MINORS IN JOHANNESBURG

How cross-border unaccompanied minors are challenging psychosocial programmes

Libby Johnston

A thesis submitted in fulfilment of the requirements for a degree of Master of Arts (Coursework and Dissertation)

Forced Migration Studies Programme

University of the Witwatersrand

564174

Supervisor:
Dr. Jo Vearey

2011

I, LIBBY JOHNSTON do solemnly declare that this thesis is a construction of my own work. In addition, this thesis and all of its contents has not been used as a submission for any other degree or submitted at any other university.

Libby Johnston

Johannesburg, May 2012

Key Terms

Migrant: a person who leaves their place of birth to another location. It can be within the state of birth or to a foreign state.

Cross-border migrant: a person who migrates to another country other than that of birth and/or citizenship.

Unaccompanied Minor (UAM): a person who has not reached the age of 18, who is without any legal guardian, care-giver, or person over the age of 18. This can be a child separated, abandoned, orphaned or run-away (UNHCR, 1996).

Minor: a person who has not reached the age of majority. In the South African context the Age of Majority Act of 1972 defines a minor as a person under the age of 21, but in 2007 the new draft of the Children's Act (2008) clarifies that a minor is any person under 18, unless emancipated by order of court, is a child and any person over 18 is an adult (Blacksash, 2011).

Child: every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier (CRC, 1989:Article 1).

Protective Factors: is anything that prevents or reduces vulnerability for the development of a disorder (Raghallaigh and Gilligan, 2010; Bernard, 1993; Kohli et al., 2003; Summerfield, 2000; Van Willigen, 2000). This includes internal resources such as; confidence, self-identity, and judgment and external resources such as; church, friends, and other social groups (Arnston and Knudsen, 2004 and as mentioned in Førde's (2007) research on UAMs' resilience).

Vulnerability: is the capacity or susceptibility to being wounded or hurt, emotional and psychical. Steele (1992) describes 'vulnerable' groups as persons who are open to moral attack, criticism and temptation, solely based on their situation or characteristics.

Livelihood-Seeking Migrant: a person who relocates to find better opportunities in another location.

Psychosocial: is the identity of self that we acquire from our everyday interactions and environment (Markstrom, Sabino, Turner, and Berman, 1997). For the purposes of this research psychosocial is defined as a person's overall well-being. This includes all aspects of a persons' life which affects their well-being including emotional, psychological, social, legal or environmental.

Urban Space: is defined as a built up area that accommodates large numbers of people living in close proximity to each other, and were the major of people sustain themselves by means of formal and informal employment and the provision of goods and services (UNHCR, 2009b).

Abstract:

Background:

This research investigates the psychosocial needs of cross-border unaccompanied minors (UAMs) within urban Johannesburg, a city that attracts nearly half of all the cross-border migrant population in South Africa (Landau and Gindrey, 2008). The focus of the research is dual; firstly, it explores what the prime psychosocial needs of UAMs are by eliciting them from the UAMs themselves via participatory research workshops. South Africa, by law, has an obligation to all UAMs to provide for them. By ascertaining these needs, this study reveals discrepancies between existing psychosocial programmes designed and provided by the government or service providers and the needs of the UAM. Secondly, the research examines how UAMs are trying to satisfy their psychosocial needs. Identifying the psychosocial needs of UAMs and their coping mechanisms gives us a better understanding of the nature of the issues UAMs face, as well as their subjective perception of and priority they place on those issues. This can consequently contribute (a) to providing constructive suggestions on designing psychosocial programmes by governmental, non-governmental organisations (NGOs), and non-profit organisations (NPOs) and (b) valuable input to further research on livelihood-seeking UAMs, a group that is currently under-represented in cross-border UAM studies, unlike asylum seeking or refugee UAMs.

Aims:

The aim of this study is to understand the psychosocial needs of UAMs and how they are meeting those needs in Johannesburg. This will provide insights on the nature of the psychosocial needs of UAMs that will ultimately be helpful both to government agencies as well as NGOs and NPOs responsible for programme planning, legislation, and execution of policies regarding cross-border UAMs. Finally, the study aims to draw attention to livelihood-seeking UAMs and to encourage further research on this particular group of UAMs. Therefore my research question is: what are the psychosocial needs of cross-border UAMs in Johannesburg?

Methods:

In this study, a qualitative research approach is used with the aim of uncovering the psychosocial needs of cross-border UAMs. This was done by using participatory action research and a visual methodology. The data was elicited via two participatory workshops, the first with 36 cross-border minors participants and the second with 12 cross-border UAM participants. This was followed by a series of group discussions after the workshops. Afterwards, a comparison between the participants' visual inputs with their narratives and responses allowed me to extrapolate their psychosocial needs and ways in which they meet those needs. Adding to the study, 11 semi-structured interviews were conducted with service providers from various organisations, both non-governmental and governmental. Finally, the data was compiled from both the cross-border UAMs and service providers to answer the research question and objectives.

Conclusion:

This research identifies and discusses the following psychosocial needs of cross-border UAMs: **family, a care-giver, documentation, fitting-in with their South African peers,** security, schooling, better life quality (economic and social advancement), counselling, and playing. The four themes in bold text represent psychosocial needs, which continue to be unmet or unfulfilled by service providers current responses. Although the basic (ontological) needs of cross-border UAMs seem to be met (i.e., food, housing, clothing), psychosocial needs - those needed for emotional well-being - are undermined because service providers do not see them as fundamental as basic needs.

One conclusion from my study is that NGOs can better cater to UAMs' psychosocial needs due to their flexible infrastructure that can accommodate personalisation and prompt redesigning of programmes offered, in contradistinction to the recalcitrant governmental infrastructure. Currently service providers, such as governmental departments, NGOs and NPOs use the law (such as the Children's Act (2008)), regulations or psychosocial programmes to aid cross-border UAMs, but these laws and programmes are manufactured for either homogenous groups or very specific groups such as refugees and asylum seekers. However, there are persisting gaps in the services available. These gaps are due to the varied nature of psychosocial needs that each 'child' has to meet, which is also contingent on their own background and personality. Under the Children's Act (2008), minors are categorised as a homogeneous group and therefore individual needs are overlooked. Organisations both governmental and non-governmental have tried to incorporate child friendly practices, although in most of the interviews it was mentioned that policy, such as the Children's Act (2008), is not necessarily 'child' or 'family' friendly.

Overall this research indicates that NGOs and NPOs are well-equipped to cater to the psychosocial needs of UAMs, such as school, family reunification and basic needs. Certain psychosocial needs, however, such as 'fitting-in', are still unmet. In these cases, UAMs resort to catering to their own needs (lke living on the street in self-appointed families), relying on service providers for emotional support and/or basic needs.

Keywords: Unaccompanied Minors (UAMs), Children, Johannesburg, Psychosocial, Separated Children, Migrant Children, Migration in South Africa

Acknowledgements:

This research would have never been possible without the help and constant encouragement of Dr. Jo Vearey. Every time I was lost and did not know where to pick-up again, Jo was always there. I would have never managed to complete it without her support, guidance and encouragement. I am extremely grateful that she was my supervisor.

I would like to thank the many people that were involved in the fieldwork process; from helping me find unaccompanied minors around Johannesburg to offering space to hold my workshops to helping me manage nearly forty minors for two-days. Special thanks to; JCAF, Kids Haven, Sophiatown and RAO for your support in this research. I would like to give particular thanks to; Moria, Nozie, Siya, Luke, Johanna, Liebe and Farriah.

I would like to thank Alexandra Ioannidou (Johnston), for your constant support and love during my crazy moments. You were always around with food and a cup of tea during those long nights. You never gave up on me, even when I had tried to give up a few times myself. I honestly cannot thank you enough for all that you have done. S'agapou moro mou.

Lastly, I would like to thank the participants of the UAM workshops and service providers for giving me your time, support and laughter, without our time together this research would hold no meaning.

Structure of the Research Report:

This is a Masters thesis written on a research project that focused on the psychosocial needs of cross-border unaccompanied minors (UAM) in Johannesburg. In this section, I will introduce how the thesis has been organised, and the methodologies used throughout the research process.

Chapter one offers an introduction to migrants and cross-border unaccompanied minors (UAMs) and reasons why it was vital to do research with this particular group and why in Johannesburg. It outlines the rationale, research question, objectives and the scope that this study will address.

Chapter two provides a detailed literature review which spans over five themes that directly relate to my research questions: i) migration and unaccompanied minors, ii) psychosocial theory, iii) psychosocial needs of unaccompanied minors iv) participatory research methods and v) visual methodologies.

Chapter three reviews the conceptual framework. It draws on 'modern' psychosocial theory and is supported by participatory research with the UAMs: i) the drawings, ii) the group discussions, iii) the semi-structured interviews and iv) observations of the research.

Chapter four is an overview of the research design and methodologies used. There is a brief discussion revolving around the participation of UAMs and service providers in research.

Chapter five provides an introduction to ethics and how it affects the research and participants.

Chapter six presents the role and reflexivity of the researcher. Then continues to show the data collected alongside an analysis of the UAMs activities and service providers semi-structured interviews. At the end of each subsection central themes that arose from the analysis are presented. The themes from the UAMs were derived from five participatory activities i) my journey, ii) weekly activities, iii) challenges and problems faced, iv) what I want to be and v) group discussions. The themes brought forth by the service providers were extracted from semi-structured interviews.

Chapter seven presents limitations of the study. It highlights my involvement with organisations and challenges I faced while conducting this research as well as more practical limitation like time constraints and language barriers.

Chapter eight sums up the findings and discussion followed by suggestions for topics that have yet to be explored academically and need further research.

List of abbreviations:

ACMS – African Centre for Migration & Society
CMC – Central Methodist Church
CRC – Convention on the Rights of the Child
CSVR – Centre for the Study of Violence and Reconciliation
DHA – Department of Home Affairs
DHSD – Department of Health and Social Development
DOE – Department of Education
DRC – Democratic Republic of the Congo
DSD – Department of Social Development
ISS – Institute for Security Studies
JCAF – Johannesburg Child Advocacy Forum
JRS – Jesuit Refugee Services
LHR – Lawyers for Human Rights
NGO – Non-governmental organisation
NPO – Non-profit organisation
RAO – Refugee Aid Organisation
UAM – Unaccompanied Minors
UNHCR – United Nations High Commissioner for Refugees

Contents

TERMS..... ii
ABSTRACT..... iii-iv
KEYWORDS..... iv
ACKNOWLEDGEMENTS..... v
STRUCTURE OF THE REPORT..... vi
LIST OF ABBREVIATIONS..... vii
CONTENTS..... viii-x
LIST OF MAPS..... ix
LIST OF FIGURES…..... x
LIST OF TABLES..... x

1 INTRODUCTION TO THE RESEARCH..... 2
1.1 Rationale of Research..... 4
1.2 Research Question..... 5
1.3 Objectives of the Study..... 6
1.4 Scope of the Study..... 6
2 LITERATURE REVIEW..... 8
2.1 Migration and Johannesburg..... 8
2.2 UAMs in Johannesburg..... 11
2.2.1 UAMs in the law..... 13
2.2.2 CRC..... 14
2.2.3 Documentation..... 15
2.2.1 Language Barrier……..……...…… 16
2.2.2 Xenophobia..... 17
2.3 UAMs and Vulnerability..... 18
2.4 Defining psychosocial…….....…… 23
2.4.1 Psychosocial Theory..... 24
2.4.2 Psychosocial Needs of Unaccompanied Minors..... 27
2.4.3 Programming in RSA…….. 29
2.5 Child vs. Minor..... 32
2.6 Participatory Research Methods..... 34
2.6.1 UAMs and participation..... 35
2.6.2 Semi-structured interviews..... 36
2.6.3 Visual Methodologies..... 36
2.6.4 Drawings..... 37
2.7 Conclusion..... 38
3 INTRODUCING THE CONCEPTUAL FRAMEWORK..... 39
4 RESEARCH DESIGN AND METHODOLOGY..... 41
4.1 Preparing for the Study..... 41
4.2 Four Phases of Research..... 43
4.2.1 Finding the service providers and cross-border UAMs 43
4.2.2 Semi-Structured Interviews with the minors as Individuals Pairs and Groups…….....…….. 44
4.2.3 Semi-Structured interviews with Service Providers as individuals, pairs or groups.....…… 45
4.2.4 Feedback…….. 45
4.3 The Workshop…..... 46
4.3.1 The Research Site…….. 46

4.3.2 Participatory UAMs Workshop 46
4.3.3 Workshop Questions and Activities 47
4.4 Semi-Structured Interview 48
4.5 Observations 49
4.6 Logistics 50
5 ETHICS 51
5.1 Minimising Harm 51
5.2 Ethics of Research with Minors 52
5.3 Ethics of Research with Service Providers 53
6 DATA ANALYSIS AND DISCUSSION 55
6.1 Reflexivity and the Role of The Researcher 59
6.2 My Journey 59
6.2.1 "The Police Took Me There" 60
6.2.2 "When My Mum Died" 62
6.3 Problems And Challenges Faced 68
6.3.1 "They Tease Me Because I'm Different" 69
6.3.2 "We Need A Better Future" 70
6.4 Weekly Activities 74
6.4.1 "I Cannot Go To School, So I Help" 75
6.4.2 "I Learn English, So One Day I Can Go To School" .. 76
6.5 When I Grow Up 80
6.5.1 "I Will Be A Nurse and Go to Foreign Areas to Help People Like Me" 80
6.5.2 "I Will Go To Wits To Become An Engineer" 81
6.6 Discussion 89
7 LIMITATIONS 97
7.1 Working at RAO 97
7.2 Who Participates? 98
7.3 Who is an UAM? 99
7.4 Working with Minors 100
7.5 Limited Time Frame 100
7.6 Limitation of Language and Translation 100
7.7 Truthfulness 101
8 CONLCUSION 102

REFERENCES

List of Maps:

Map 1: Map of the City of Johannesburg 11

List of Tables:

Table 1:Basic Human Needs 23
Table 2: Needs Granted by South African Law 24
Table 3: Minors Who Participated? 57
Table 4: UAMs Who Participated? 58
Table 5: What are the Psychosocial Needs? 68
Table 6: What are the Psychosocial Needs? 74
Table 7: What are the Psychosocial Needs? 79
Table 8: What are the Psychosocial Needs? 80
Table 9: Consolidation of Minors' Psychosocial Needs 87

Table 10: Service Providers Who Participated? 90

List of Figures:

Figure 1: ZimUAM/RefUAM/OtherUAM 88
Figure 2: NGO/Gov't/UAMs 95
Figure 3: The Gap 96

List of Drawings:

Drawing 1: "The Police Took Me There" 60
Drawing 2: "When My Mum Died" 62
Drawing 3: "They Tease Me Because I'm Different" 69
Drawing 4: "We Need A Better Future" 70
Drawing 5: "I Cannot Go To School, So I Help" 75
Drawing 6: "I Learn English, So One Day I Can Go To School" 76
Drawing 7: "I Will Be A Nurse and Go to Foreign Areas to Help People Like Me" 80
Drawing 8: "I Will Go To Wits To Become An Engineer" 81
Drawing 9: "I Light The Way" 84

APPENDICES

APPENDIX A: Ethics Clearance Certificate
APPENDIX B: Information Sheet for UAMs Workshop
APPENDIX C: Information Sheet for Service Providers
APPENDIX D: Semi-Structured Interviews with Service Providers
APPENDIX E: Workshop Activities
APPENDIX F: Workshop Games
APPENDIX G: Sample Schedule of Workshop
APPENDIX H: Drawings

1 Introduction to the Research

The general interest of this research is the psychosocial needs of cross-border UAMs in Johannesburg. The study tries to identify the needs of UAMs and also determine how they cope with unmet needs. As a next step, I am discussing what the role of the state, service providers, or community is in meeting the needs of cross-border UAMs. In doing so, I show that cross-border unaccompanied minors are challenging existing psychosocial programmes as well as current governmental policies and regulations which add more levels of complication to an already problematic issue. I am answering my research question - what are the psychosocial needs of UAMs in Johannesburg? - while addressing my objectives i) analysing how cross-border UAMs challenge existing psychosocial programmes, ii) ascertaining the roles of the state, service providers and community in meeting those needs, iii) determining how cross-border UAMs deal with unmet psychosocial needs and iv) challenging socially constructed notions of childhood in this study.

It would be helpful at this point to introduce and briefly discuss some key terms used in the objectives of this study. This will set the stage for the rest of the discussion in the following chapters which will explain in more detail why it focuses on Johannesburg and who are the participants.

The reason this study focuses on Johannesburg alone is two-fold. On the one hand, Johannesburg offers a large urban research field with high numbers of migrants vital for this study. According to Landau (2009), Johannesburg is the hub of migrants, and as more migrants are moving from rural to urban settings it is becoming increasingly critical to research their adaptability in urban settings (Vearey, 2010a and 2010b; UNHCR, 2009b; Campbell, 2006). So although the research is geographically confined, the city of Johannesburg proportionally attracts the greatest number of migrants in South Africa (Landau and Gindrey, 2008; Landau, 2009). The second reason for conducting research in Johannesburg alone is of a more practical nature. Due to time and funding limitations, the study had to be conducted in the city where the researcher has access to organisations related to the cross-border UAMs. Although this is a small scale research, the location as well as the group in focus (UMAs) can

offer a large pool of participants reflecting a representative variety of psychosocial needs, which will, in turn, provide dependable data.

It is necessary to identify the participants in this study by clearly defining who is an unaccompanied minor. An UAM is a person who has not reached the age of 18, and is without any legal guardian, care-giver, or person over the age of 18 (UNHCR, 1996). Depending on the circumstances under which minors end up being unaccompanied, they are subcategorised into the following groups: separated, abandoned, orphaned, and run-away (UNHCR, 1996). In this study, all four groups are explored as the participants interviewed (from Kids Haven shelter[1]) come from different backgrounds (i.e. different nationalities, migrant histories, push and pull factors). Understanding cross-border UAMs' psychosocial needs can ultimately better their well-being by designing new programmes or implementing adjustments to current ones. Fundamentally the experiences of cross-border UAMs and understanding their perception of their psychosocial needs is crucial for researchers in order to create appropriate psychosocial programmes vital for their well-being (Crawley, 2011).

Finally, the term psychosocial will be challenging to define because there have been various definitions that have evolved over time. Erik Erikson, who is known as the father of psychosocial theory, defined psychosocial development as the way humans develop psychologically (consciously or subconsciously) within a social environment (Erikson, 1950). Since Erikson's first study, there have been numerous revisions to the definition of psychosocial. Markstrom, Sabino, Turner, and Berman (1997), for example, define psychosocial as the identity of self that we acquire from our everyday interactions and environment. Over time, the term psychosocial has acquired a more general meaning. More specifically, it does not only focus on development, but more on the overall emotional well-being of individuals. For the purposes of this research, I will adopt "psychosocial" to refer to a person's needs as an umbrella term covering all aspects of social life that may affect the emotional well-being (in contrast to the physical well-being that is focused only on subsistence) of an individual. The needs that pertain to the psychosocial human aspect, as discussed in this study, can be

[1] Kids Haven is a shelter for 0 - 18-year-old minors.

categorised into three principal groups: *emotional* (need for affection, respect, stability, security, social interaction and participation), *identity* (sense of belonging, self-esteem, culture) and *legal* (equality, access to rights, autonomy).

1.1 Rationale of Research

This research builds on previous work conducted by Eshia, (2010), Clacherty (2003 and 2006), Palmary (2009) and Mahati (2009) on the situation of cross-border UAMs in South Africa and a Master thesis completed by Nelly Chimedza (2005) on the psychosocial needs of unaccompanied refugee minors in Zimbabwe. Currently, research surrounding all groups of unaccompanied minors (UAMs) in South Africa is limited. The existing research consists mainly of discussions supporting child participation in psychosocial programmes (Crawley, 2011; Clacherty, 2006a; Mahati, 2009; ISCA, 1996) or continued top-down assistance (Polzer, 2009). The existing research also highlights how UAMs meet their needs whilst challenging the social constructs created by the top-down approach (Summerfield, 1999; Crawley, 2011; Mahati, 2009). Given that various sources have noted that the survival of UAMs in a host country depends on them meeting their psychosocial needs (Felsman, 1993; Chimedza, 2005), this study will contribute to a growing literature regarding the psychosocial needs of cross-border UAMs in Johannesburg.

The existing research mainly supports the vulnerability of UAMs and prescribes psychosocial programmes to aid in the psychosocial well-being[2] of UAMs. There is a fair amount of research to state that although minors may have some vulnerability, programmes should not be based on the social concept of child vulnerabilities, but on the actual psychosocial needs of UAMs (Mahati, 2009; Clacherty, 2005 and 2006; Summerfield, 1999). This study contributes to the body of knowledge regarding the psychosocial needs of cross-border UAMs including those who are livelihood seeking (see below) UAMs in South Africa.

The literature suggests that there are questions regarding how UAMs rebuild their community, find cultural ties, and continue religious or cultural practices (Nader,

[2] Well-Being: is our practices of government, teaching, therapy, parenting or preaching that aims to change humans for the better (Ryan and Deci, 2001).

2008). These issues are considered key factors in the psychosocial needs of UAMs (Bean, 2006; Spaun, 2007; Christoffersen, 2007; Wessells and Monteiro, 2004a and 2004b; Førde, 2007).

Service providers who are dealing with the psychosocial needs of UAMs often administer programs that operate under preconceived notions of what minors' needs are (Summerfield, 1999 and 2000; Pupavac, 2001 and 2004). The Convention on the Rights of the Child (CRC) (1989), however, has determined that a child has the right to 'a say' in what practices they participate. The discrepancy between providers' and recipients role in the decision making process can lead to the child's needs not being met (Boyden, 2003 and Førde, 2007).

The final and perhaps most significant rationale behind this study is the limited research on UAMs who have fled their countries for non-politically motivated reasons. Only now do we begin to see studies on livelihood seeking UAMs (Clacherty, 2003, 2006a and 2006b; Mahati, 2009; Palmary, 2009). Most of the literature surrounding the psychosocial needs of UAMs pertains to refugee and asylum seekers (UNHCR, 1996; UNHCR and WHO, 1996; Arnston and Knudsen, 2004; ISCA, 1996). However, there is emerging research on the topic by Clacherty (2004 and 2006) and Mahati (2009), studying non-asylum seeking, but livelihood seeking UAMs. This is key because special camp-based programmes have been implemented to cater to the psychosocial needs of refugee and asylum seeking UAMs (Thabet & Vostanis, 2000; UNHCR, 1996; UNHCR and WHO, 1996; Arntson and Knudsen, 2004; Pupavac, 2001; ISCA, 1996), but what programmes are there for cross-border UAMs that have migrated for livelihood opportunities, or refugees and asylum seekers who are not in camps but in urban areas?

1.2 Research Question

The study will answer the main question:

What are the psychosocial needs of cross-border unaccompanied minors in Johannesburg?

1.3 Objectives of the Study

In answering the main question, the study addresses the following objectives:

- To analyse how cross-border unaccompanied minors challenge existing psychosocial programmes that are delivered in a top-down approach.
- To ascertain the roles of the state, non-state service providers, and the community in meeting the needs of cross-border unaccompanied minors.
- To determine how cross-border unaccompanied minors deal with unmet psychosocial needs.
- To challenge socially constructed notions of 'childhood'.

1.4 Scope of the Research

This study involved 36 cross-border minors who live in Johannesburg. From the 36 participants, 12 were selected for second interviews: one was a Congolese UAM, one was a Burundian UAM, two were Mozambican UAMs and eight were Zimbabwean UAMs. Language was not an issue during the interviews since the minors all spoke English, at various levels, and none wanted translators. I did have three translators at my disposal, if the minors changed their mind or needed further assistance.

There were three main phases to this research study: i) participatory UAM workshop, ii) UAM workshop discussions, iii) semi-structured interviews with service providers.

The first phase of this study consisted of a two-day participatory workshop with cross-border minors. Each of the 36 cross-border minors were asked to draw, write, act or describe; i) their weekly activities, ii) their journey to South Africa, iii) the problems they have faced in South Africa, iv) what they want to be when they grow-up or how they see their future. After every activity there were games and group and/or individual interviews. At the end of the participatory workshop, twelve cross-border UAMs were identified and asked to take part in a second interview. This led to the second phase where the themes highlighted in the activities gave an entry point into discussions that the UAMs did/would not share in the larger group setting. The

participatory UAM workshop gathered the most informative information from the cross-border UAMs.

The third phase of the study consisted of semi-structured interviews with service providers from both governmental, NGOs and NPOs. Each of the eleven service providers was asked five basic questions (Listed in Appendix D). During the interview the participants were allowed to share personal experiences and ask additional questions and add information that they believed to be pertinent to the study.

2 Literature Review

The literature presented below addresses the psychosocial issues that pertain specifically to cross-border unaccompanied minors (UAMs) and their adaptation in urban environments. In this study, I build on previous research conducted by Chimedza (2005) and Clacherty (2003). Chimedza (2005) conducted research on the psychosocial challenges of unaccompanied refugee children in Zimbabwe. Her study focused on the urban integration of unaccompanied refugee minors and the impact on their psychosocial well-being. Clacherty (2003) conducted a study in Musina, a border town between South Africa and Zimbabwe, on cross-border minors. She was able to exploit their experiences in Musina and conclude the push factors that led to the children's flight. My research is attempting to provide insight into the psychosocial needs of cross-border UAMs in Johannesburg and how they are meeting those needs. There is no literature, to my knowledge that directly discusses the psychosocial needs of cross-border UAMs in Johannesburg (with the exception of Kruger and Mather, 2003). Therefore, the literature I review draws from several published projects and studies of cross-border UAMs regarding psychosocial programmes designed for them (e.g. Fass, 2005; Clacherty, 2003, 2006a and 2006b; McCloskey et al., 1996; Save the Children Norway, 2008; Thom, 2007; Zingu, 2007; Miller and Rasco, 2004; UNHCR and WHO, 1996).

Additionally, following this brief introduction to the literature review, there are six sub-sections: i) migration and Johannesburg, ii) UAMs in Johannesburg, iii) UAMs and vulnerability, iv) defining psychosocial, v) child vs. minor and vi) participatory research methods.

2.1 Migration and Johannesburg

Before urban migrants were mostly young men, now there is a steady increase in migrant women, children (including UAMs) and older persons moving into urban spaces (UNHCR, 2009b). According to Landau and Misago (2009) and Landau (2009), more than half of South Africa's population lives and works in urban areas. Additionally, Kok & Collinson (2006), highlight that urban growth has been greater

in South Africa than any other country on the African continent. Landau (2009) reports that Johannesburg is the hub of migrants and as more migrants are moving from rural to urban settings it is becoming increasingly crucial to research their adaptability in urban settings (Vearey, 2010a, 2010b; Oliveira, 2011; Campbell, 2006).

Gauteng province has the highest number of cross-border migrants including asylum seekers and refugees (DHA, 2011; Landau and Misago, 2009). "In 2007, Gauteng Province hosted 46% of South Africa's population born outside South Africa. This is up from 42% in 2001 and is expected to increase in the years ahead" (Landau and Gindrey, 2008:7). Landau and Gindrey (2008) attribute this to Gauteng being responsible for close to 10% of the sub-Saharan Gross Domestic Product (GDP). DHA (2011) presented statistics showing that the Gauteng province had nearly 65,000 asylum applications in 2010–2011. Landau and Gindrey (2008) note that the high number of migrants in the Gauteng province is related not only to the economic situation (mentioned previously) but also to the central location of Pretoria and Johannesburg for transportation. This means that nearly all forms of transportation in and out of South Africa depart, cross, and arrive in the Gauteng province, mainly in Johannesburg. More recent studies (Vearey, Palmary, Thomas, Nunez, and Drimie, 2010; DHA, 2011; Jacobsen, 2006) have shown that in urban neighbourhoods in Johannesburg, over half of the residents are foreign migrants (Leggett, 2002). These reports indicate that Johannesburg alone has a significant pool of cross-border migrants in order to collect data that can be representative of different migrant groups, more specifically cross-border UAMs.

There are no statistics on exactly how many cross-border UAMs or internal UAMs in general there are in South Africa. Therefore, we have to depend on generalisations drawn from cross-border migration statistics. Since the cross-border migrant population is increasing in urban regions, particularly in Johannesburg (Landau and Misago, 2009; DHA, 2011: Landau and Gindrey, 2008), and since cross-border UAMs are part of the migrant population, it is logical to assume that Johannesburg has an increasing number of cross-border UAMs.

UNHCR (2009b) states that by 2030 more than 60 percent of the population will live

in urban areas, globally. As more cross-border migrants move into urban spaces it is important to reflect on the South African urban integration policy. South Africa has promoted urban integration and access to social services, since the acceptance of cross-border migrants. For refugee[3] and asylum seeking migrants urban integration has changed the way in which they meet their needs. South Africa has never placed refugees in camps since the adoption of the Refugee's Act (1998). In South Africa, groups such as forced migrants (refugees and asylum seekers) do not have specialised social services, relief efforts or emergency aid brought to them as in camp settings (UNHCR, 1996; UNHCR and WHO, 1996; Arnston and Knudsen, 2004), which means that the services provided to them are not catered specifically for them. South Africa enacted an urban integration policy because of its constitutional commitments, which according to Landau (2006) maximises freedom and protection by promoting integration into the local communities. South Africa does not only promote urban integration for cross-border migrants, but for South Africans as well. As Pieterse (2004) suggests, South Africa's urban integration policy is "the core idea that underpins the unfolding of the *Urban Renewal Strategy* of the government. The notion emerges strongly in the recently published *Draft White Paper on Urbanisation*" (Pieterse, 2004:1). Urban integration guarantees freedom of movement and access to social services and livelihood activities such as education and the right to work (Landau, 2006; Pieterse, 2004). Although Pieterse (2004) supports South Africa's urban integration policy as a 'way forward', he also notes that due to the government having a top-down approach in planning, access to services and livelihood opportunity is severely hindered. Further research has shown that despite South Africa's progressive policies (Refugee's Act (2002), Immigration Act (2002), South Africa's Urban Integration Policy), cross-border migrants (cross-border UAMs, refugees and asylum seekers) have limited access to social services, including those services listed previously as being part of their well-being (i.e. legal, psychological, cultural or social opportunities (CoRMSA, 2007; Landau, 2006a; Vearey, 2010b; Vearey et al., 2011; Jacobsen, 2006)).

[3] 1951 Convention on the Status of Refugees definition of Persecution of a person as "owing to well-founded fear of being persecuted for reasons of race religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or , owing to such fear, is unwilling to return to it." (UN, Art 1:A(2), 1951)

MAP 1: Map of Johannesburg



Source: Wikipedia[4]

Map 1 shows the regions of the city of Johannesburg which lies within the Gauteng province. Johannesburg has the highest number of migrants in Gauteng according to recent research by DHA (2011) and Landau (2009) and the focus of this study.

Conclusively, although the research is solely conducted in one city, I have shown that the city of Johannesburg alone attracts a large and varied migrant population that can offer a substantial number of potential participants, more specifically UAMs, for a thorough and extensive research. Given that Johannesburg is the most populated city in South Africa, it would be most revealing to study legislation and programme practices, or lack thereof, with a particular focus on cross-border UAMs. In order to address the research question it is imperative to locate a large sampling pool of cross-border UAMs. A large sampling pool allows for a wide variety of the same group to present their stories both validating and adding to the generalisability of the research (Vearey, 2010a; Felsman, 1993).

2.2 UAMs in Johannesburg

As the migrant population increases in urban areas, so does the importance to understand the experiences of those inhabitants (Landau, 2009, Vearey, 2010a and

[4] http://en.wikipedia.org/wiki/File:Johannesburg_map-withannotations.jpg

2010b; Oliveira, 2011; Campbell, 2006; Landau and Gindrey, 2008). Cross-border UAMs are a central focus group for this research because there is relatively little known about this group of young people and their unique circumstances within Johannesburg (Ebyer, 2004; Chimezda, 2005; Felsman, 1993). It is essential to research and update information on cross-border UAMs in an urban setting for four main reasons: (i) the number of cross-border UAMs in South Africa is, in fact, unknown, (ii) there is little research that focuses on the urban integration of cross-border UAMs, iii) there is little to no research on how cross-border migrants (this includes UAMs) meet their psychosocial needs (Vearey, 2010a and 2010b) and iv) programme response manuals and information guides are in camp-based settings making the psychosocial programmes inadequate for UAMs in urban areas (Eyber, 2004; Chimdeza, 2005; Summerfield, 1999 and 2000; Pupavac, 2001 and 2004; Crawley, 2011; Clacherty, 2006a; Mahati, 2009; Campbell, 2006),

There are no laws that directly address UAMs in South Africa. There is, however, the Children's Act (2008) which provides the law and policy for minors. A minor is someone who has not reached the age of majority. In the South African context the *Age of Majority Act of 1972* defines a minor as a person under the age of 21, but in 2007, the new draft of the Children's Act (2008) clarifies that a minor is any person under 18, unless emancipated by order of the court, is a child and any person over 18 is an adult (Blacksash, 2011).

As stated by Landau (2006):

"Despite its intention to protect the welfare and dignity of those seeking refuge in South Africa, South African refugee policy reflects almost no state obligations for providing specialised assistance, even for unaccompanied children and the disabled. Rather, its explicit obligations are limited to bureaucratic processes intended to facilitate access and integration."

- Landau, 2006:315 –

Landau clearly states the problematic nature of South Africa's refugee policy by highlighting that specific groups (such as cross-border UAMs) have no distinct provisions (Landau, 2006). This leaves groups, such as the disabled and UAMs that

generally require specific assistance, disregarded in policy. Although UAMs fall under the protection of the Children's Act (2008) implementation and knowledge of these laws seems to be lacking (Palmary, 2009; Landau, 2006; Peberdy and Majodina, 2000). State and non-state institutions may agree to provide assistance to cross-border UAMs in South Africa, but it is not clear how cross-border UAMs cater to their needs that cannot be met by service providers (Landau, 2006; Crush, 2005; Crush and Dodson, 2007; Jacobsen, 2006 and 2002). As Watters (2008) suggests, when the 'obtainability' of policies between immigration and welfare programmes lack practice or practicality, it is due to a discrepancy between the migrant and provision trajectories (Landau, 2006; Landau and Misago, 2009).

Cross-border UAMs' rights in South Africa are extensively discussed by Palmary (2009). Studies by Hillier (2007) and Mahati (2009) describe in detail the circumstances cross-border UAMs face as they cross into South Africa (Schwoizer, Melville, Steel and Lacherez, 2006; Crush, 2005; Clacherty, 2003, 2006a and 2006b; CoRMSA, 2007). Hillier (2007) and Mahati's (2009) studies look at the vulnerabilities of cross-border minors as well as their resiliency. Mahati (2009) focuses his study on survival tactics of cross-border minors which include; living in groups, learning multiple languages, utilising their sexuality and minor criminal acts. Clacherty (2003, 2006a, 2006b), Hillier (2007), and most recently UNICEF (2009) conducted studies on cross-border UAMs migration,[5], and their integration. Clacherty (2006a), Palmary (2009) and Hillier (2007) pointed out many gaps in policy and in practice that still persist hindering access to services which could prevent cross-border UAMs from meeting their psychosocial needs, whether legal, psychological or social (Landau, 2006; Peberdy and Majodina, 2000; Clacherty, 2003; Palmary, 2009; UNICEF, 2009). Hillier (2007) examines the policy vs. practice and notes that there are inconsistencies in South Africa legislation creating protection gaps for cross-border UAMs. Clacherty (2006a) supports Hillier's findings and suggests that these protection gaps exist because policy and legislation is not consistent on a regional level.

[5] Flight is defined as the push and pull mechanisms that encourage movement.

2.2.1 Unaccompanied Minors and the Law

South Africa has a responsibility established by the Children's Act (2008) to protect 'all children' and render all forms of assistance regardless of their country of origin (Children's Act, 2008:2). In South Africa all children both foreign and internal, whether they are refugees, asylum seekers, foreign migrants or South African are regarded as equals under the law. It is still beneficial to distinguish among the groups of UAMs because the reason for migrating differentiates their needs (ISCA, 1996). Another difference, which is extremely important is that refugee and asylum seeking minors are allowed to stay in South Africa legally, whereas the UAMs that are not from refugee generating countries and continue to be undocumented will be illegal immigrants as soon as they reach the age of 18.

Legal frameworks and policies often look at UAMs as a homogeneous group that have the same intentions as one another (Palmary, 2009; Crawley, 2011). The top-down approach is often how government agencies, international organisations and NPO/NGOs operate when it comes to service delivery and policies. This means that service providers use tools created by those who they are not serving (Frasier et al., 2006); thus they have little personal experience. Polzer (2009) argues that a bottom-up approach instead of the top-down approach needs to be implemented in order to produce viable, sustainable and comprehensive legal frameworks (Frasier et al., 2006).

2.2.2 CRC

The Convention on the Rights of the Child (CRC) defines a child as 'every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier (CRC, 1989:Article 1). The CRC is the global protecting body for children whose decrees end up being adopted wholesome when a state does not have its own children protection agencies in place. This means that countries that do not have child protection laws in place can use the CRC for guidance in developing a country specific child protection agency or can adopt the CRC as its legislation.

South Africa, as previously mentioned implemented the Children's Act (2008), which aligns itself with the CRC. However, I would like to highlight a reoccurring problem with the need of documentation for UAMs (although, registration and documentation is difficult for all persons in South Africa). The CRC clearly states "Where a child is illegally deprived of some or all of the elements of his or her identity, States Parties shall provide appropriate assistance and protection, with a view to re-establishing speedily his or her identity" (CRC, 1989: Article 8(2)). In South Africa a different department facilitates documentation, the Department of Home Affairs (DHA), and this department does not align itself with the CRC or any other international body. Essentially it is this lack of harmonisation that undermines certain aspects in the protection of UAMs. For example, the lack of documentation leads to further problems of minors in accessing services, preventing active integration.

2.2.3 Documentation

Obtaining documentation is a daunting problem in South Africa not only for the migrant community but for South African citizens as well. The Children's Act (2008) makes explicit reference to the documentation of children stating that it should be conducted in accordance to DHA's protocols. However, there is no specific protocol regarding UAMs. In 2011, the High Court resolved the case *Shafi Dahir Abdullahi and Others v Minister of Home Affairs and others* stating that DHA must give documentation to all UAMs who claim asylum within South Africa. This decision implies that UAMs are not given documentation when they cross the border into South Africa. However, there are no provisions for livelihood-seeking UAMs.

In South Africa documentation shapes the trajectories of education, economic and accessibility to social services (Gonzales, 2011). Documentation is crucial, not only in South Africa, but globally as it facilitates movement and most importantly, identity. In South Africa documentation is key when accessing services (hospitals, clinics, housing, etc.), enrolling at school and access to other forms of livelihood opportunities such as jobs (Adato, Carter and May, 2006; LHR, 2005). All of these livelihood activities affect the well-being of migrants (Vearey et al., 2011) including UAMs (Clacherty, 2003 and 2006).

It is suggested that being an undocumented minor has "important implications for their identity formation, friendship patterns, aspirations and expectations, and social and economic mobility" (Gonzales, 2011:602). He continues, that without these connections, a minor is unable to complete pivotal transitions into other stages of their lives. Abrego (2008) states that undocumented minors and youth[6] are hindered legally, educationally and economically due to their lack of documentation. Notwithstanding the above, psychosocial disabilities stemming from being undocumented, physical and legal implications further minors vulnerability to arrests, deportation and non-access to vital services. While - as previously mentioned - school fosters positive psychosocial development (such as aspirations and achievement) of minors, Abrego (2008) and Gonzales (2011) highlight that minors are grossly unprepared for their transition into undocumented adulthood. Minors will not be minors forever, and to overlook the implications of documentation for UAMs is subjecting them to further dangerous situations in their future (Clacherty, 2006b).

2.2.1 Language barrier

Timngum (2002) focuses on the lack of access to these instrumental institutions (schools) despite the fact that legislation has been passed to grant basic rights to 'all children' (including the right to attend school) also supported by the Constitution (1996) and The Children's Act (2008) (Landau, 2006; Timngum, 2002). Timngum (2002) notes there is a large number of cross-border UAMs that enter into South Africa who do not speak English or any other of the South African languages (with the exception of Zimbabweans). This causes problems for school-age children and their social interactions (Mahati, 2009; Timngum, 2002; Kia-Keating et al., 2007). Timngum (2002) claimed that the lack of integration programmes has prevented Francophone minors from having the language skills necessary to continue their education, which according to Kia-Keating et al. (2007) is essential to the UAMs' integration and well-being. Mahati (2009) observed that the more languages cross-border UAMs in Musina were able to speak, the greater their ability to survive and be successful.

[6] By youth I am referring to those persons aged 18-24 (Rumbaunt, 2005; Arnett, 2000)

South Africa is host to a number of different national languages and as noted by Mahati (2009) and Timngum (2002) learning at least one of these languages is essential for the integration and acceptance of a cross-border migrant into South Africa.

2.2.2 Xenophobia

South Africa has become increasingly xenophobic in the past few years, but has always been an anti-foreigner country since Apartheid (Landau, 2004; Misago, Landau and Monson, 2008). Xenophobia in South Africa has led to both group and individual violations against cross-border migrants. In 2008, xenophobic attacks broke out throughout South Africa causing cross-border migrants to be encamped or move to more urban areas (Misago, 2008). Many cross-border migrants lost their businesses, jobs and livelihood opportunities during these attacks. There is still an on-going threat of xenophobia throughout South Africa. Although xenophobia is considered an 'adult issue', in South Africa UAMs experience xenophobia even when accessing services to address their basic needs, let alone their psychosocial needs (Clacherty, 2006b).

Gonzales (2011) explains that xenophobia is present in all levels of society, and this includes school which could affect how minors present themselves and develop their identities.

"Chuy, a college-goer who played sports throughout school, explained that after he saw a teammate on his high school soccer team berate players on an opposing team as "wetbacks" and "illegals," he was reticent to disclose his status even to good friends. "I grew up with this guy," he said. "We had classes together and played on the same team for like four years. But wow, I do not know what he would say if he knew I was one of those wetbacks".

-Gonzales, 2011: 611-612-

Reflecting on the above interview, Clacherty (2006b) similarly highlights that UAMs in South Africa often hide their identity or country of origin so as to fit in the society

and avoid discrimination and xenophobia. Gonzales (2011) and Clacherty (2006b) focus on the effect of xenophobia on cross-border minors and their psychosocial well-being. The overall point made is that xenophobia has a significant effect on the physical and emotional well-being of cross-border UAMs.

To conclude, the lack of information and research on cross-border UAMs is the main reason this study is focused on them. As it is shown from the literature presented above, not only is there insufficient research but also a clear discrepancy between policies (when available) regarding cross-border UAMs and implementation. Lack of policies, however, is not the only issue UAMs face in South Africa. Additional problems continue to hinder their integration in the new environment and prevent them from satisfying their psychosocial needs.

2.3 Unaccompanied Minors and Vulnerability

Children, child migrants, and cross-border UAMs are considered by some to be the most 'vulnerable' and 'marginalised' groups (UNHCR, 1996; Chimedza, 2005; Førde, 2007). However, as the recent studies of Mahati (2009) and Crawely (2011) have suggested, the law is misguided due to social constructs centred around, who isa child, and the notion of childhood. They continue by stressing the importance of allowing minors to act in their best interest and have the law be a protecting mechanism that they can use, if needed. Marginalising all minors (those under 18 years of age) and labelling them as children seriously undermines their ability to develop survival skills (Boyden, 2003; Summerfield, 1999, 2000, 2001; Clacherty, 2003; Palmary, 2009; Hillier, 2007; Mahati, 2009).

Chimedza (2005) argues that although cross-border UAMs are resilient there are other factors that contribute to their unique vulnerability (Boyden, 2003; Machel, 1996; Miller and Rasco, 2004). Resiliency is the ability to withstand or recover quickly from difficult conditions (Spaun, 2007; Black, 2008; Boyden, 2003; Duncan, 2009). Duncan (2009) notes that cross-border UAMs are vulnerable neither because they are weak and frail nor because they are not resilient, but because they possess less agency and support than other minors (Chimedza, 2005; Giner, 2006). This agency can be a parent, guardian, a community or any other factor that contributes to their well-being

(Spaun, 2007; Arnston and Knudsen, 2004; Black, 2008; Peberdy and Majodina. 2000; Wessells and Monteiro, 2004a; Miller and Rasco, 2004; Ahearn, 2005; Gonzales, 2011). Chimedza (2005) notes that due to the special needs of cross-border UAMs allotting 'special attention' to these groups marginalises them and subjects them to further vulnerability. In summary, UAMs resilience should not be undervalued nor overestimated, but it is necessary to have distinctive programmes to cater to their unique needs.

Raghallaigh and Gilligan (2010) conducted research on the coping techniques of asylum seeker UAMs after they had settled in Ireland. They noted that the UAMs' vulnerability stemmed from living without family or childhood friends (Summerfield, 1999 and 2000; Goodman, 2004) and having to adjust to a new culture with faith-based differences (Raghallaigh and Gilligan, 2010). In the same study, Raghallaigh and Gilligan (2010) noted five coping techniques; i) maintaining continuity in terms of community, culture and religion, ii) adjusting by learning and changing, iii) adopting a positive outlook, iv) suppressing emotions and seeking distraction and v) viewing themselves as self-reliant. Raghallaigh and Gilligan (2010) commented that although these cross-border UAMs were coping, their emotional well-being was at risk (Raghallaigh and Gilligan, 2010; Kwankye et al., 2007; Lie kind et al., 2004; Gonzales, 2011). Raghallaigh and Gilligan (2010) marked UAMs as an 'at risk group because although the physical (Ontological) needs of the cross-border UAMs were being met (i.e. clothes, food, housing and other basic needs), the emotional fraction of their well-being was being neglected. Like Raghallaigh and Gilligan (2010), Wessells and Monteiro (2004a and 2004b) noted that a profound need of UAMs is to locate a community that shares the same cultural ties, this includes religious groups. These communities form the basis for one of the UAMs protective factors (Arnston and Knudsen, 2004; Bernard, 1993; Wessells and Monteiro, 2004a and 2004b; Raghallaigh and Gilligan, 2010). A protective factor is anything that prevents or reduces vulnerability for the development of a disorder (Raghallaigh and Gilligan, 2010; Bernard, 1993; Kohli and Mather, 2003; Summerfield, 2000; Van Willigen, 2000; Rutter, 1985). A disorder is defined as lack of order, but when referring to psychiatric disorder the definition is focused on emotional, psychological and behavioural practices which are estranged from their common cultural (Rutter; 1985). The afore-mentioned study focuses on psychological disorders, which compromise

the integration, assimilation and adaptability of cross-border UAMs into society. Psychological disorder can hinder an individual from being able to adapt to society and for migrant populations can cause instability within their protective factors (Bernard, 1993; Kohli and Mather, 2003; Summerfield, 2000; Van Willigen, 2000; Rutter, 1985). Gonzales (2011) highlights that minors would desire to have a more stable environment and status, but they reconcile their limitations by focusing on relationships and activities that are tangible and familiar rather than those that are unattainable.

Arnston and Knudsen (2004) claim that there is a strong tendency to focus exclusively on problems and trauma and forget that minors have strengths within them, a fact that needs to be heightened and explored. Minors' inherent resiliency can be strengthened by age-appropriate interventions (Arnston and Knudsen, 2004; Apfel and Simon, 1996) and positive role models, which empower and allow them to make their own decisions in relation to their environment (Førde, 2007; Goodman, 2004; Gonzales, 2011). Arnston and Knudsen (2004) acknowledge that adopting the concept of resiliency in programming is extremely powerful because it directs attention to the fact that all minors have assets and strengths that support their inherent survival skills (Apfel and Simon, 1996). Førde, (2007) and Werner (1984) both highlight that the objective of building resilience is to make minors less vulnerable in adversities, rather than to make them invincible. Boyden (2003) notes that minors in foreign countries are affected by their environment and this can hinder their resiliency, but it does not weaken their strengths.

Crawley (2011) supports the Convention on the Rights of the Child (CRC), stating that minors have a right to an opinion in what is being done to and for them and these social constructs may block an adults' capacity to see minors as capable and resilient human beings. Summerfield (2000 and 2001) presented a study that showed UAMs who live within communities chosen by themselves or live alone have better chances of recovery from trauma (if any) (Lustig, Kia-Keating, Knight, Geltman, Ellis, Kinzie, Keane and Saxe, 2003) and protection from violence (Mahati, 2009). Additionally, Bernard (1993) shows that UAMs that choose their lifestyle including which groups they live in are far better at decision-making and school performance than UAMs who have been institutionalised (Lustig et al., 2003; Mahati, 2009; Bernard, 1993;

Crawley, 2011). These findings challenge common assumptions as to the vulnerability of UAMs.

The 'minor' is often undermined in society (programmes, laws and policy) because of social constructs that define minors as passive and victimised persons with no capacity to participate in 'adult' activities (Kohli and Matther, 2003; Crawley, 2011). Crawley (2011) explains that UAMs are given asylum (in the UK) because they are seen as passive victims being deprived of their 'childhood', not because of their direct or indirect involvement in political activities. Kohli et al. (2003) notes that services offered to cross-border UAMs are based on the same principle, namely that minors are victims of adults' 'activities' within their country of origin, not that they have direct involvement in activities that they are performing. As seen in Kohli et al. (2003), Bernard (1993) and Mahati (2009), there are laws (i.e. the Children's Act, 2008) for UAMs designed to help them in what is deemed as 'child activities', e.g. going to school or playing, thus depriving them of any right to make decisions for themselves. Mahati (2009) studied cross-border minor migrants in Musina and his findings indicate that although there are numerous cross-border UAMs entering South Africa for educational purposes, a significant number come in search of improved livelihood opportunities, particularly minors from Zimbabwe.

The question of the vulnerability of cross-border UAMs is highly debated due to the 'special treatment' of cross-border migrants and possible access to services that local communities lack (Peberdy and Majodina, 2000). However, in South Africa the urban integration policy does not make special recognition for cross-border UAMs and therefore South African migrant minors and cross-border UAMs hold similar vulnerabilities. There are provisions for refugee and asylum seeking minors under the Refugee's Act (1998), but all other cross-border UAMs fall under the protection of the Children's Act (2008). Chimedza (2005) suggests that street children hold similar vulnerabilities as cross-border UAMs. A study of South African street children done by Le Roux (1993) gives examples of what street children desire, "freedom from institutions, freedom of movement, freedom to choose activities and daily rhythms, and freedom from commitments" (Scharf et al., (1986) in Le Roux and Smith, 1998:272). However, Eshia (2010) reports that UAMs who live on the street are forced into this position because of discrimination, not because of a desire to

dissimilate (Hashim, 2006; UngKul, 2010). Eshia (2010) also claims that UAMs' desires were to be granted what Le Roux's (1993) street children rejected. Mahati's (2009) study of cross-border UAMs challenges Hashim (2006), UngKul (2010) and Eshia (2010) assumptions about the vulnerability of cross-border UAMs. Mahati's (2009) account of cross-border UAMs recognises them as politically aware, resilient, sexually active beings capable of decision-making and plagued by 'adult' created programmes.

Hasim (2006) and Førde (2007) argue that cross-border UAMs are more vulnerable due to their migrant status. Crawley (2011) and Mahati (2009) do not align with either of the view-points previously introduced, but protest that the vulnerability of cross-border UAMs is brought on by society's refusal to accept minors as active and self-aware beings capable of decision making and participation. For example, Mahati (2009) reports that the cross-border UAMs that he interviewed slept on the street or in crowded shelters because they did not want to be put in foster care or a place of safety. In South Africa, any person under the age of 18 must be placed in a shelter, foster care or place of safety until the age of 18, under the Children's Act (2008). Because of the law, Mahati's (2009) pool of cross-border migrant minors chose to live as 'irregular' migrants on the streets, which inevitably exposes them to harmful situations making them potentially vulnerable. According to Garmezy (1983), "if there is any lesson to be derived from recent studies, it lies in the reaffirmation of the resilience potential that exists in children under stress" (Garmezy, 1983; in Le Roux and Smith, 1998:73). This does not mean that they are unaffected (Le Roux, 1993) by negative experiences but that they have the capacity to resist being overwhelmed by them (Boyden, 2003; Raghallaigh and Gilligan, 2010; Arnston and Knudsen, 2004; Førde, 2007; Pupavac, 2001 and 2004; Chatty et al., 2005).

Although there is a debate on the vulnerabilities of cross-border UAMs, as suggested by Clacherty (2003, 2006a and 2006b), Mahati (2009), Chimedza (2005) and Raghalligh and Gilligan (2010), knowing the needs of cross-border UAMs will also uncover what vulnerabilities actually exist for this particular group and possibly prevent further ones from appearing. Strengthening protective factors and empowering cross-border UAMs will ensure their ability to overcome vulnerabilities and obstacles to their well-being (Boyden, 2003; Arnston and Knudsen, 2004;

Pupavac, 2001 and 2004; Chatty et al., 2005; Spaun, 2007; Black, 2008; Peberdy and Majodina, 2000; Wessells and Monteiro, 2004a; Goodman, 2004; Lustig et al., 2003; Apfel and Simon, 1996; Miller and Rasco, 2004; Ahearn, 2005; Rutter, 1985).

In conclusion, it is vital to highlight the protective factors which are both internal and external mechanisms used to counter vulnerabilities. These protective factors, according to the literature presented above, are a crucial part of the psychosocial well-being of cross-border UAMs.

2.4 Defining Psychosocial

As mentioned in the previous section South Africa attempts to provide for the psychical needs of migrants, but not nessicarily for the emotional or psychological needs. There are essentially seven basic needs for human survival, these are known as ontological needs. For an example, Table 1 (below) is a list of the seven ontological needs.

Table 1: Basic Human Needs[7]

Need	Being (qualities)	Having (things)	Doing (actions)
Ontological	Safety	Food, Shelter, Water, Clothes, Air	Sleep

The legal mechanism that are previously mentioned by Palmary (2009) include the right to basic needs (South African Constitution, 1996), but there are also subsequent legal mechanisms such as The Refugees Act (1998) and The Children's Act (2008) which hold the state accountable for certain needs. The table below represents the ontological basic needs, with the addition to 'specialised' basic needs of two distinct groups, namely refugees/asylum seekers and minors.

[7] Tay, Louis; Diener, Ed (2011). "Needs and Subjective Well-Being Around the World". *Journal of Personality and Social Psychology* **101** (2): 354–365. Retrieved Sept. 20, 2011.

Table 2: Needs Granted By South African Law

Need	Being (qualities)	Having (things)	Doing (actions)	South African Law
Ontological	Health Rights	Food, Shelter, Water	Rest	SA Constitution, National Health Plan
Security	Autonomy	Pensioner Grants, Health Care Systems, Unemployment	Sick Leave, Vacation	SASSA[8], Employment Act
Participation	Freedom	Rights, Government Participation	Express Emotions (Complaints)	SA Constitution
Education		Basic Education	Attending School (until age 16)	SA Constitution and Education Act
Family	Identity	Family Reunification, Language	Love and Affection	Children's Act, SA Constitution
Protection	Safe	Basic Human Rights, Protection	Integration	Refugee's Act

The two tables presented above (Table 1 and Table 2) represent needs, which are legally protected by South African legal mechanisms. However, as mentioned in the above sections, problems of access to these basic needs (defined by law) are challenging for cross-border UAMs and other cross-border migrants (Palmary, 2009; Hillier, 2007; Clacherty, 2003 and 2006a).

As mentioned in previous sections, Raghallaigh and Gilligan (2010) highlight the importance of the environmental in meeting both basic human needs and psychosocial. This study relies heavily on the Markstrom, Sabino, Turner, and Berman (1997) interpretation of psychosocial, which is defined as the identity of self that we acquire from our everyday interactions and environment. This includes legal, psychological, cultural or social aspects of everyday life. This definition incorporates both the service providers' and the academic definition of psychosocial being:

> "The term alone explains that psychological well-being cannot exist without social well-being, and vice versa".
>
> -CSVR[9] Staff quoted in Vearey et al., 2011:2-

[8] SASSA, South African Social Security Agency
[9] CSVR is a trauma counselling centre, which specialises in forced migrants.

> "…related to [forced migrants] social and psychological well-being, including emotional well-being, to live free of violence and discrimination and to access to safe and secure housing".
>
> -Vearey et al., 2011:9-

Therefore when referring to the psychosocial needs of UAMs, this study is attempting to uncover what factors are key to the UAMs' overall physical, emotional, mental, environmental, legal, environmental and social well-being.

2.4.1 Psychosocial Theory

The term psychosocial is hard to define as there have been various definitions that have evolved over time. The first psychosocial theory was formulated by Erik Erikson. His theory involves eight stages. Each stage ranges between various ages reflecting one's identity as the outcome of positive or negative occurrences during each stage of development (Niolon, 2010). His prediction was that if there is a disturbance in any of the stages it will hinder the cognitive development (language articulation and expression, behavioural issues or other learning disabilities) of a person (Black, 2008). Ekrison's study referred only to psychosocial development and not the holistic psychosocial programmes designed and used in present day. One fundamental factor in psychosocial theory, however, has remained unchanged; namely the environment (caregivers and community members (Summerfield, 1999), which plays a key role in the psychosocial well-being of UAMs (Bean, 2006).

Erikson's definition of psychosocial is highly criticised for several reasons, but most importantly because his psychosocial theory produced programmes which where solely focused on western-based psychological approach (Miller and Rasco, 2004; Summerfield, 1999; and Black, 2008). Consequent research ascribed a more holistic perspective to the definition of psychosocial theory (discussed in the following section). After Erikson, there have been many developments making psychosocial theory more encompassing (Summerfield, 1999). For example, Kinzie et al. (1989) conducted a three year study on Cambodian youth that indicated that Post-Traumatic Stress Disorder (PTSD) can be protracted due to poor psychosocial programme. The Cambodian youth with PTSD did not improve over the three year study, mainly due

to a lack of psychosocial parameters (e.g. community and burial rights (Summerfield, 1999 and 2000)) essential for their well-being (Kinzie et al., 1989; similar studies were conducted on youth in South Africa by Felsman et al., 1990; Kohli et al., 2003; Schweitzer et al., 2006; Ahearn, 2005).

After these case studies, psychosocial programming began to shift from a Western-based psychological support to a more culturally accepted practice (Wessells and Monteiro, 2004a and 2004b: Arntson and Knudsen, 2004; UNHCR, 1996; Pupavac, 2001 and 2004; UNHCR and WHO, 1996, Christoffersen, 2007; Spaun, 2007; Summerfield, 1999 and 2000). For example, Wessells and Monteiro (2004a) adopted local practices such as 'the right of passage'.[10] into their psychosocial programmes aimed at aiding Angolan internally displaced children.

Additionally, social scientists such as Miller and Rasco (2004) highlighted the shift from providing basic survival needs to focusing on mental health and the effects of psychosocial and socio-economic on a person's well-being. Psychosocial programmes have evolved due to observations by researchers such as Miller and Rasco (2004) who note that;

> "[Before] The focus is on healing or ameliorating symptoms of psychological distress within individuals, with little attention paid to mending damaged social relations within communities, or to strengthening naturally occurring resources within families and communities that could facilitate healing and adaptation."
>
> – Miller and Rasco, 2004:1 –

At the same time Papavac (2004) reflected on the shift in psychosocial programming by stating;

> "[Currently] the attractions of psychosocial work for aid workers has been to bring back the human in the face of the bureaucratisation of aid, foregrounding

[10]. In Angola certain communities require that a boy jump over a white rope (representing purity) in order for him to become an adult. This is symbolic of the boys' passage from childhood into manhood. Without the 'right of passage boys are stuck in 'childhood'.

how people and communities personally experience disaster or conflict."

- Pupavac, 2004:497 –

Pupavac (2004) and Miller and Rasco (2004) both reflect on the movement from providing basic needs as humanitarian intervention to 'seeing' the person that is receiving the aid. All humans have several basic needs for survival, yet when evaluating a persons' well-being there are more factors involved such as security, happiness and family. It is proposed that with proper implementation and a cohesive plan of action these cross-border UAMs can meet their psychosocial needs, and live normal and productive lives in non-camp settings (Miller and Rasco, 2004; UNHCR, 1996; UNHCR and WHO, 1996; Wessells and Monteiro, 2004b; Black, 2008; Pupavac, 2004).

Since Erikson's original observations and developmental theory, there have been newer definitions of psychosocial theory that have a more holistic approach to the psychological needs of a person. The only similarity is the fundamental principle that the environment is critical in a persons' well-being (Pupavac, 2001 and 2004; Summerfield, 1999, 2000 and 2001; Kwankye et al., 2007; Melzak, 1995).

2.4.2 Psychosocial needs of Unaccompanied Minors

Various sources have noted that the survival of UAMs in a host country depends on them meeting their psychosocial needs (Felsman, 1993; Felsman, Leong, Johnson and Felsman, 1990; Arnston and Knudsen, 2004; UNHCR, 1996; Summerfield, 1999 and 2000). Humanitarian organisations, NGOs, NPOs and governmental organisations have programmes in place to feed, clothe, and house cross-border UAMs, but catering to their psychosocial needs has only begun to be explored more recently (Miller and Rasco, 2004; Pupavac, 2001 and 2004; UNHCR and WHO, 1996; Clacherty, 2006a). Mental health has been a part of caring for the well-being of 'fleeing' populations for some time, but consideration for their psychosocial needs has not always been given and by no means made a priority (Summerfield, 1999 and 2001; UNHCR, 1996; McKernan, Stoewe, McCadam, Gonzales, 1998; Ahearn, 2005). Fleeing persons are those who have left their country because they have a threat to their life. This is not specific to violence or literal life threatening activities, but also economic and

livelihood deprivation.

A study was conducted by Wessells and Monteiro (2004a), on UAMs who have suffered trauma due to conflict focused on the psychosocial well-being of Angolan children, who have been internally displaced. Their findings suggested that psychosocial needs were not being met even though the minors were within their own country, not because a community and common language was lacking, but due to the lack of common culture within the social network (Wessells and Monteiro, 2004a and 2004b). According to Summerfield (2000 and 1999) and UNHCR (1996) minors who are dealing with distress, trauma, or other psychological issues need particular care and consideration because as seen in UNHCR's manual (1996) "children have special physical, psychological, and social needs that must be met for them to grow and develop normally" (UNHCR, 1996; 4).

Dealing with family separation is a complex issue that requires more than just the basic needs of UAMs to be met (Arnston and Knudsen, 2004; UNHCR, 1996; UNHCR and WHO, 1996; Summerfield, 1999, 2000 and 2001). UAMs may also have to deal with death and/or other traumatic issues, which would require different types of assistance such as; counselling and support groups. Although the Children's Act (2008) is a sound legislation and commitment by the state, there are no guidelines as to deal with the psychosocial needs of these individuals in the South African context (Timngum, 2002).

Researchers such as Clacherty (2006) and Ahearn (2005) have contributed significantly to discovering the needs of cross-border UAMs; however, the majority of this literature tends to focus on refugee and asylum seeking UAMs (ISCA, 1996). There is limited research on UAMs who have fled their countries for non-politically motivated reasons. Only now do we begin to see studies on livelihood seeking UAMs (Clacherty, 2006 and 2006a; Mahati, 2009, Palmary, 2009). Therefore, the psychosocial needs of livelihood seeking UAMs are just now being discovered.

Some cross-border UAMs facing trauma need to access specific psychosocial services, which may prevent protracting the period of traumatic state (Wessells and Monteiro, 2004a: Arntson and Knudsen, 2004; Christoffersen, 2007; Spaun, 2007;

Machel, 1996; Summerfield, 2001 and 1999). For the purpose of this study, trauma is defined as an emotional (psychological) response to a terrible event. People dealing with trauma generally display unpredictable emotions and have strained relationships (Clacherty, 2006a and 2006b). There is no 'cure' for trauma, but psychosocial programmes find constructive ways of managing emotions and cater to the individuals overall well-being (IASC, 2008; Vearey et al., 2011). As seen in Clacherty (2006a), the UAMs that were interviewed in her study did attend counselling, but because the counselling did not address specific areas pertaining to the UAMs' situation, the counselling was not beneficial for the minors so they continued to show behavioural issues (Clachtery, 2006a). Eshia (2010) and Summerfield (1999, 2000 and 2001) found a similar link between the psychosocial well-being of cross-border UAMs and possible behavioural dysfunctions if these needs are not met. These are reasons for the creation of psychosocial programmes.

2.4.3 Programming in South Africa

A case study by Simpson and Zambuko (2007) indirectly relates to one of the initial questions of how cross-border UAMs are meeting their psychosocial needs by showing that South Africa fails to provide psychosocial programmes primarily on a national scale. Despite the provisions of the South African Constitution (1996), the Children's Act (2008) and legal instruments to assist cross-border UAMs, state and non-state actors in South Africa may still face enormous challenges in their bid to provide UAMs with social welfare, security and legal services (Simpson and Zambuko, 2007; Joyce, 2009; Bhabha, 2008). Although not a study focused on cross-border UAMs, research conducted by Simpson and Zambuko (2007) showed that South African mental health patients in need of psychosocial assistance, located at a half-way house in Durban, were unable to access certain psychosocial development tools because the South African government is ill-equipped and lacks sufficient resources (McKernan et al., 1998). By extension, one should not expect to find such programmes for cross-border UAMs either. Vearey et al. (2011) commented on the psychosocial well-being of forced migrants as well as the accessibility of psychosocial services in Johannesburg. Their findings concluded that although there are limited psychosocial services available, they are effective in bettering the well-being of forced migrants. However, forced migrants still face enormous challenges in

accessing services in Johannesburg (Vearey et al. 2011). Simpson and Zambuko (2007) add that in 1997, the "National Health Policy Guidelines for Improved Mental Health in South Africa" (Department of Health, 1997a) were developed, but unfortunately the policy guidelines were never formally adopted (Lund, Kleintjies, Campbell-hall, Mjadu, Petersen, Bhana, Kakuma, Mlanjeni, Bird, Drwe, Faydi, Funk, Green, Omar, & Flisher, 2008 in Simpson and Zambuko, 2007; McKernan et al., 1998).

A formal psychosocial rehabilitation policy for South Africa still has not been implemented, but prospects for a new bill that promotes recovery and the social integration of people with mental health problems is expected (Lund, et al., 2008 in Simpson and Zambuko, 2007; McKernan, 1998). Although South Africa has not been able to develop guidelines and policy on psychosocial health, there are international guidelines, and procedure in place by the international community (IASC, 2008). The Inter-Agency Standing Committee (IASC) (2008) created internationally recognised guidelines, the *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings*, which "enables effective coordination, identifies useful practices, flags potentially harmful practices, and clarifies how different approaches to mental health and psychosocial support complement one another (IASC, 2008:5). The IASC is only one example of the multiple 'guidelines' available to the international community. These guidelines were created so that countries that have not adopted policy or law on mental health and psychosocial well-being have a recognised legislation to follow.

As stated in the previous section Boyden (2003) notes that although minors are highly resilient, their environment and cultural surroundings are considerable determinants in their psychosocial well-being (Ahearn, 2005; Boyden, 2003; Summerfield, 2000 and 1999; Clacherty, 2003, 2006a and 2006b; Pupavac, 2001 and 2004). Summerfield (2001 and 1999) proposes that cross-border UAMs are lacking the two fundamental platforms to their psychosocial well-being; stable environment and a nuclear support (e.g. family, community, or caregivers) which are the main source of their unmet psychosocial needs (Boyden, 2003; Pupavac, 2001; UNHCR and WHO, 1996; Wessells and Monteiro, 2004a and 2004b; UNHCR, 1996). With these factors being a crucial point of concern, UNICEF, UNHCR, Save the Children and the Red Cross

Federation have produced manuals and guides specifically dealing with cross-border UAMs and their psychosocial needs in camp-based settings. However, the UNHCR and WHO (1996) and UNHCR (1996) manuals on how to deal with UAMs solely focus on the psychosocial needs in emergency situations. In camp-based programmes Save the Children promotes a holistic approach to the psychosocial well-being of cross-border UAMs, emphasising the importance of viewing minors as members of a dynamic social system, not solely focusing on the individual, but on the UAMs' interactions with the care-giver, clan, community, ethnic group, and society (Arnston and Knudsen, 2004). As Erikson's theory suggested, the psychosocial well-being is extremely important for minors and the partnership with his/her environment is present in almost every human action and thought. Erikson's theory in conjunction with Wessells and Monteiro's (2004) observations, which highlight the importance of incorporating cultural and community practices into psychosocial programmes, is the reasoning behind the development of special psychosocial programmes for cross-border UAMs (Black, 2008; Christoffersen, 2007; Spaun, 2007; Bean, 2006; Summerfield, 2000).

According to Arnston and Knudsen (2004), camp-based psychosocial programmes support "the cognitive, emotional, and social development holistically, and strengthen the child's social support systems. Emphasis is placed on strengthening social environments that nurture children's healthy psychosocial development at various levels with the family, community, and children themselves" (Arntson and Knudsen, 2004:4). The literature suggests that protective factors include internal resources such as: confidence, self-identity, and judgment; and external resources such as: church, friends, and other social groups (Arnston and Knudsen, 2004 and as mentioned in Førde's (2007) research on UAMs' resilience). As listed, common protective factors include both internal and external factors as healthy coping strategies. Once these factors are acquired or utilised, then the child will always be able to use them as support mechanisms when facing challenges (Raghallaigh and Gilligan, 2010; Arnston and Knudsen, 2004; Førde, 2007; Boyden, 2003). It is important to note that the UAMs choose/select (this is dependent on the resources available to them) their external resources while the internal resources are inherent. However, the function of psychosocial programmes is to strengthen both their internal and external resources and not to install new resources (Arnston and Knudsen, 2004; Raghallaigh and

Gilligan, 2010; Førde, 2007; Boyden, 2003; Summfield, 2000, 2001 and 1999; Mahati, 2009; Crawley, 2011; Clacherty, 2006a; Palmary, 2009; Van Willigen, 2000).

As afore mentioned, psychosocial programmes designed for cross-border UAMs are unique and understanding the psychosocial needs of these minors will help develop programmes catering to their well-being (Ahearn, 2005). However, problems of access, availability and discrimination of cross-border adult migrants (as seen in Simpson and Zambuko, 2007; Vearey et al., 2011; Mahati, 2009) may also debar cross-border UAMs from accessing services in order to fulfil their needs (Peberdy and Majodina, 2000; Campbell, 2006; Eshia, 2010; Jacobson, 2006; Landau, 2009b).

In summary this section has concluded that Felsman et al. (1990) supports that psychosocial programmes are vital to the well-being of cross-border UAMs. Ebyer (2004) and Chimedza (2005) notes that there has been little research as to how cross-border UAMs meet their psychosocial needs in a country that promotes urban integration rather than camp settlements (with the exception of Palmary, 2009; Crush, 2005; Crush and Dodson, 2007; Clacherty, 2006a; CoRMSA, 2007; Hillier, 2007; Mahati, 2009). Ebyer (2004) notes that this is particularly true in Johannesburg. However, Wessells and Monteiro (2004a) point out that psychosocial programmes have to be congruent with the person's cultural background, otherwise the programme is rendered ineffective. These facts essentially underline the need for more extensive research on the psychosocial needs of cross-border UAMs in order to promote the design and implementation of more effective psychosocial programmes.

2.5 Child vs. Minor

There is a debate surrounding the definitions of 'child' and 'minor'. As seen in the legal context, 'minor' is generally classified as a person who has not yet reached the legal age of majority (Campbell, 1992; CRC, 1989). In South Africa the age of majority is 18 (Blacksash, 2011) According to the Convention on the Rights of the Child (CRC), 'child' is defined as a person who has not yet reached the age of eighteen (CRC, 1989: Article 1). Legally the difference between the two is not significant, yet different penalties apply (Campbell, 1992). This means that once a

person turns 18 they are deemed completely responsible for their actions and harsher punishments (legal punishments) apply to that person.

'Childhood' is relative to each person, but it is acknowledged that there are transitions into each life-stage (Erikson, 1950; Arnett, 2000). The process of transition from childhood (3–12 years of age) to adolescence (12–17) is casual and long-term (Arnett, 2000; Erikson, 1950; Rumbaut, 2005). Although law, policy and social construction often view minors as children, their 'childhood' life-stage may have passed (Campbell, 1992). Viewing all minors as children in practice seriously undermines the well-being of the minor (as seen in Mahati, 2009). Although the life-stages and transition periods are widely recognised, there are many sub-stages that were manufactured through research. One of the most notable sub-stages is known as the discovery stage (ages 16–18), this is when minors begin to work and start to build their social capital and begin to think about their functions in society (Gonzales, 2011).

The social construct of 'child' and 'childhood' is culturally-based, and that is why the law determines who is a minor. A 'child' or 'childhood' is arbitrary because their definitions are based on perceptions of concepts (Crawely, 2011; Summerfield, 1999; Young and Barrett, 2001), although, as stated above, legally a minor is a person under the age of 18, unless stipulated by the country (CRC, 1989:Article 1). For the purposes of this research, South Africa declares the age of majority to be 18, and therefore a child and a minor is considered to be any person under the age of 18. The Children's Act (2008) also clearly states that a child is a person who is under the age of 18. In South Africa at the age of 18, the person assumes full responsibility for their decision and actions.

Cross-border migrant minors assume considerably more responsibility for themselves and those in their 'family' setting and pass through childhood to adolescence faster than citizens (Gonzales, 2011; Rumbaut, 2005). As a result cross-border migrant minors do not have the same freedoms, stressors or responsibility as their peers. "These differences suggest that we should expect the children of immigrants—documented and undocumented alike—to experience coming of age differently from the native-born" (Gonzales, 2011: 605).

Arguably, Erikson (1950) and Summerfield (1999 and 2001) state coming of age and transitions into different life-stages is always varied from person to person. The environment around the minor would determine the transition, however if a native born minor and a cross-border minor transitioned in the same environment then it is suggested that they would experience coming of age, in the same manner.

Now that social science considers 'childhood' to be a social construct rather than a biological state, minors are seen as active, valuable contributors to research and members of society (Young and Barrett, 2001). This shift in social construction features 'children' as "meaning-producing beings in their own right and second, … culturally diverse" (Young et al., 2001:141).

Recently, traditional social science research methods have been denounced as problematic because they rarely involve the actual subject, the 'child' in the research. These methods are often based on positivist research methods such as using questionnaires which generate large quantities of statistical data but overlook the 'child's' actual circumstances. Moreover, these methods rarely enabled minors to have any input into the design or development of the research process. This highlights the issue of reflexivity and 'adult' influence in the research. Therefore, there is a need to find alternative approaches in obtaining viable data from the minors themselves, hence the use of participatory research methods (Young and Barrett, 2001).

2.6 Participatory Research Methods

Participatory research or participatory action research (PAR) is defined as "motivation, discussion, decision-making, implementation, organise people to participate for certain common objectives and sharing the benefits" (Saha, 2010:2).

Ingleby (2005) claims that vulnerable groups, mainly those with mental health problems, trauma or anxieties (such as separation anxiety) need to directly participate in research in order for optimal data to be collected (McKernan et al., 1998). Ingleby continues noting that

> "Most research studies, because of their methodology, give a very limited opportunity for [the participants] to describe their needs and problems in their own terms. This is because they make use of standardised questionnaires or diagnostic procedures, instead of methods, which have more the character of a dialogue and allow the person interviewed to express themselves in their own way. Only fieldwork using qualitative methods is capable of bringing the users' own perspective into focus" (Ingleby, 2005:25).

The UNDP (2003) takes a stand saying that participation in research and or decision-making highlights the fact that people are aware and involved in their economic, social, psychological, cultural and political environments that affect their everyday lives. Therefore, participatory research is not solely the act of giving the participants a task to perform and analysing what information is given, but it is permitting and encouraging the participants to create their own methods to answer the researchers' question(s). By using visual methods the UAMs are able to express themselves in their own way representing themselves within stories and pictures drawn by them (Clacherty, 2006a, 2006b, 2005; Ingleby, 2005; Young et al., 2001).

2.6.1 UAMs and Participation

The term participation refers to people, groups or individuals that give information to a researcher in a manner that they find conducive, which enhances the amount of information given (Saha, 2010). This also allows policy makers and academics to study marginalised and vulnerable groups that normally would not be accessible. Therefore, participation is mutually beneficial, or it is meant to be mutually beneficial to the vulnerable group (in this case UAMs) as well as the policy makers, researchers and/or academics (Ingleby, 2005; Young and Barrett, 2001; Saha, 2010).

It is for the above mentioned reasons that I believe UAMs' participation in research is so valuable. Participation in research is an empowerment tool for the participant and mutually beneficial for the researcher, as it provides strong and viable data. Saha (2010) writes "participation is all about 'empowering' the people to play an active role in the development process (Saha, 2010:247)." The participation of UAMs in research and/or policy is supported both by the CRC and South African Law. It is the

view of the CRC "the child shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of the child's choice (CRC, 1989: Article 13)."

With the participation of UAMs in my research I was be able to uncover the needs of the cross-border UAMs and make recommendations based on their needs. Their participation also allowed me to approach policy makers and service providers and directly highlight discrepancies between policy, practice and implementation ability in my analysis.

2.6.2 Semi-Structured Interviews

An open-ended interview allows the participant to bring forth relevant information or new questions that can be discussed and answered. The semi-structured interviews create the opportunity for the participants to add information they felt was pertinent to the research (Smith and Osborn, 2008).

2.6.3 Visual Methodologies

"The richness of such methods [visual research] cannot be underestimated as these processes ensure that the voices of otherwise silent populations are heard…" (Vearey 2010:51).

Banks (1995) notes that visual research methods is an approach to objectively record visible 'givens' but that as representations they are subject to the influence of their social, cultural and historical contexts of production and consumption (Banks, 1995). A wide range of visual research projects have been conducted in order for the researcher to learn about the participants and the participants to learn more about themselves (Banks, 1995). Visual research is highly productive with helping people to document problematic areas within their own lives and using this method attempts to empower the participants through visual media (Banks, 1995; Clacherty, 2006a; Young et al., 2001). "Visual sociology proceeds methodologically by making visual representations (studying society by producing images), by examining pre-existing

visual representations (studying images for information about society), and by collaborating with social actors in the production of visual representations" (Banks, 1995:2). This means that using visual data will offer a grander insight into the research. Visual representations reveal complexities of what is being drawn, filmed or photographed as well as information that is not directly represented in surveys and questionnaires (Clacherty, 2005). Therefore, visual representations made by minors allow others to comprehend the misunderstood social construct of 'childhood' (Young et al., 2001; Banks, 1995; Clacherty, 2006a, 2005).

Young and Barrett (2001) suggest a multi-method approach employing a relaxed, social fun atmosphere that allow minors to participate by using oral, written and visual activities. Using a visual research methodology that encourages participation and has UAM-centred and UAM-led activities will give 'the unique set of circumstances that impinge on the life of a child living and surviving in the cityscape' (Young and Barrett, 2001:142), which is crucial in understanding their psychosocial needs.

As noted in the previous section, using visual research methods allows for an in-depth understanding of UAMs and their environment (this includes their psychosocial needs). The UAMs' participation in the visual research allows the researcher to focus on the individual UAMs even in group settings. This method is particularly useful in order for the UAMs to represent themselves and tell their stories even if/when they have a limited vocabulary (Clacherty, 2006, 2005 and 2003; Young and Barrett, 2001; Oliveira, 2011). The direct participation of the UAMs empowers them building on their protective factors (as discussed earlier) and encouraging them to be represented as they wish to represent themselves (Clacherty, 2005).

2.6.4 Drawings

The CRC supports art (i.e. videos, drawings, paintings and forms of play therapy) as an expression of the child's view (CRC, 1989: Article 13). Clacherty (2006a) used drawings and art to assess the psychosocial needs of UAMs. Young and Barrett (2001) used drawings research to aid street children in Kampala. Their research built bridges between the researcher and the participants by encouraging the latter (children

in each case) to talk about difficult issues, crime and daily activities (Young and Barrett, 2001). Visual activities allow the UAMs to engage with materials and tasks while minimising the reflexivity of the researcher (Young and Barrett, 2000).

2.7 Conclusion

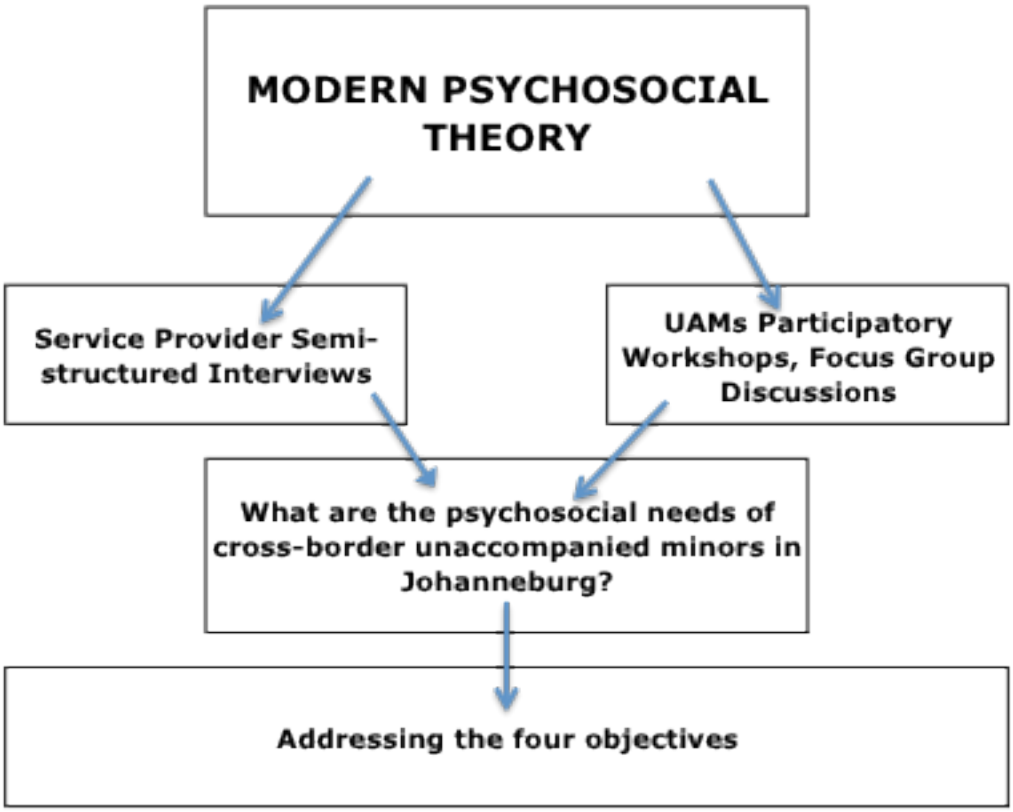
In conclusion to the literature review, there were six main sub-sections i) Migration and Johannesburg, ii) UAMs in Johannesburg, iii) UAMs and Vulnerability, iv) Defining Psychosocial, v) Child vs. Minor and vi) Participatory research methods. In the first sub-section I examined the migration flow into Johannesburg highlighting the justification and importance of conducting a research project in urban Johannesburg. The second sub-section introduced the conditions of UAMs in urban Johannesburg. The third sub-section discussed who an UAM is and why it is important to focus my study on this particular group. The fourth sub-section introduced the term psychosocial and its significance for this study. The fifth sub-section debated the notion of childhood and the labels of child and minor. The final sub-section discusses the literature around participatory research methods and their benefits when working with minors.

3 The Conceptual Framework

I developed a conceptual framework that allowed me to uncover UAMs' psychosocial needs and look at the responses to their psychosocial needs by service providers in Johannesburg. The conceptual framework is heavily based on 'modern' psychosocial theory—this pulls away from Erikson's original theory and draws from multicultural psychosocial theory (Markstrom, Sabino, Turner, and Berman, 1997; Wessells and Monteiro, 2004a and 2004b; Arntson and Knudsen, 2004; Pupavac, 2001 and 2004; Christoffersen, 2007; Spaun, 2007; Summerfield, 1999 and 2001).

'Modern' psychosocial theory, rejects and has modified Erickson's original framework mainly because Erikson's approach did not include; culture, religion, conceptualisation of family (traditional and non-traditional family structures) and key environmental changes (Wessells and Monteiro, 2004a; Summerfield, 2000 and 2001). Erikson wrote that psychosocial well-being is dependent on psychosocial development. However, this theory was based on Western idealism and has been widely disproven, which is why for this study 'modern' psychosocial theory was used as the conceptual framework.

The conceptual framework applied four main methods to uncover the psychosocial needs of cross-border UAMs living in Johannesburg: (i) the drawings, art and writings from the UAM workshop, (ii) the discussions from the UAMs, (iii) the semi-structured interviews with service providers, and (iv) the observations of the researcher.


MODERN PSYCHOSOCIAL THEORY
Service Provider Semi-structured Interviews
UAMs Participatory Workshops, Focus Group Discussions
What are the psychosocial needs of cross-border unaccompanied minors in Johanneburg?
Addressing the four objectives

4 Research Design and Methodology

In this chapter I describe the methodology and research design. In this study, a qualitative research approach is applied, aiming to uncover the psychosocial needs of cross-border UAMs. Following studies conducted by Clacherty (2003, 2006a and 2006b) and Chimezda (2005) and analysing techniques suggested by Felsman (1993), it is suggested that a qualitative approach is most effective when studying UAMs (Christoffersen, 2007; Spaun, 2007; Chemizda, 2005; Clacherty and Donald, 2007; Mann et al., 2003; Marshal et al., 1989; Felsman, Leong, Johnson and Felsman, 1990; Young and Barrett, 2001). The most compelling argument to conduct a qualitative study was that qualitative data encompasses an individual's perceptions and thoughts even when studying minors (Clacherty, 2003, 2006a, 2006b; Felsman 1993; Miller and Rasco, 2004; and Wessells and Monteiro, 2004a and 2004b). Strauss and Corbin (1990) have also pointed out that qualitative research incorporates factors that are difficult to convey when dealing with quantitative methods, such as; emotional distress or background.

My qualitative research will be conducted via:

- Individual interviews with UAMs: one-to-one interviews, drawing, written stories, discussions and games.
- Group discussion with UAMs (if they prefer a group setting).
- Group discussions with UAMs about visual works created during the workshop.
- Individual interviews with service providers and community leaders: semi-structured (open-ended).

4.1 Preparing for the Study

Prior to the UAM workshops and semi-structured interviews, I sent out a mass email to all of Refugee Aid Organisation's (RAO) partner organisations and organisations that deal specifically with UAMs and cross-border minors. Only two organisations responded back to me, namely the Johannesburg Child Advocacy Forum (JCAF) and

the Department of Social Development (DSD). Eventually, I followed JCAFs' referral to Kids Haven. The Director of Kids Haven (Moira) was sent an information sheet explaining my research along with sample questions for the discussions. Out of the 36 cross-border minors that volunteered to participate after the director's invitation, 12–15 were deemed true[11] cross-border UAMs. The meaning of true UAM will be discussed in the data and analysis section. There were 9 service providers and 2 community leaders that responded to the email.

Before I went to Kids Haven the director, Moira, and I had a telephonic discussion explaining the research and how I intended to conduct the interviews. We spoke for a second time, and she presented 40 cross-border migrants that she thought fit the criteria for the study. We then planned two days that I would come to Kids Haven to conduct the workshops. Moira then put me in contact with a social worker, who talked to the participants and collected those minors who were interested to participate in the study. I explained the study in detail (most already knew the activities, but not the games we played). I then passed around the assent forms, which the director had already signed, and I asked all the minors to sign their names if they were willing to participate. The participants were given a schedule of the activities and told that lunch and snacks will be provided.

After the information session, the cross-border minors were allowed to ask questions and we started to play ice-breaker games, while the social worker read through the information sheet with them and helped them fill in the form and sign-in sheet, if they could not on their own. Finally, after everything had been explained and the cross-border minors were ready, we (two volunteers and I) stated that at any time they could withdraw participation without any consequences and that they could choose to participate in each activity in whatever way they wanted.

[11] By "true UAM" I mean the ones that came to Kids Haven on their own and have no family they go to on weekends. Some of the cross-border UAMs are left at Kids Haven for a month or two, while their parents work, or have parents at the Methodist Church, but cannot stay there. Moira did not want to exclude any of the minors, so we agreed that all could participate and then I could sift the true UAMs out of the pool of participants.

4.2 Four Phases of Research

There were four main phases to this research study:

i) Find and select service providers and cross-border UAMs;
ii) Conduct semi-structured interviews with cross-border UAMs as individuals, pairs or groups;
iii) Conduct semi-structured interviews with service providers as individuals, pairs or groups;
iv) Feedback.

4.2.1 Finding the service providers and cross-border UAMs:

Local service providers; Sophiatown, Johannesburg Child Advocacy Forum (JCAF) and the United Nations Children's Fund (UNICEF) identified cross-border UAMs in various areas around Johannesburg. The cross-border UAMs are from the DRC, Burundi, Mozambique, Angola and Zimbabwe. I contacted various organisations that work as service providers to cross-border UAMs and requested the service providers to ask UAMs to volunteer for interviews. Community leaders[12] from DRC, Somalia, and Burundi were personally asked to participate in this research. However, the rest of the community leaders (i.e. of Mozambique, Angola and Zimbabwe) were introduced me via members of these communities.

Clacherty (2003, 2006a and 2006b) and Clacherty and Donald (2007), emphasise the importance of initially building trust when working with UAMs. With this in mind, I asked organisations that work closely with cross-border minors and UAMs to introduce me to these cross-border UAMs and their social workers, who were present at all times.

Participants from organisations were referred to me by other participants that have a well-founded knowledge of UAMs and the type of social services provided. This

[12] A community leader is a designated, often by secondary sources, person who is perceived to represent a community (Timngum, 2002).

method of referral is called "snowballing" (also known as, chain referrals, reputational sampling and network referral (Blaikie, 2010)). It is through these referrals that I was able to established good relations with most of the service providers and governmental organisations providing legal and social services to cross-border UAMs. For the community leaders, I contacted them via their community and asked them directly if they wished to participate in the study.

4.2.2 Semi-structured interviews with cross-border UAMs as individuals, pairs or groups:

I ran a participatory study with the cross-border minors after speaking with the participants and reviewing the literature. This allowed minors to decide i) the type of the interview, i.e. group interview or a one-to-one and ii) the structure of the interview, i.e. drawing and story-telling or question-answer format. All interviews were as informal as possible, and were culturally and age sensitive, as suggested by (Ingleby, 2005; Young et al., 2001; Clacherty, 2003, 2006a and 2006b; UNHCR, 1996; WHO and UNHCR, 1996).

Clacherty (2003, 2006a and 2006b) also highlights the need for a flexible approach, as it is not possible for the researcher to know how the minors will react to being interviewed. Some will prefer group settings and some will prefer to be alone. Clacherty's work emphasises the importance of various outlets of expression. Such types of activities are age-sensitive and thus more successful when trying to elicit information from minors (UNHCR, 1996; UNHCR and WHO, 1996).

The individual interviews were interactive in nature and the minors were encouraged to participate in games, drawings, activities and discussions, but were not obligated to do so. The activities in the UAM workshops included i) my journey, ii) weekly schedules, iii) challenges faced, iv) what I want to be and v) group discussions. Drawings ware beneficial when working with minors because they allow the cross-border UAMs to reflect before sharing their stories with researchers. As Clacherty (2003) notes:

"One of the techniques used to encourage minors to talk was to create a

> hypothetical child through the use of a silhouette figure and to allow children to tell their own story in the third person. This served two purposes. It allowed minors to admit to practices that they thought the researchers might have disapproved of and created a measure of emotional distance for the child if they were talking about a painful event".
>
> -Clacherty, 2003:3-

Although the participants did not create silhouettes, in their drawings they presented fictional characters to represent specific situations. This allowed the participants to speak freely and not accuse themselves or others that may have been involved in those situations. The drawings then became the focal point for the group discussions with the cross-border UAMs.

The discussions were written and then analysed. Both discussions and interviews did not solely focus on the problems the minors were having, but how they overcame these problems or how they are currently coping with unmet needs. This was productive in answering the research question and addressing the research objectives.

4.2.3 Semi-Structured interviews with service providers as individuals or pairs

After carefully explaining the research methods to the service providers, I described how these methods relate to the research question and objectives. The participants then sat for semi-structured interviews, which lasted between 45 – 90 minutes. Participants were encouraged to expand on topics they felt to be relevant and could omit what they thought to be irrelevant to the study.

4.2.4 Feedback:

All participants were given my personal contact information in case they wanted to withdraw their input or participation. In that case, the data collected from their interview would not have been used. Finally, if requested the participants will be given a copy of a report from the research.

4.3 The Workshop

4.3.1 The Research Sites

Kids Haven provided an activity space and the minors for the UAM workshops. RAO generously donated lunch and breakfast to the minors participating in the study. Working with minors is a sensitive (due to certain vulnerabilities of minors) and timely process. Considering the minors' needs all the interviews with the minor participants were held at Kids Haven. Kids Haven has full-time social workers available, plus support groups on location, which is why I chose to hold the UAM workshops there. Kids Haven received small donations of food and sanitary materials on every visit. These donations were for the entire shelter, not just the participants in the UAM workshops.

5.3.2 Participatory UAMs Workshop

As the literature suggests a participatory workshop was established in order to maximise data output (Ingleby, 2005; Young and Barrett, 2001). I followed both Sophiatown Psychological Centre coupled with UNICEF (2005) and Glynis Clacherty's (2003) psychosocial research to structure my workshop. The UAMs workshop was conducted after speaking with Sophiatown and Glynis Clacherty. Sophiatown Psychological Centre provides counselling to people with trauma (including UAMs), focusing mainly on their psychosocial needs. Glynis Clacherty works with minors (South African, foreign, UAMs, abused, etc...) and has performed many psychosocial workshops with minors (this includes UAMs). These two sources offered me information and techniques that helped me structure my workshops in order to ascertain the needs of UAMs during the interviews.

Thirty-six cross-border minors agreed to participate in a two-day workshop. Only 12 of the participants were classified as UAMs, and these UAMs were invited to participate in a third workshop. The participants participated in four activities: i) my journey, ii) weekly schedules, iii) problems and challenges faced and iv) what I want

to be.

Two volunteers agreed to aid me in the first two workshops. On the third and final workshop I worked with the UAMs on my own. The final workshop was more in-depth and intensive than the other two workshops. Participants had finished four activities and we discussed their drawings and stories and held a group and one-on-one discussion. Some of the UAMs preferred to tell me their stories privately. Participants gave their work in at the end of each workshop to be analysed and some provided stories, drawings and some wrote explanations along with their drawings.

5.3.3 Workshop Questions and Activities

During the workshop there were five activities and each activity had a set of questions to analyse what the UAMs had drawn, written or expressed. The questions and activities were created from two different studies; Clacherty's (2003) study *'Poverty Made Me Do This: Children in Musina, their experiences and needs'* and UNICEF (2005) *'Participatory Assessment with Children in Dzaleka Refugee Camp in Malawi'*. The planned questions and activities can be found in Appendix E and F.

The activities were all participatory games and art therapy play, which is useful for gathering information about sensitive subjects or working with children and minors. There were five activities i) my journey, ii) weekly activities, iii) challenges, iv) what I want to be and v) group discussions.

My journey is a multi-purpose activity; by this I mean that it can be used to unveil a wide-verity of issues and topics. For the purposes of this research, I wanted to uncover two answers i) the push or pull factors involved and ii) what happened during their journey to South Africa and then into Johannesburg.

"My weekly schedule" is a timeline of activities and was suggested to use because it allows the participant to retrace their activities and provides a point of reference for discussions. As mentioned previously Young and Barrett (2001) use weekly activities to understand how street children survive without any assistance from community, state or family. It also uncovers the participants' vocabulary and definitions. For

example in Young and Barrett's (2001) study the street children wrote that they were working for certain hours of the day, however, work for them, was stealing or performing illegal activities in order to survive. From this activity, I wanted to explore what the participants did throughout their day. This allowed me to ask about certain activities that were relevant to each of the participants.

"My challenges" is an activity that highlights threats to the participants' well-being. UNICEF (2005) used this activity to note gaps in care of minors in a camp in Malawi. I used this activity so I could see where the gaps in 'care' for cross-border UAMs is and if that gap was determined to be a psychosocial need how the participants cope with the unmet need.

"What I want to be" is an activity that presents the participants ambitions and future goals. As many scholars presented in this research ambition and future planning is a healthy expression for minors (Summerfield, 1999 and 2000; Boyden, 2003; Gonzales, 2011; Rumbaut, 2005). Arnston and Knudsen (2004) suggest that setting goals and having ambition signifies that the child or minor has an active support system and is able to problem-solve, which shows positive well-being (Summerfield, 2000 and 2001).

The discussions are key when trying to gather information from drawings, activities and games. Although there are indicators within the drawings an activities discussion was needed to fully understand the data given. For example a participant can draw a picture of a man with a gun and write crime. The research could interpret this picture as the man with a gun as a robber and part of the crime. However, in the discussion it may be explained that crime is a problem in the area, but the man with a gun was a police officer fighting the crime. It is for this reason that the discussions were indispensable for this study.

5.4 Semi-Structured Interviews

Although I had a set of five questions (listed in Appendix D) planned for the interview, the line of questions followed was modified in order to better adjust to the participants' responses. In the end, all questions were answered by the participants in

the course of our conversation without the need to explicitly prompt the question. In every interview, I would open the discussion by asking the first question. During the rest of the time (usually 45–90 minutes) I was able to elicit the answers to the remaining questions naturally through conversation.

Service providers took part in semi-structured open-ended interviews. Eleven service providers agreed to take part in the research. The semi-structured interviews consisted of five questions, which allowed the participant to elaborate or constrict their answers to their satisfaction. Smith and Osborn (2008) suggest that this is key in participatory research, semi-structured interviews permit the participating party to restructure their answers to themes that are most relevant to them. This also highlights themes that the participant is most knowledgeable about, which enhances the data in the research (Smith and Osborn, 2008).

After my first interview with a service provider from the Institute for Security Studies (ISS) I noted that one of the questions (question 4) was worthless for two reasons; i) the service provider answered the question without it being asked and ii) the question did not contribute to the data. As of the second interview with service providers I skipped over question four.

5.5 Observations

During the course of the research, I observed both the cross-border minors and service providers throughout my research. I looked at the dynamic relationships between the cross-border UAMs and various factors in their environment. It was through my observations and the group discussion that I was able to uncover the psychosocial needs of this group and the research objectives.

When I wrote my observation notes for the service providers, I did not get as much information as with the cross-border minors. However, I noticed patterns in the way government workers versus NGOs and NPOs answered the interview questions. My observations helped enrich my data, but it was in the answers the service providers gave I mined the bulk of the data.

Throughout the workshops, I was monitoring the roles of each of the minors in a group setting, group discussion, images and stories created. I was taking field notes after each interview or workshop and used my notes and the drawings during the data analysis.

5.6 Logistics

The research timeline is as follows:

- January – June 2011: Spend time in Johannesburg getting acquainted with the service providers and contacting organisations dealing with cross-border UAMs.
- August – September 2011: Start gathering participants.
- September – October 2011: Run workshops.
- September 22nd: Conduct 1st workshop.
- September 23rd: Conduct 2nd workshop.
- September 26th: Interview community leaders.
- October 1st: Interview service providers.
- October – November 2011: Evaluate initial data gathered through field notes and interviews. Identify key themes that require further exploration and additional data gathering. Through review of relevant literature and data gathering, compile key factors in the work and follow-up with all interviewees.
- November 2011: Evaluate all data and begin composition of research.
- December 5th: First final draft submitted
- January 23rd: Second final draft submitted
- February 5th: Final draft submitted
- February 15th: Thesis submission to committee

5 Ethics

Ethics approval was obtained for this study from the University of the Witwatersrand non-Medical Research Ethics Committee: protocol H110803. A copy of the certificate is included in Appendix A.

5.1 Minimising harm

> *It is not ethical to expose a child already vulnerable to any additional risk through an investigation that carries no benefit for the child. Interviews about painful subjects should be performed with the principle of 'least harm' (Boyden and Ennew, 1997:43 in Clacherty, 2003).*

One of the reasons for using Kids Haven to host the UAM workshop, was to ensure that if the researcher came across minors in particularly difficult circumstances, the shelter could provide immediate additional support. Clacherty (2003) also points out that it is crucial to have mechanisms available to the minors after the research was completed.

Throughout this research ethical standards set out by the guidelines of the University of the Witwatersrand were maintained. As the literature suggests minors are viewed as a vulnerable group, thus, ethical considerations were cast to protect the participants and ensure their well-being. The cross-border minor participants are paramount to the study, and without their contributions the research would hold no merit. Therefore, all participants were notified and explained the nature of the research being conducted and participation was voluntary. The minors are not forced to answer questions they are uncomfortable with and had the ability to terminate their involvement at any point in time. All service providers were introduced to the study by an invitation email, which then allowed me to request for a follow-up where I could ask questions in order to ensure the participants' understanding of the study.

I work directly with refugee UAMs through Refugee Aid Organisation (RAO). RAO is funded by UNHCR to provide financial assistance, food vouchers, clothes, and

other provisions to refugee UAMs. Although I did not interview minors that I work with directly, some of the minors may have benefited from RAO either previously or were currently receiving some sort of assistance through RAO. To avoid conflict of interest I accessed the UAMs through the Johannesburg Child Advocacy Forum (JCAF) and Sophiatown. Since RAO assists only refugee UAMs and its criteria are different from those of JCAF and Sophiatown, conflict was avoided.

5.2 Ethics of Research with Minors

In addition to many of the ethical issues outlined above, conducting research with cross-border UAMs creates further considerations in qualitative research. Clacherty and Donald (2007) point out that cross-border UAMs face additional challenges, in particular due to exposure to traumatic situations and in their suggestions for research with minors in Southern African context, they emphasise the importance of the researchers' familiarity with a child's cultural background as well as the culture of their surrounding environment. Therefore, I have tried to become as acquainted as possible with the minors' cultural practices, in order to be respectful of their cultural and religious beliefs and background (UNHCR, 1996; WHO and UHNCR, 1996).

Anonymity and confidentiality was not a possibility with the UAMs or service providers because of the group discussions, semi-structured interviews and activities. Confidentiality is identifiable information about individuals that are not disclosed to any person (Reamer, 1979; Wiles, Crow, Heath and Charles, 2008) which differs from anonymity which is identifiable information is kept from all persons including the researcher (Babbie, 2011). In my report the UAMs' identities were kept fully confidential. I enforced the no-name rule posited by Clacherty and Donald (2007) to avoid creating harmful situations. Many, if not all, of the cross-border UAMs were undocumented and did not hold legal status in South Africa. I have kept this and related information confidential.

Informed consent is a controversial and difficult ethical challenge with minors (Clacherty and Donald, 2007). I verbally explained that I am conducting research on what it is like for them to be in South Africa, and explained what psychosocial needs are as it pertains to this study. Since cross-border UAMs are by definition without a

legal guardian, care-giver, or adult who is responsible for them, consent forms by a guardian were not provided. As discussed with members of the ACMS staff, I obtained written permission from the organisation that is taking responsibility for the minor (e.g. Kids Haven). Where there was a care-giver, I obtained consent from that care-giver and assent (to agree or express agreement) from the cross-border minor participants. In all cases, a minors' decision not to participate immediately superseded over the care-givers' consent and that the child was disregarded from the pool of interviewees. I ensured that there was always a social worker accompanying the cross-border minors in order to look after their best interest.

Working with cross-border UAMs is challenging, hence upon noticing that the interview or questions were at all strenuous to the participant, I immediately ceased the interview and made sure the minor was referred to an appropriate service provider. I constantly assessed whether any interaction could potentially harm the participants, by stigmatising them for example, which could consequently encourage mistreatment by peers or other individuals.

Working with cross-border minors gave me access to a host of personal information. Consequently, extreme caution was applied in ensuring that only private or sensitive material that finally entered the study was directly responsible for or related to the UAMs' psychosocial needs. This is to protect the cross-border minor participants and prevent any harmful situations.

5.3 Ethics of Research with Service Providers

Confidentiality is necessary in any study with semi-structured interviews in order to protect the participants' identities. Although I know the positions and names of all service provider interviewees, I will only disclose such information of those participants who have given their permission.

In order to obtain consent, I wrote an email to all service providers that work with RAO. I explained that I am conducting research on the psychosocial needs of UAMs in Johannesburg. I then attached the information sheet and consent form to the email, and waited for responses of who was willing to be interviewed. Eleven service

providers and two community leaders confirmed their interest in the study. In all cases, if a service provider or community leader did not respond to the email, I did not pursue the issue any further.

All the semi-structured interviews were held at the offices of the service provider.

6 Data Analysis and Discussions

In this chapter I will present the data collected from my research. I start with a description of how the data was collected then present the participants, who they are and where they come from before moving on to the drawings and focus group discussions. The drawings presented are from all the participants of the UAM workshop and not just the cross-border UAMs. I included the data from both groups of participants to shoe the similarities and differences in the psychosocial needs of UAMs and minors.

Data was compiled via the drawings, semi-structured interviews, group discussions, and observations. The cross-border UAMs participated in five activities, four of which were art based (drawing or writing) and the final activity was a group discussion. The themes for the discussion were drawn directly from UAMs workshops and the semi-structured interviews with service providers. After the art-based activities were completed, there was a discussion centred on each activity highlighting the similarities in their stories, but also bringing forward differences. The upshot of the tasks and discussions was to distil the UAMs' needs and how they met them.

Drawings made it easy for the UAMs in the workshop to feel comfortable with 'talking' about themselves to me as well as the other Kids Haven minors. Drawings also allowed the UAMs to talk about what had happened to them without participating in the dialogues and story-telling (although more in-depth information was gathered when the UAMs were willing to speak about their circumstances). As Young and Barrett (2001) also suggested, drawings and maps were useful in changing the nature of the research and minimising 'outsider' involvement. Though the UAMs participated and expressed their responses however they chose, drawings, discussions, plays and games were also encouraged during the research.

This research supports existing literature highlighting the importance of family and cultural ties in the psychosocial well-being of UAMs as well as the need for individual participation of the minor in the development of psychosocial programmes.

I focus on themes that were presented by service providers and the UAMs such as **child-headed households, imprisonment, street UAMs and parental accountabilit**y which constitute themes not found in previous research.

In conjunction with careful review of the literature on themes surrounding the psychological issues of cross-border UAMs, I employed methods of coding for various concepts and themes that emerge during the discussions with the minors and make them the focus topics for the semi-structured interviews. Coding is a process of measurement: The coding in this research is constructed by categories that constitute operational definition of themes which are the underlying variable used for analysis (Crano and Brewer, 2009). I coded my information and highlighted the number of participants for each theme and using the number of participants as a system to rank the importance of each theme.

First I will highlight commonly observed needs and themes gathered from the UAMs and then identify relationships between these various needs and the UAMs' current environment. With these conceptual labels (experiences and feelings) I asked questions to isolate reoccurring themes. It was at this point that I uncovered the relationship between the psychosocial needs of the UAM and how those needs are met.

Throughout the analysis of the data collected, I took into consideration the literature on psychological issues of cross-border UAMs as well as other studies produced by the African Centre for Migration and Society (ACMS, formerly Forced Migration Studies Programme, FMSP), Lawyers for Human Rights (LHR) and other international and national organisations that have worked with cross-border UAMs.

The first two workshops hosted 36 UAMs from various countries, in table 3 (below) there is a list of the participants, their country of origin and their gender.

Table 3: Participants in UAM Workshop

Who Participated Final UAMs Workshop			
Country	**Age**	**Attending School**	**Gender**
Angola	15	yes	Male
Burundi	16	no	Male
Democratic Republic of the Congo	17	no	Male
Democratic Republic of the Congo	14	yes	Male
Democratic Republic of the Congo	13	yes	Male
Democratic Republic of the Congo	15	yes	Male
Democratic Republic of the Congo	15	yes	Male
Mozambique	17	no	Female
Mozambique	6	yes	Female
Zimbabwe	16	no	Female
Zimbabwe	17	no	Male
Zimbabwe	16	yes	Male
Zimbabwe	11	no	Female
Zimbabwe	14	no	Male
Zimbabwe	6	yes	Male
Zimbabwe	15	yes	Male
Zimbabwe	15	yes	Male
Zimbabwe	16	yes	Female
Zimbabwe	13	yes	Male
Zimbabwe	12	yes	Male
Zimbabwe	12	yes	Female
Zimbabwe	9	yes	Male
Zimbabwe	15	yes	Male
Zimbabwe	15	yes	Male
Zimbabwe	15	yes	Female
Zimbabwe	17	yes	Male
Zimbabwe	17	yes	Male
Zimbabwe	15	yes	Male
Zimbabwe	14	no	Male
Zimbabwe	13	yes	Female
Zimbabwe	15	yes	Male
Zimbabwe	9	yes	Female
Zimbabwe	17	yes	Male
Zimbabwe	10	yes	Male
Zimbabwe	14	yes	Male

There are 35 participants listed here, but there is was 4-year-old Zimbabwean boy that attended the workshops. He is not listed as a participants because he only participated in the games. When the social worker asked him (in Shona) if he understood the activities and asked him questions, the boy did not wish to respond to the questions and did not understand the exercises. Therefore, he was unable to give his assent to participate and there were not 'age-appropriate' activities available for him.

Table 4 presents a list of the 12 UAMs that were selected to take part in the third and final UAM workshop.

Table 4: Participants in UAM workshop

Who Participated Final UAMs Workshop			
Country	**Age**	**Attending School**	**Gender**
Burundi	16	no	Male
Democratic Republic of the Congo	17	no	Male
Mozambique	17	no	Female
Mozambique	6	yes	Female
Zimbabwe	17	no	Male
Zimbabwe	16	yes	Male
Zimbabwe	11	no	Female
Zimbabwe	14	no	Male
Zimbabwe	6	yes	Male
Zimbabwe	15	yes	Male
Zimbabwe	14	no	Male
Zimbabwe	15	yes	Male

Looking at Table 3 and Table 4 there are a variety of different ages of minors who participated in the workshops. In the first two workshops (Table 1) there were 26 Zimbabweans, 5 Congolese, 2 Mozambicans, 1 Angolan and 1 Burundian minor participants. Using the life-stage definition of Erikson (1950) and Arnett (2000), there were 8 ‘child’ (aged 3-12 years) minors and 27 ‘adolescent’ (aged 12-18 years) minors. There were 10 minor participants that were in their ‘discovery’ life-stage (aged 16-18 years).

In the third and final workshop (Table 4) there were 8 Zimbabwaen, 2 Mozambican, 1 Congolese and 1 Burundian UAM participants. In the UAM group (Table 4) there were 3 child UAMs and 9 adolescent UAMs, of these 5 UAMs were in their ‘discovery’ life-stage. Earlier I stated that the third and final workshop was for the 12 true UAMs. By true UAM I was referring to those participants who met the UNHCR (1996) definition of who is an UAM, which is a person who has not reached the age of 18, who is without any legal guardian, care-giver, or person over the age of 18. This can be a child separated, abandoned, orphaned or run-away.

There were 9 female participants in the first two workshops and 3 in the second. Although my workshops were with a limited number of UAMs it seems that the dominant migrant gender are males. As for the generalizability of my research it will be mostly male centred.

6.1 Reflexivity and the Role of the Researcher

Reflexivity is the contribution or impact of the researcher on the research (Ellis and Bochner, 2001; Steier, 1991). In other words reflexivity is the theory that claims that the researcher cannot remain 'outside' of the research (ibid). It is important to recognise researchers' impact on the research so that the data can be analysed properly and makes the researchers aware of their role in the research.

Looking through my field notes, I have realised that I am very engaged in my work with UAMs and it was difficult for me to remain neutral when analysing the data. I also struggled not to reveal excess information which some of the UAMs told me in private. I suspect any participatory research, where the researcher is actively involved with the participants, would face these challenges.

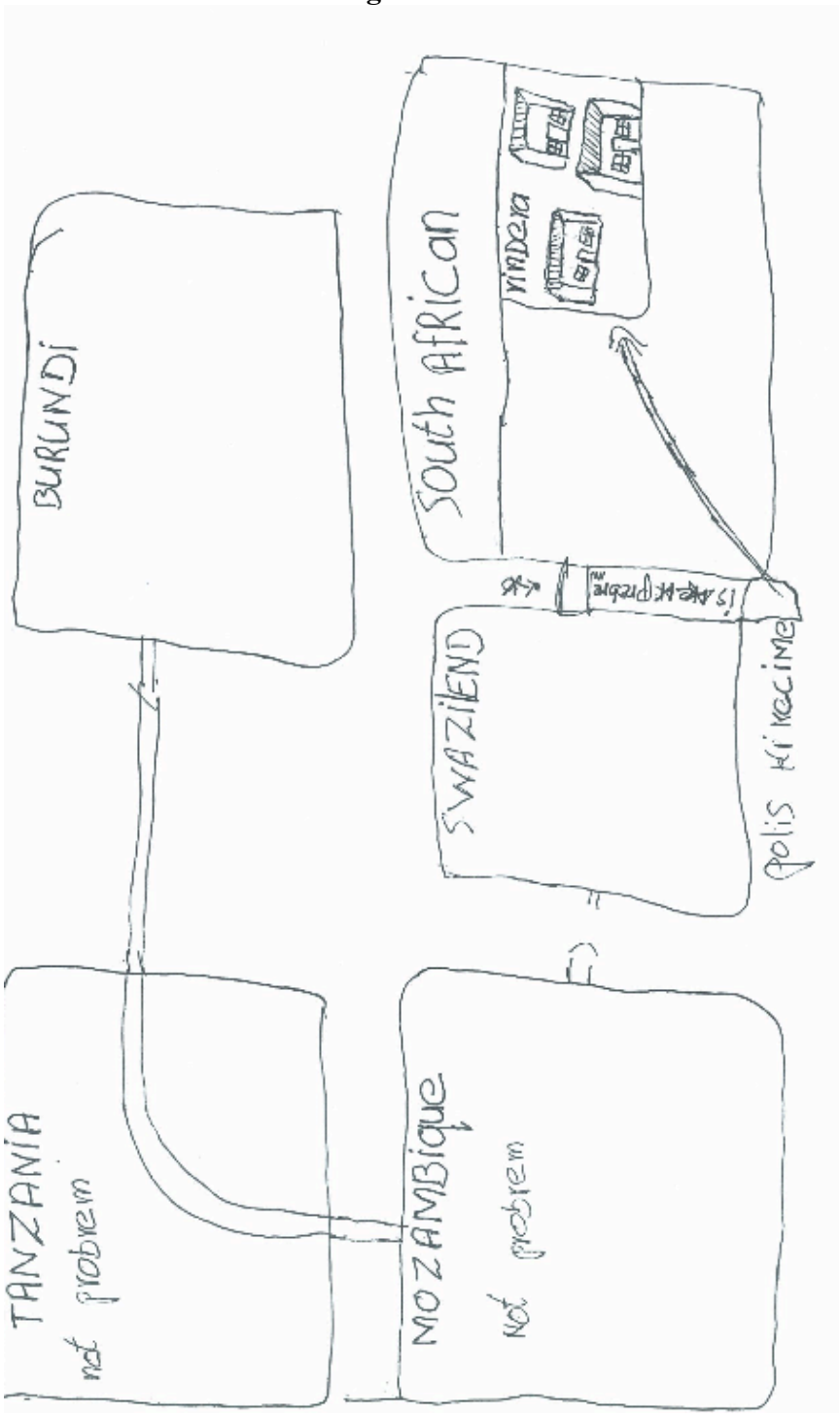
6.2 My Journey

This part of the workshop was used to map out the UAMs journey to Kids Haven from their country of origin. Once it was clear that the UAMs understood the theme and concept of the drawing they were asked to draw their situation at 'home' that made them decide to leave their country of origin, how they crossed into South Africa (and/or other countries), where and what they were doing in South Africa, and how they came to Kids Haven.

The UAMs were then gathered together and asked to participate in a general discussion about their journeys, but most preferred to explain their journey maps and stories to me in a one-on-one setting. Each child was given pieces of plain paper and had pencils, pens, markers, crayons and pastels at their disposal in order to draw their journeys. The drawings presented are from both the cross-border UAMs and cross-border minors that participated in the UAM workshops.

6.2.1 "The Police Took Me There"

Drawing 1: "The Police Took Me There"



One of the cross-border UAMs fled to South Africa after his parents were killed in Burundi. He passed through three countries before arriving in South Africa. This was

his first drawing, which pre-empted the third activity which was challenges and problems faced, where he drew a similar picture. His journey lasted about a month, not including the two months that he was kept inside Lindela Detention Centre[13]. His story is written in third person because he spoke to me in broken English mixed with French and a bit of Swahili and the story was too hard to properly articulate in first person.

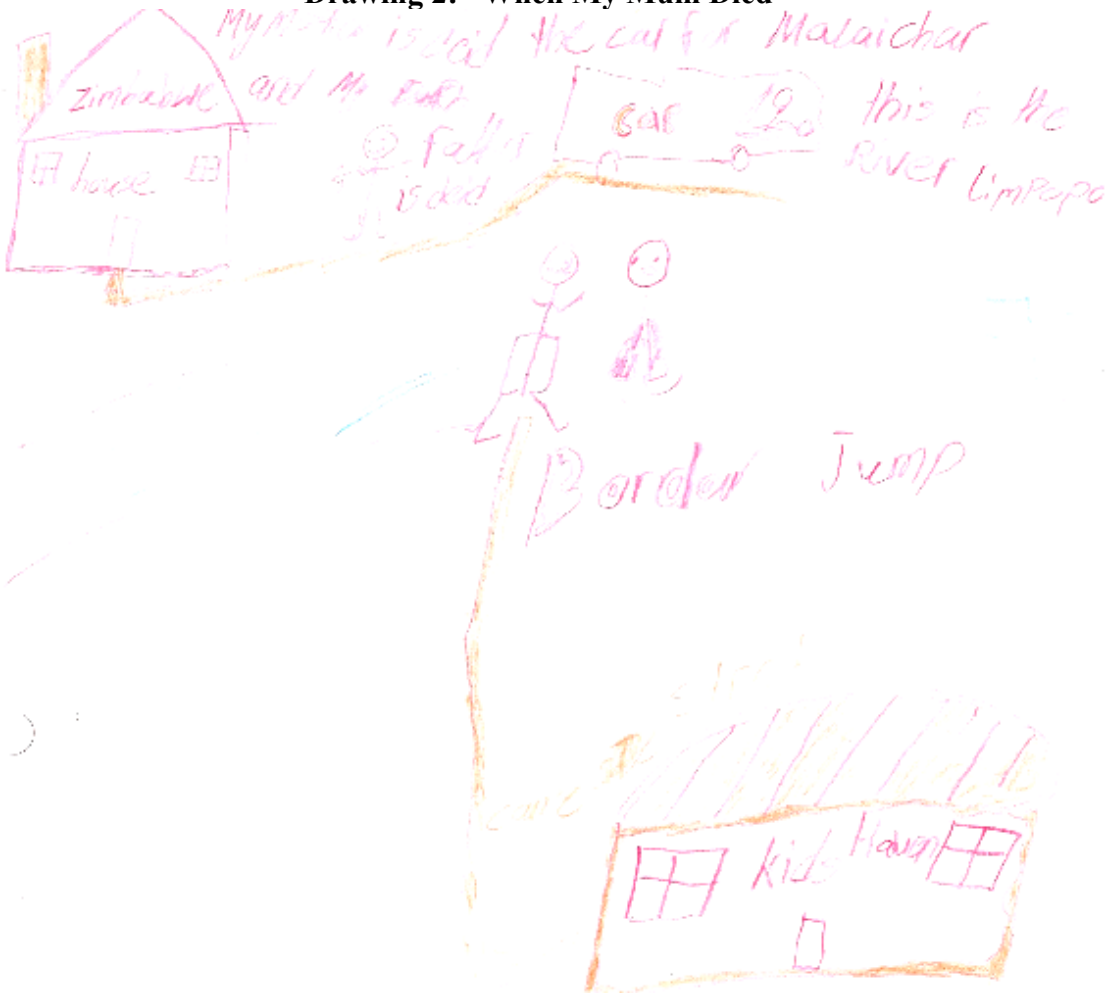
The story of his journey is:

His parents were killed in Burundi, he fled into Tanzania for safety, but he did not want to live inside a camp. He met a group of people who were going to Mozambique, so he joined them. They stopped in Mozambique, but no one wanted him there, he heard that South Africa would take care of him, so he walked to the border and swam across into Swaziland. He travelled through Swaziland and went into South Africa, but he jumped that border (crossed illegally) so he never received a document. He was arrested by police and taken to Lindela. He stayed in Lindela for two months before he was released. He was then taken to a social worker, who brought him to Kids Haven.

[13] Lindela Detention Centre is a holding facility for undocumented immigrants before they are deported back to their country of origin. It is the most infamous detention centres in South Africa.

6.2.2 "When My Mum Died"

Drawing 2: "When My Mum Died"



The second picture presented is of a Zimbabwean UAM who fled to South Africa because of extreme poverty. This UAM was 14 when he arrived in South Africa. He is now 16 years old.

His journey to South Africa is:

> "My mother died when I was still young. My father died soon after in a car crash. There was no one to look after me and no one would help me. After my mother died, things just got worse and worse. I met another boy who was my age and he said we should go to South Africa because there are people who can take care of us. We found a Malachair (a Zimbabwean word that refers to a

person who transports you across the border, generally illegally, a smuggler) who agreed to take us to the border. When we arrived we knew that they needed documents. I did not have any because my mother died. So we swam across Limpopo river and came to South Africa. I was living on the street with some other boys when a social worker asked me if I wanted to live at Kids Haven. I said yes and she took me to Kids Haven.

-16-year-old Zimbabwean, boy-

Drawing Analysis:

The 'journey maps' were used to facilitate UAMs' stories and to give a more accurate timeline of their move to South Africa. It helped them remember details and descriptions that they would have otherwise forgotten during the course of telling their story (Young and Barrett, 2001; Clacherty, 2006a). In the data section, I presented two drawings; ***"The Police Took Me There"*** and ***"When My Mum Died"***. I chose these two drawings because they tell the stories of two exceptional cases: the former is from an illegally detained UAM and the latter comes from an orphan street UAM.

The picture titled ***"The Police Took Me There"*** was drawn by a 16-year-old refugee UAM. In the literature review I mention research by Clacherty (2006) and Arntson and Knudsen (2004) that give a detailed account of refugee UAMs' journeys to host countries (Derluyn and Broekaert, 2008). Although the boy who drew ***"The Police Took Me There"*** was the only refugee UAM who participated in this study, the picture was selected because it depicts an untouched theme of illegally detained minors.

"The Police Took Me There" aligns with the stories reported in Clacherty (2003, 2006a and 2006b) from other refugee UAMs entering into South Africa. The refugee UAM took a bus (paid for by another person) to the border and then found alternate routes around border posts. Once the UAM came to the border between Swaziland and South Africa, he was arrested and put into Lindela Detention Centre. As mentioned earlier, Lindela is an adult facility for undocumented migrants who are awaiting deportation. The UAM stayed in Lindela for two months before he was

released for being a minor (i.e. he was unlawfully detained). Importantly, the UAM was also an orphan. According to Summerfield (2001 and 1999) and Arnston and Knudsen (2004), refugee UAMs dealing with family separation or death face more complex issues and need to cover more than just their basic needs (ISCA, 1996). Ultimately, this makes his case exceptional and his social integration even more difficult. This was attested in his reluctance to speak about the situation that forced him to leave Burundi as well as his isolation from the rest of the minors in Kids Haven, with whom he probably felt he lacked common background and experiences.

"The Police Took Me There" highlights two main themes stressed in this thesis; i) the vulnerability of minors and ii) dismissal of legal framework in South Africa. As seen in the literature review Summerfield (1999 and 2001), Crawley (2011) and Kia-Keating et al. (2007) note the vulnerabilities of minors, but also expose hidden strengths and resilience. In this case, the UAM's age was his hidden strength. Crawley (2011) noted that UAMs were allowed to reside in the UK on the basis of their status as minors and not as asylum seekers. Of course the release of one cross-border UAM does not preclude the detained and/or deportation of other cross-border UAMs. The cases presented above provide support for the hidden strength of minors/children as found in the literature (Summerfield, 1999 and 2001; Crawley, 2011; Kia-Keating et al., 2007). Amit (2010) researched Lindela Detention Centre and the detainees there. It was reported that there was a number of documented detainees in the centre, and they were waiting to be deported. Had the UAM not been declared a minor, he could/would have been detained and deported as the rest of the detainees. The Children's Act (2008) protects minors from being arrested and detained, but ***"The Police Took Me There"*** is an example of how institutions ignore the law and subject minors to harmful situations. As noted by Hillier (2007) and Clacherty (2003) the gaps between policy and practice are preventing the psychosocial well-being of cross-border UAMs (Engebrigtsen, 2003). A sense of ***security*** is part of a persons' well-being as seen in Vearey et al. (2011) and Clacherty (2006a), therefore cross-border UAMs' are being affected by detention and imprisonment. If the cross-border UAMs fear the police, then they are hiding from the exact people that are meant to protect them, and this is detrimental to their well-being.

"When My Mum Died" was drawn by a 15-year-old Zimbabwean boy. The seven

other Zimbabwean minors drew, wrote or told similar stories of their journey into South Africa. ***"When My Mum Died"*** is the only drawing that represented not only an orphan UAM but also a street child. As presented in the literature, Le Roux and Smith (1998) and Eshia (2010) shed light on the state of both cross-border street UAMs and orphan street children (Le Roux, 1993). Both Mahati (2009) and Kohli et al. (2003) discuss Zimbabwean UAMs and their survival in South Africa. Although there is literature on Zimbabwean UAMs or orphaned street children and cross-border street UAMs in Norway, there is no literature focused on orphaned cross-border street UAMs in South Africa. This makes ***"When My Mum Died"*** a valuable case study for this research.

The 'my journey picture/story ***"When My Mum Died"*** supports Timngum (2002) and Kohli et al. (2006) studies on cross-border UAM and attending school. According to Kia-Keating et al. (2007) and Timngum (2002), school is essential for cross-border UAMs' psychosocial needs. The UAM who drew ***"When My Mum Died"*** had never been to school and in our interactions he did not seem to cope well with the loss of his parents, particularly his mother. The UAM did not socialise with any of the other boys his age in Kids Haven because he was the only one not going to school and he felt different and separated from their group. He is undocumented and has missed over three years of school, and therefore has not been able to attend a formal school. Timngum (2002), Kia-Keating et al. (2007) and Mahati (2009) noted that the degree of social interactions among school-age minors is correlated and heavily depends on their language abilities. In this case, although the UAM spoke the same languages as the other boys his age, he still felt different from them and, therefore, refrained from interacting with them. Thus, I am led to entertain other factors that affect social interaction. In this case it seems most probable that his social isolation is due to his status as a 'street child'.

Both Le Roux and Smith (1998) and Young and Barrett (2001) stated that there is a certain status that street children have among others, which acts as a social disassociation mechanism. The UAM only interacted daily with three people and all three are apart of his church. Raghallaigh and Gilligan (2010) wrote that religious connection and acceptance is key in the psychosocial well-being of UAMs. However, schooling was still a central theme discussed between the UAM and myself. Legally

the Constitution (1996) and Children's Act (2008) give the right to 'all children' to attend school. This includes minors with or without documentation and it is mandatory to attend school until 16 in South Africa. Although there is a law in place, ***"When My Mum Died"*** highlights the fact that policies are not always followed (Landau, 2006; Timngum, 2002). The status of this child as an orphan street UAM lead to i) his marginalisation by a majority of his community, and consequently failure to connect with persons in his environment and ii) not ***attending school***. Therefore, this UAM is struggling to meet his psychosocial needs; psychologically, because he is struggling with social interaction amongst his peers; and legally, because the government officials in South Africa did not follow the established practices and laws for his case. Such minority groups of UAMs are often miscategorised along with other types of UAMs making psychosocial programmes suboptimally effective (Crawley, 2011; Palmary, 2009; Timngum, 2002).

Focus Group Discussions:

My Journey:

After the drawing session and a couple of games, the cross-border minors discussed the activity My Journey. Several of the Zimbabwean boys, when asked how they arrived in South Africa, pointed at one of the other Zimbabwean boys and said; "His father brought us here, his father is a Malaicher[14]". The boy they pointed at smiled as though the boys were giving him some sort of status. I then directed the discussion toward family. I asked how many have parents in South Africa or 'back home', nearly all the minors raised their hands. Only about four minors present in the discussion were orphaned or had an uncle or aunt who looked after them. The discussion then moved to why they came to South Africa. The responses included: i) ***Other family members sent us for work***, for example a 17-year-old Zimbabwean boy said "My parents died when I was young, I am the oldest, so when I was 16, my grandmother said I must work to support her and my sister. I wanted to go to school, so I came to South Africa. I lied to them, they think I came here to work" ii) ***School is free and better in South Africa***, for example a 16-year-old Zimbabwean stated "My parents

[14] This is the spelling that the UAMs gave me. A Malaicher is a smuggler.

both have jobs and cannot afford to send me to school in Zimbabwe, here (South Africa) it is free if you don't have money. I don't have any money, so for me it's free. We also can't go back. Once you start school here, if you try and return, they do not accept the school marks you got, so you have to start all over. It's better to stay" iii) ***I needed someone to care for me***, similar to the story told in ***"When my mum died"***, a small group of the minors came to South Africa because they were orphaned or abandoned by their family. A 17-year-old girl from Mozambique said "I was 16 almost 17 when my parents died, my little sister was 4 or 5, but my aunti said there was no money for us and I was no longer a child, so I had to find a way to take care of myself and my sister. So I brought us to South Africa", finally the most common response iv) ***My parents brought me here, but live at the CMC and I cannot stay there***. Over 20 Zimbabwean minors who participated in the discussion said that they had parents living at the CMC or close by at other shelters. One 12-year-old Zimbabwean girl started to cry when she was telling her story, "My parents are dead, but I have an older sister and brother. We all stayed at the CMC, but then the social workers came and said that me and my smaller brother could not live there anymore. So we lived in a place with my sister, but there was no money. So they took us here (Kids Haven)." The discussion ended, when I saw that most of the minors were then talking about what made them sad and what they missed. So I directed the conversation to the next activity, which was ***Problems and Challenges Faced***.

Discussion Analysis:

Although, Mahati (2009), noted that older Zimbabwean children stressed their desire to want to work in South Africa, the majority of my interviewees were older (16 to 17-year-old) minors, came to South Africa with the sole intention to finish or go to school. However, this is notwithstanding that these minors all seemed to have care-givers either 'back home' or in South Africa, whereas it is not clear of the circumstances of the UAMs' in Mahati's (2009) study. Only one interviewee worked. I noticed that the minors who said they came to South Africa because there was no one 'back home' to care for them or willing to care for them, was irrelevant. These minors, such as ***"When my mum died"***, were able to care for them selves and were not necessarily looking for someone to care for them, but more support them. They wanted to find more like-minded or minors that had similar circumstances to form a

social group and/or ‘replacement family’. The final point of discussion was the CMC. As the minors who had lost their parents expressed, they were looking to be reunited with their family. There seemed to be no difference in emotional stress brought on by family separation. Although all the minors interviewed had made friends, built social groups and had support systems in place, the desire to be with their family or constantly missing their family was present.

Conclusively, the table presented below highlights the main themes drawn from the data analysis of this activity.

Table 5: What Are The Psychosocial Needs

Need	Being (qualities)	Having (things)	Doing (actions)
Ontological		Food, Shelter, and Clothes	Sleep and Rest
Documentation	‘Legal'	Shelter, Access to Services	Attending School
Education		Community	Attending School (until age 16)
Family	Identity	Language	Love and Affection
Security	Refugee Status	Foster-Care Systems	Protected from deportation and prison

Table 5 noted several psychosocial needs of cross-border UAMs as well as Ontological needs, which at the time of their journey were not being met.

7.3 Problems and Challenges Faced

Problems and Challenges Faced was a difficult activity to conduct. Most of the UAMs who took part in the workshop did not feel very comfortable taking part the activity itself, but commented during the discussion. In this activity the UAMs were asked to draw problems and challenges they faced. They were not given a specific place or time in which they faced these challenges or had these problems. After the drawing or writing session, the UAMs were gathered together and asked to participate in a general discussion about their challenges. Each UAM was given pieces of ordinary paper and had pencils, pens, markers, crayons and pastels at their disposal in order to draw or write about their challenges and problems.

6.3.1 *"They Tease Me Because I'm Different"*

Drawing 3: They Tease Me Because I'm Different

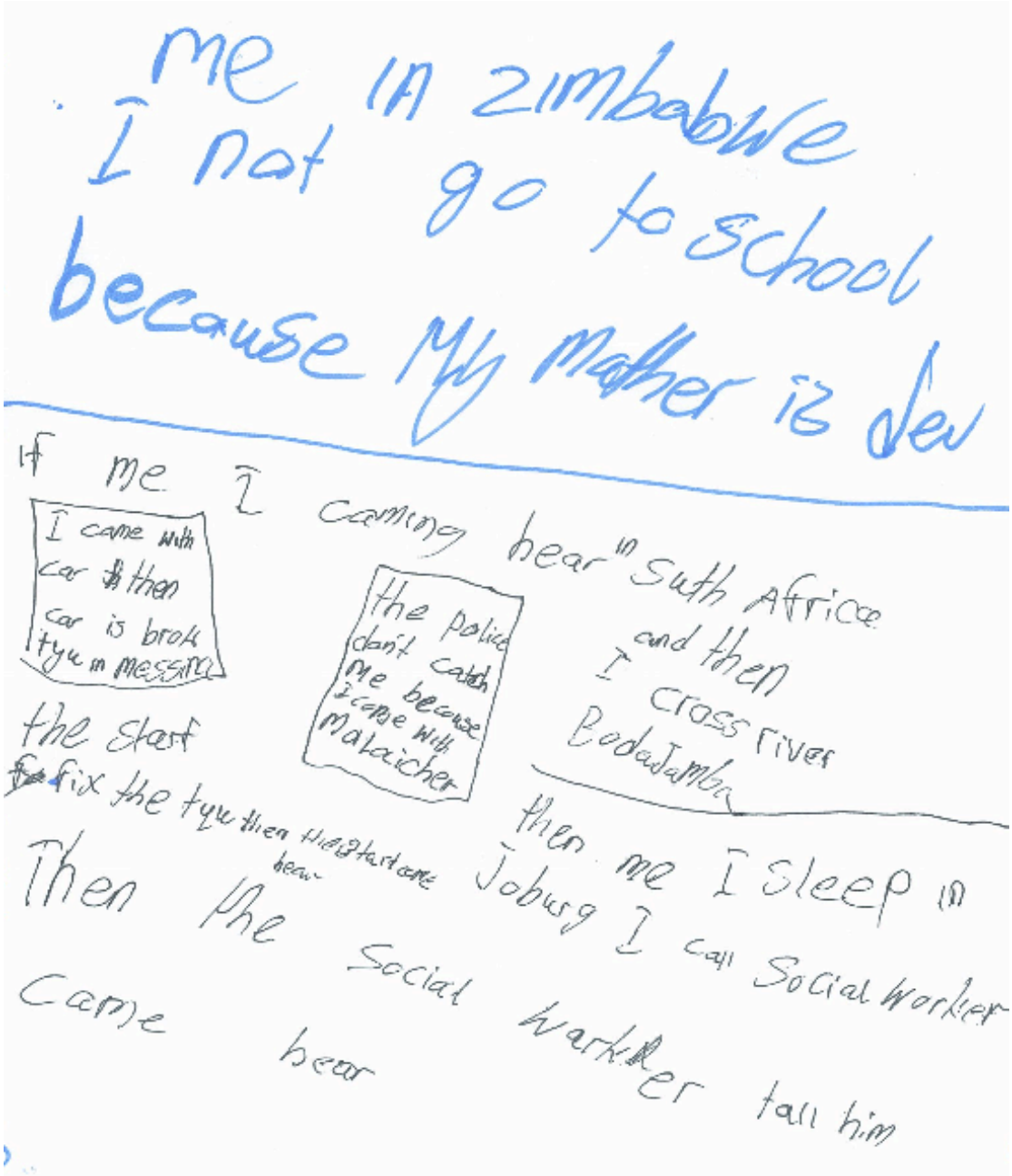


The UAM that drew this picture is a 11-year-old girl from Zimbabwe. She lives at Kids Haven with her younger brother.

In our one-on-one interview, she described her school situation. She said that at school she is bullied a lot by the other girls because she is poor and foreign. I asked more about the picture she drew, but she was not willing to say anything further, so I let her return to her seat and snack with the other UAMs. I was concerned with this particular drawing and her reaction to my questioning, so I alerted her social worker and the Director of Kids Haven. I asked them to look into this UAMs school situation and possibly a counselling session with her social worker.

6.3.2 "We Need A Better Future"

Drawing 4: "We Need A Better Future"



This picture was drawn by a 16-year-old Zimbabwean boy. He has not attended school since grade 3 because after his mother died no one supported him. He was one of the two street children that were also UAMs. Though he came to South Africa so he could continue school and find a place to live, he is still currently out of school. However, Kids Haven has arranged for him to attend Bridging school, where he is learning to read, write and being taught English.

Data Analysis:

The themes that emerged through 'Problems and Challenges Faced' highlight problematic areas in the UAMs' lives but also how UAMs overcome those challenges and push themselves to move forward (Banks, 1995; Clacherty, 2006a; Young et al., 2001). As acknowledged by Young and Barrett (2001) the researcher learns the UAMs' issues, but the participants learn more about themselves as well and develop their coping mechanisms (Clacherty, 2006a, Banks, 1995; Goodman, 2004). As mentioned in the data chapter, most of the UAMs did not feel terribly comfortable taking part in the activities themselves, but commented during the discussion. ***"They Tease Me Because I'm Different"*** and ***"We Need A Better Future"*** were chosen because they are centred on themes that were most common during discussions.

"They Tease Me Because I'm Different" touches upon three main themes; i) xenophobia, ii) safety and iii) fitting in. Xenophobia is a topic reviewed by Landau and Misago (2009) and Jacobson (2006 and 2002) and was present in ***"They Tease Me Because I'm Different"*** (Human Rights Watch, 2005). Almost all of the UAMs admitted to being treated differently by the local population, not only because they were foreign, but also because they are in foster care. Crush and Dodson (2007) describes an increasingly xenophobic South Africa and relates this information solely to the adult population. Through the group discussions it became clear that the UAMs were experiencing xenophobic prejudice almost on a daily basis. Besides bullying reported in ***"They Tease Me Because I'm Different"***, other UAMs complained about verbal abuse from their peers and government workers (social workers and home affairs). However, when asked about security and safety, remarkably few UAMs reported that they feel unsafe or fear xenophobic violence. This suggests that the abuse is mostly verbal rather than physical. Their biggest concern was fitting in. The UAMs discussed ways in which they do not fit in to their host society. Clacherty (2006) indicates that some cross-border UAMs chose to present themselves as South Africans rather than claim their own national identity. The UAMs noted that their peers teased them because they knew they were from a shelter. Once such background information is disclosed, there is always fear for verbal abuse and teasing, mostly with an economic undertone i.e., you are taking up South African resources. Indicators that

the Kids Haven UAMs were 'shelter kids' are; i) packed lunch in a bag instead of a box, ii) no snack money, iii) no mobile phones, iv) strict curfew and v) no school trips (unless the UAMs could find outside funding). This activity emphasised the need UAMs have to blend in with their host groups, not because they fear physical harm (apart from the girl who drew ***"They Tease Me Because I'm Different"*** and one or two more UAMs present in the group discussion) but because they want to live a normal life free of discrimination.

The most common themes of schooling/educational migration and livelihood migration are presented in the picture titled ***"We Need A Better Future"***. Many of the Zimbabwean and Mozambican UAMs expressed concern about their future in their country of origins (Fass, 2005). Crawley (2011) claims that UAMs are aware of the political situation and economic state of their country either through their parents or their own life experiences. Several of the Zimbabwean UAMs were sent to South Africa to work and provide for their family back in Zimbabwe. However, the UAMs wanted to continue their education rather than work and miss out on Matric. In a group discussion, the Zimbabwean UAMs brought up several key factors for not wanting or being able to return to Zimbabwe; i) school is expensive in Zimbabwe and their families cannot afford it, ii) the schooling system in Zimbabwe is different from that in South Africa, and they would be placed two years behind in school if they returned, iii) if they were to return they would not be welcomed by their families because they have not been working, iv) Zimbabwe is still under Mugabe and although the country has been reported to be in a better political standing, the country's organisation is still not in a full functioning mode. Through this picture, participants expressed a main psychosocial need, namely having prospects of better ***livelihood*** in the country of origin, that is, opportunities for education and employment.

Discussion:

Problems and Challenges Faced:

In this activity all 36 participants expressed their opinions. The problems and

challenges most discussed were: i) ***Missing Family***, as seen in ***"When my mum died"***, ii) ***Crime***, as one 9-year-old Zimbabwean boy told "you can't have anything nice, if you do someone will steal it. Even in my room people will steal my things. At school, if you have a train pass, other kids will go and steal them from your bag. How can we get to school then?", and iii) ***Xenophobia*** "I just tell people I am South African. I have been here long enough to fit-in." There were more problems discussed, but they were specific towards small groups. For example those minors who were receiving trauma counselling noted that once their sessions were over, they did not see their psychologist or social worker again. Most had grown close to the person directing the counselling group and felt abandoned by them. Other issues centred around food. The older Zimbabwean boys mentioned repeatedly that there was not enough food for them. I had to change the subject because when another minor countered their complaint with "you all have family here, you should be thankful for what is free and given to you. We are not the only kids in here", the boys began to argue. I broke-up the discussion with games and snacks.

Discussion Analysis:

This discussion went much differently than I expected. Though almost all the participants experienced crime and xenophobia, their first concerns were their family ties. During the discussion it also became apparent that all of the older minors were aware of the 'funding' issues of non-profit organisations. I was also expecting the minors to tell me how they coped with their problems, but only one or two mentioned 'coping techniques' mentioned in the literature review (ex. Protective factors). When I asked about crime and how they protect themselves a 9-year-old boy responded "Crime is high in South Africa, actually I think it is the highest here, here in Johannesburg, so it is not just us." As Boyden (2003) mentions minors have inner strengths, which must be encouraged to build resiliency. In this group of interviewees, coping techniques seemed to be adopting the attitude of 'that's just the way it is' and moving past the issue. The minors had a sense of what could be changed in their immediate environment and what could not. When I asked for recommendations for improvements, I was given a list of practical changes that could be made. For example more sports, later curfew for studying, being allowed a mobile phone (to call in case of an emergency), group pick-ups, etc... Not one participant mentioned,

adding more policemen on the streets to curb crime. They were only interested in changes that they could contribute to and not general transformations.

This activity and discussion, when analysed produced more psychosocial needs than the previous activity. In the table presented below the most common psychosocial needs were extracted and placed in order of relevance to the cross-border UAMs.

Table 6: What Are The Psychosocial Needs

Need	Being (qualities)	Having (things)	Doing (actions)	Interacting (settings)
Fitting-In	Accepted	Friends and Community	Playing and Having Friends	Peer Groups
Education		Community, Obtaining Skills	Attending School (until age 16)	School Grounds
Family	Identity	Security and Comfort	Love and Affection	'Home'
Security		Foster-Care Systems	Protected from deportation and prison	Anti-xenophobic Environment

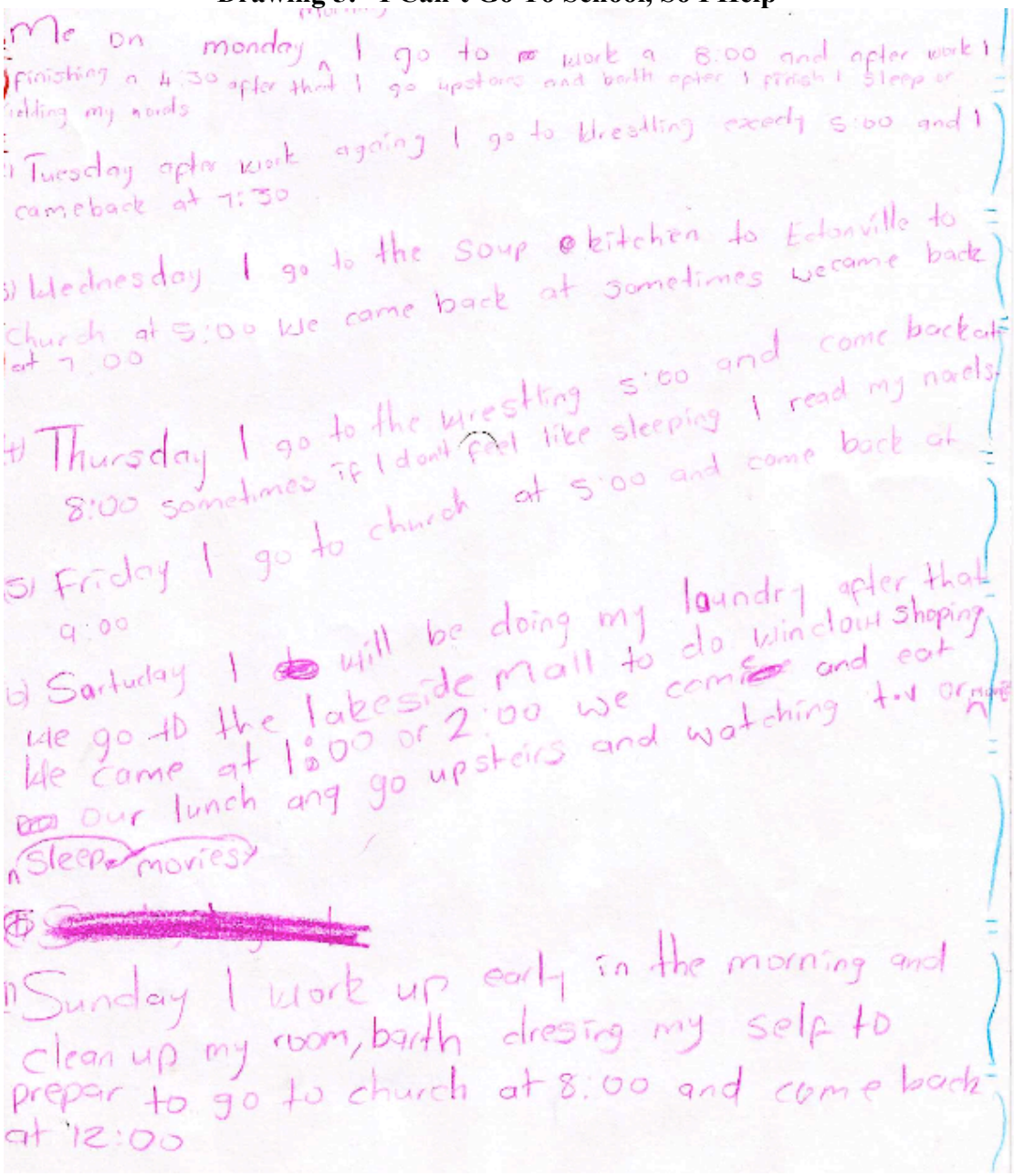
In this activity the UAMs did not mention any ontological needs, which signifies that 'basic' needs are being met from the time they arrived in South Africa. However, there are still a number of psychosocial needs that are not 'obtainable' to this group as shown on the table above.

6.4 Weekly Activities

The Weekly Schedule Activity was held on the last day of the workshop. There were 10 UAMs that took part in this activity. The UAMs were asked to draw their situation at weekly timeline of their life. What they do? Where they go? Who they are with? Each UAM was given pieces of plain paper and had pencils, pens, markers, crayons and pastels at their disposal in order to draw their Weekly Schedules. After they finished their drawings the UAMs were gathered and asked about their weeks. They all finished their drawings around the same time so we played a game that identified who does what during their week. The game allowed me to uncover which UAMs did what during the week, even if it was not in their drawing (Young and Barrett, 2001; UNICEF, 2009).

6.4.1 "I Can't Go To School, So I Help"

Drawing 5: "I Can't Go To School, So I Help"



This picture was drawn by a 17-year-old Zimbabwean girl. She is no longer classified as an UAM, she found her family after a year of living in South Africa. However, even though she was reunited with her mother and aunt, they are currently living at the CMC, and so she continues to live at Kids Haven.

When she described her weekly schedule, she went into detail about how she overcame obstacles being an UAM. Her weekly schedule revolved around the church

and helping the children at Kids Haven. She volunteers twice a week at a soup kitchen for families in need. She currently cannot go to school because of problems with her documentation, but she reads almost every night in order to advance her knowledge of reading and writing.

7.4.2 "I Learn English, So One Day I Can Go To School"

Drawing 6: "I Learn English, So One Day I Can Go To School"



This picture was drawn by a 6-year-old Mozambican girl. She came to South Africa with her 17-year-old sister.

Her weekly schedule centres on crèche. She plays, learns and talks to her teacher at crèche every day.

Young and Barrett (2001) claim that minors' weekly schedule (the participants in

their study) can be revealing of their psychosocial needs. They also note that participants will often draw hidden or illegal activities subsequently highlighting their survival techniques without adults and/or caregivers. Boyden (2003) notes that although UAMs are highly resilient, their environment and cultural surroundings are considerable determinants in their psychosocial well-being, which is another supporting reason to track the UAMs weekly schedules. I chose ***"I Cannot Go To School, So I Help"*** and ***"I Learn English, So One Day I Can Go To School"*** because they are two unique stories apart from the other UAMs and revealing of their needs and how they are met.

"I Cannot Go To School, So I Help" brought forward two reoccurring themes of minor imprisonment (as seen in ***"The Police Took Me There"***) and difficulty in accessing education without parent and/or caregivers (as seen in ***"When My Mum Died"***). The UAM who wrote this is a 17-year-old girl from Zimbabwe (as mentioned under the picture) who was not permitted to attend school in South Africa due to her lack of sufficient schooling years among other reasons. Instead of attending school, she assisted with taking care of other minors in Kids Haven. In her narrative, she said that the church (Central Methodist Church) was responsible for her release from the detention centre, her transportation to the Central Methodist Church (CMC), locating her mother and aunt (who she was separated from at the border when she was detained), finding her a job, and providing her with food, clothes and a community. Raghallaigh and Gilligan (2010) researched the impact of religious institutions on cross-border UAMs adaptation into host societies (Schweitzer et al., 2006). They concluded that if the UAM is religious, then their community holds significant influence over their survival in the host country. ***"I Cannot Go To School, So I Help"*** marked the importance of a religious community in survival in South Africa. Again in her description of her weekly schedule it was brought to my attention that every activity she is involved in, relates to the CMC (with the exception of wrestling). Although she was not the only UAM that mentioned the CMC as playing key roles in certain stages of their journey while in South Africa, she is the only cross-border UAM that depends entirely on the CMC for all of her needs. Through the CMC she was able to locate her family, and when she reaches the age of eighteen, she intends to reunite with them.

"I Learn English, So One Day I Can Go To School" was selected because this participant is the youngest and has no (or remarkably little) recollection of her journey, parents and life before Kids Haven. This participant is currently 6-years-old and attending crèche. She came to South Africa from Mozambique with her 17-year-old sister who is currently living with her at Kids Haven. Her aspirations include going to Grade 1 and possibly becoming a teacher or a doctor. Some of the things she mentioned that she needs and enjoys are: living with her sister, having lots of friends, going to school and playing games outside. She also discussed her teacher at crèche. She noted that besides her sister, her crèche teacher was someone she could talk to and would help her when/if she was feeling alone. She has not experienced any challenges or problems in South Africa and enjoys living at Kids Haven. Wessells and Monteiro (2004a) note that although psychosocial programmes are important for UAMs who have experienced trauma, family and community are an essential part in the well-being (Arnston and Knudsen, 2004). Because this UAM was so young when she left Mozambique and has only memories of living with her sister at Kids Haven, she has a strong support system in South Africa. Therefore, it seems as though younger UAMs or those who have been in South Africa for longer periods of time can relate more easily to South African minors and satisfy their psychosocial needs better.

Discussion:

My Weekly Schedule:

As stated previously My weekly schedule was an activity that allowed me to record what the minors did throughout the week and have them highlight events that are essential to them. There was not much discussion surrounding weekly activities only 10 participants contributed to the discussion.

"We go to school, we all go to school. Even the ones who don't go to school go to school. Our after school activities are what we like most " (15-year-old, Zimbabwean boy). ***"I Cannot Go To School, So I Help"*** was the only participant that did not attend school or bridging class during the week. She attended church, worked and volunteered throughout the week. All of the participants played at least one sport during the week, except for a Congolese 17-year-old boy. He was physically unable to

play sports, so he read and watched movies in most of his spare time.

Since there was a lack of discussion centred on weekly schedules, we played a guessing game to see who did what during their week.

Discussion Analysis:

The game, 'Who does what?' (Participatory Assessment with Children in Dzaleka Refugee Camp in Malawi', 2005) allowed me to monitor the importance of the activities to each participant. Sports and Religious groups were the highest ranked activities that the participants mentioned. Some participants played two or three sports and more than half of the participants attended church on Sunday. I noticed that the times for sports and activities were unusually close to the time the participants were released from school. The minors admitted to having to run home so they could play. Although I do not think they were aware, but it seemed as though this was a protective measure taken by Kids Haven to ensure their early return to the shelter for safety reasons. As mentioned earlier religious groups and support, as suggested by Raghallaigh and Gilligan (2010) are key coping factors and significant protective mechanisms for cross-border minors.

As mentioned there was little to no discussion surrounding weekly schedules. When analysing the data, few themes were mentioned as being important. The cross-border UAMs seemed to have a set and fixed schedule, which did not allow them for freedom alternate activities. Referring to the table below is the psychosocial needs highlighted by the Weekly Schedules Activity.

Table 7: What Are The Psychosocial Needs

Need	Being (qualities)	Having (things)	Doing (actions)	Interacting (settings)
Work	Useful	Responsibility and Colleagues	Helping Others	Mature Peers
Education		Obtaining Skills	Attending School	School Grounds
Religious Community	Empowered	Community and Comfort	Helping Others	Church or at Religious Meeting Places
Activities		Skills (Teamwork), Friends	Sports, Games and Playing	Ouside

6.5 When I Grow Up

In the When I Grow Up activity the UAMs were asked to draw what they wanted to be when they leave Kids Haven, or which profession they wanted to pursue. Then the UAMs were asked to participate in a general group discussion about their future plans. This time none of the UAMs participated in the group discussion. Instead, they all asked for a one-on-one discussions.

6.5.1 "I Will Be A Nurse and Go Help People Like Me"

Drawing 7: "I Will Be A Nurse and Go Help People Like Me"



There were several UAMs that wanted to be a nurse or a doctor. Their reasoning behind this vocation choice was either to help people in poorer areas to have a sturdy job. One of the UAMs even wanted to run a nursing school after she became a nurse.

This particular drawing was made by an 9-year-old Zimbabwean girl, who wants to

be a nurse that works with children. She was not particularly specific, but she said that she wanted to help people like her brother.

6.5.2 "I Will Go To Wits To Become An Engineer"

Drawing 8: "I Will Go To Wits To Become An Engineer"



This drawing was sketched by a 16-year-old boy from Zimbabwe. I chose his picture because he had participated in other UAM workshops before and he found this method of mind mapping the most productive. He explained that the palm is 'your' foundation. What is most crucial to 'your' life. Then each finger represents a different stage in 'your' life.

The second reason I added this picture is because of its emphasis on education and his

ambition. He said he wants to go to Wits to be an engineer. Then he explained how he plans to make enough money so that Wits is a possibility for him. The UAMs at Kids Haven are highly ambitious and intelligent, a rather admirable quality for minors.

Data Analysis:

The final activity in the workshop was 'What I want to be when I grow-up'. Clacherty (2006a) notes that cross-border UAMs planning a future or setting particular goals are catering to their mental (psychological) well-being (McKernan et al., 1998). UNICEF (2005) conducted a psychosocial workshop with UAMs in Malawi using the 'What I want to be when I grow-up' activity to help develop psychosocial programmes that directly assist the needs of the refugee UAMs (ISCA, 1996). It is essential to uncover the psychosocial needs of UAMs because according to Summerfield (2000, 1999) and Eshia (2010) there is a link between the psychosocial well-being of cross-border UAMs and behavioural actions depending on whether or not those needs are met. The two drawings presented ***"I Will Go To Wits To Become An Engineer"*** and ***"I Will Be A Nurse and Go Help People Like Me"*** were drawn by a 17-year-old UAMs, one who is attending school (Grade 11) and a 9-year-old minor.

One of the most interesting discussions and drawings was ***"I Will Go To Wits To Become An Engineer"*** not because other participants had different aspirations for their future, but because of the way in which he presented them. Most participants drew exactly what they wanted to be, but this UAM drew a picture of his hand and the five 'pillars' of his life. This indicates the participatory nature of this research (discussed in the literature review Saha, 2010; Ingleby, 2005) as the UAM found a manner in which he was comfortable to express exactly his intentions for the future (Clacherty, 2006). His drawing marks three reoccurring themes in the discussions which have also been mentioned in the literature review. These are the importance of education, church and family. The importance of family (of any type, location or kinship) was stressed in nearly all activities and discussion, notably in ***"When My Mum Died"*** and ***"I Cannot Go To School, So I Help"***. As mentioned earlier, education is a significant theme discussed in ***"I Will Go To Wits To Become An Engineer"*** and also ***"We Need A Better Future"***. A religious community or connection is discussed in this drawing (***"I Will Go To Wits To Become An***

Engineer") as well as ***"When My Mum Died"*** and ***"I Cannot Go To School, So I Help"*** and observed in several of the group discussions. Because of the high volume of discussion and drawings around family and education, I have marked these as general psychosocial needs for cross-border UAMs.

Only one interviewee worked. A 17-year-old Zimbabwean girl, ***"I cannot go to school, so I help"***. She works because, as the title suggests, she was unable to be admitted into school because of documentation and lack of previous formal education. As seen in Clacherty (2003, 2006a and 2006b), cross-border minors choose migrated because of their opportunity for livelihood activities, and schooling as seen in Gonzales (2011) is an essential part of minors' livelihoods. School is more than education, but a social and support group, it gives minors purpose and inspires them to create goals and have ambition. ***"I am going to go to Wits and be an Engineer"*** is an example of the ambition and positive outlook that school and support groups have on cross-border minor migrants.

The final drawing discussed is titled ***"I Will Be A Nurse and Go Help People Like Me"***. This drawing was the second referring to 'going back' into the UAM community and helping. I asked why she was only interested to help 'people like her' (cross-border UAMs and foreign migrants) and she said because 'these people are still in need'. She also supported Clacherty's (2006a) findings that the psychosocial programmes in existence do not necessarily cater to the psychosocial needs of the UAMs. The UAM suggested that if former UAMs 'go back' into the community aid and assistance will be more effective, because former UAMs know what it is like to be a UAM in South Africa. This connection with other UAMs is (as noted by Le Roux and Smith (1998), Le Roux (1993) and Young and Barrett (2001)) a support and protective mechanism for the survival and well-being of the UAMs. Reflecting back on the literature review Bernard (1993) shows that UAMs that choose their own associative groups live far better and develop better life skills such as decision-making and school performance (Lustig et al., 2003; Mahati, 2009; Bernard, 1993; Crawley, 2011). This type of 'togetherness' and support is highlighted as a psychosocial need.

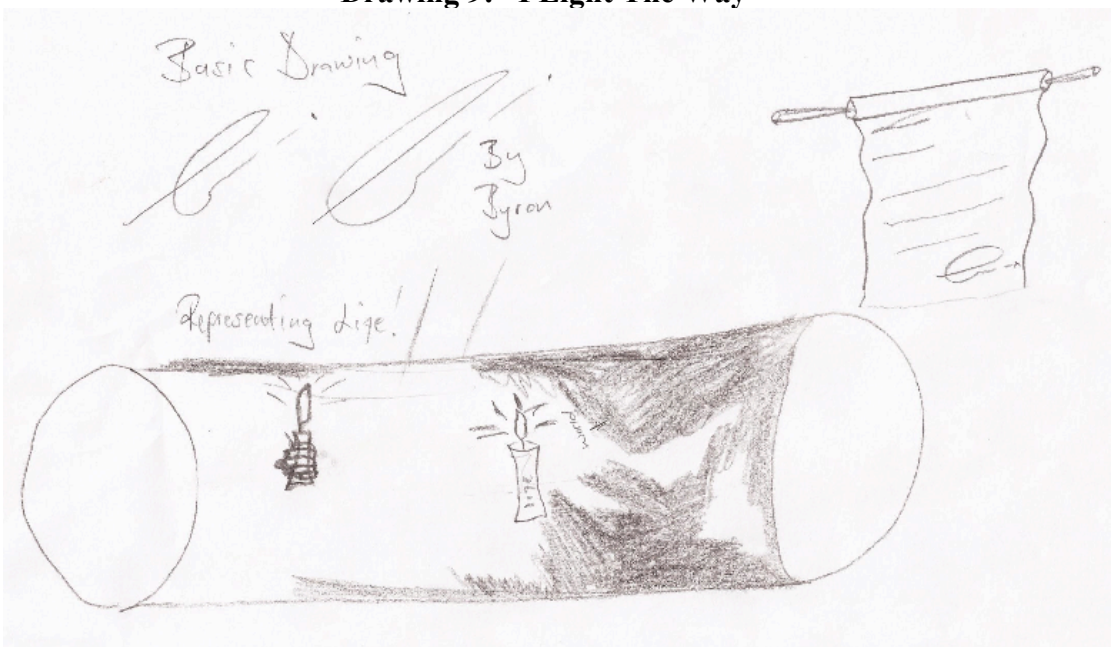
Discussion:

When I Grow-up:

The participation in this activity was uncommonly low. There were 22 participants that drew their future plans, but there was hardly any discussion around the drawings. There were 6 Zimbabwean boys that drew pictures of footballers, but during our group discussion they admitted they were unsure of what they wanted to be, but they knew that they wanted to go to university.

> "My picture represents my life. There was a lot of dark times and although my future is unsure… that is why I drew black… I carry the candle that will brighten my future. Only I can change my future and I know that once I finish school, I can be whatever I want to be."
>
> -17-year-old, Zimbabwean boy –

Drawing 9: "I Light The Way"



Most participants did not have a clear understanding of what they wanted to be, but more than half planned on attending university. A 17-year-old Zimbabwean participant said " I am not really concerned with my academic future at the moment. I need documentation. I turn 18 in two months and will no longer be allowed to live at Kids Haven and without documentation, where will I go? What will I be able to do?"

Most of the older participants (that were undocumented) were more concerned about turning 18 and not having legal status in South Africa.

Discussion Analysis:

As noted by Gonzales (2011) and Clacherty (2003 and 2006a) one sign of well-being is ambition and 'forward' thinking. Although in Gonzales' (2011) study he noted that undocumented minors face continuous problems and their transition into the 'adult world is hindered and altered as soon as they reach 18 and are no longer protected by child laws. In the discussions there was obvious tension in the older participants about reaching 18. At least four of the older participants were undocumented, and their main concern was legalising their stay in South Africa and not necessarily what they would do if they had proper documentation.

In general all drawings and writings were extremely descriptive, but the discussion was mostly dominated by the older boys. There was a noticeable discrepancy between the topics discussed and the themes they chose to sketch. This was particularly intriguing because the boys who spoke the most during the group discussion mentioned xenophobia, stealing, crime, and missing family. Surprisingly, the topics of their drawings were arbitrarily chosen topics (i.e., 'I want to be a football player') and did not coincide with their statements during the group discussion. Although they did not mind talking about sensitive issues, they did avoid drawing them, which suggests a reluctance for i) expression of their feelings/thoughts and ii) disclosure of personal information in a more identifiable way, in contradistinction to the impersonal group discussions.

In conclusion the psychosocial needs that were highlighted in this group discussion are presented on Table 8, below.

Table 8: What Are The Psychosocial Needs

Need	Being (qualities)	Having (things)	Doing (actions)	Interacting (settings)
Work	Professionals	Money and A Career	Becoming A Doctor, Nurse, Engineer	
Education	A Graduate	University Degree	Attending University	Wits University
Ambition	Empowered	Goals and Family	Opening A Nursing School	

Education is a psychosocial need that has presented itself throughout all four activities. This is significant because in the literature the other studies on UAMs highlight their need for safety and security (which is presented in this research as well), but only Clacherty (2003 and 2006) highlighted the importance of education as a pull factor serious enough to force UAMs to leave their countries of origin.

Through all five participatory activities there were nine psychosocial needs identified, these included: work, education, ambition, religious community, activities, fitting-in, family, security and documentation. There were also three ontological needs presented and they were: food, shelter and clothes. All of these themes presented above were consolidated into the table below. I used the following themes throughout my research to mark specific psychosocial needs of cross-border UAMs.

Table 9: Consolidation of Minors' Psychosocial Needs

Need	Being (qualities)	Having (things)	Doing (actions)	Interacting (settings)
Ontological		Food, Shelter, and Clothes	Sleep and Rest	Social Settings
Work	Professionals, Useful	Money and A Career, Responsibility and Colleagues	Becoming A Doctor, Nurse, Engineer, Helping Others	Mature Peers
Education	A Graduate	University Degree, Obtaining Skills, Community	Attending University, Attending School (until age 16)	Wits University, School Grounds
Ambition	Empowered	Goals and Family	Opening A Nursing School	
Religious Community	Empowered	Community and Comfort	Helping Others	Church or at Religious Meeting Places
Activities		Skills (Teamwork), Friends	Sports, Games and Playing	Ouside
Fitting-In	Accepted	Friends and Community	Playing and Having Friends	Peer Groups
Family	Identity	Security and Comfort, Language	Love and Affection	'Home'
Security	Refugee Status	Foster-Care Systems	Protected from deportation and prison	Anti-xenophobic Environment
Documentation	'Legal'	Shelter, Access to Services	Attending School	Social Status

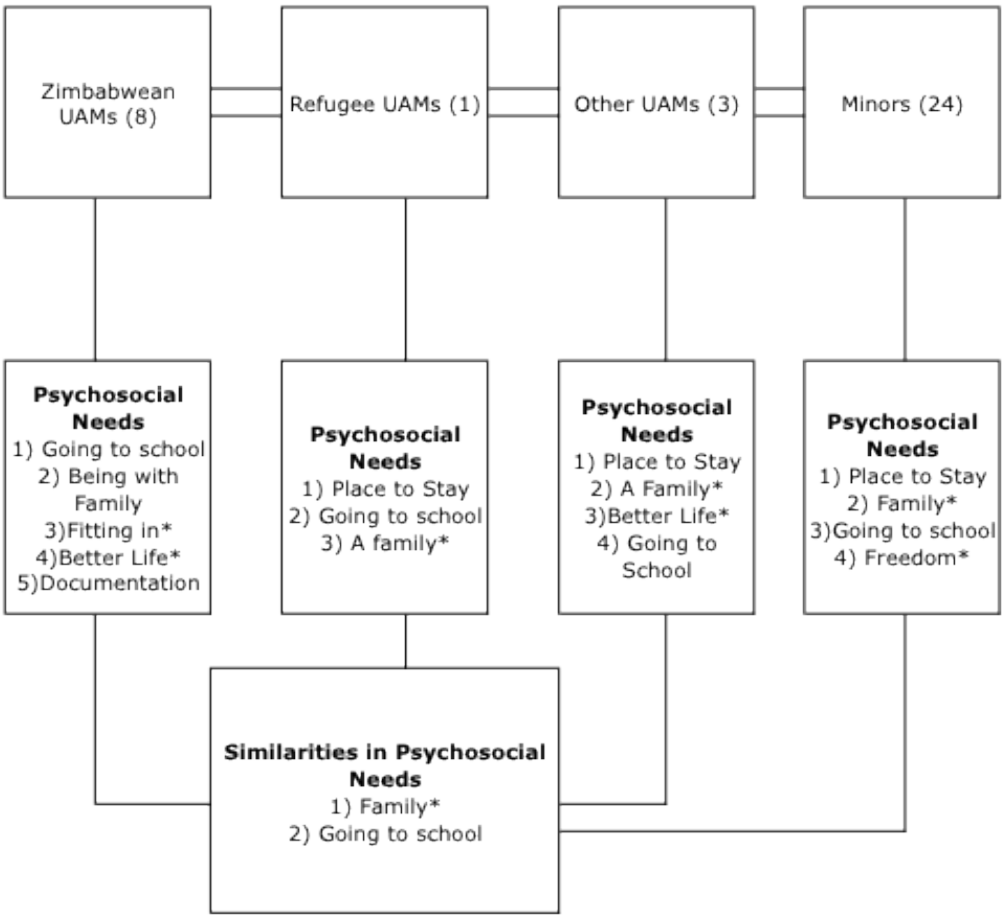
Together these psychosocial needs represent all of the themes presented by the minors (including both the cross-border UAMs and other minors). From these themes I was able to rank the importance of each theme through further discussion with the minors.

I then separated the minors into groups; Zimbabwean UAM, Refugee UAM, other UAM and minors and placed the themes in relevant categories.

Consolidation of Data:

Figure 1 (below) consolidated all the themes most commonly mentioned by the cross-border UAMs in our group discussion and in their drawings.

Figure1: Zim/RefUAMs/Other



Key
Fitting In: The Zimbabwean UAMs often mentioned that there were certain aspects of their day-to-day lives and appearance that were evident to others, marking them identifiable as foreign and/or shelter children.
A Family: All three groups of UAMs wanted some sort of family present. This could refer to other in the shelter, blood related family at a distance and/or social groups.
Better Life: The Zimbabwean and Other UAMs often described their movement to South Africa as an escape from poverty or violence/insecurity.
Freedom: The minors expressed a need of freedom from rules. They wanted to stay out later, have mobile phones, hang out with their friends and leave the shelter more often.

The figure represents key psychosocial themes that the cross-border UAMs brought forward throughout my research. In order to avoid overgeneralisations, I separated the UAMs into three groups, the Zimbabwean UAMs (8), Refugee UAMs (1) and Other cross-border UAMs (3). Although I recognise that these clusters could be further 'broken-down' for the purposes of this study, these three groups were sufficient. I ranked their needs by how many times the UAMs mentioned them. If 8 or more of the

UAMs discussed a theme, then it was reported in the chart as a psychosocial need. As noted from the table, most UAMs discussed the same themes and highlighted the same psychosocial needs, but when I asked which of the themes were paramount to them; the responses were the ones represented on the table. When dividing the UAMs into groups, two main psychosocial needs were presented: **Family** and **Going to School**.

6. 6 Service Provider Discussion

Data was collected from both the receiving end of the service (the cross-border UAMs) and the giving end of the service (service providers). Data from the service providers was compiled via semi-structured interviews and group discussions. The service providers were asked four questions, but encouraged to expand on any relevant issues and/or additional information they think is valuable in service provision. Service providers highlighted many challenges in working with cross-border UAMs, these include: ***placement, family, schooling and documentation***.

Altogether there were 11 service providers who participated in the semi-structured interviews. There were 6 service providers from governmental organisations, these are: ISS (Institute for Security Studies), DOE (Department of Education) and Child Welfare. Also, interviewed were 5 service providers from non-governmental organisations (NGOs) and non-profit organisations (NPOs) these included: CSVR (Centre for the Study of Violence and Reconciliation), Sophiatown, JRS (Jesuit Refugee Services) and RAO (Refugee Aid Organisation).

Table 10: Service Providers Who Participated

Who Participated Service Providers			
Organisation	**Description**	**Gov't/Non**	**Male/Female**
ISS	Legislative Body for Foreign Affairs	Gov't	Female
Child Welfare	Child Services (Social Workers)	Gov't	Female
Child Welfare	Child Services (Social Workers)	Gov't	Female
Child Welfare	Child Services (Social Workers)	Gov't	Female
CSVR	Trauma Counselling	Non Gov't	Female
Sophiatown	Psychological Services	Non Gov't	Female
Sophiatown	Psychological Services	Non Gov't	Female
JRS	Refugee Services	Non Gov't	Male
RAO	Refugee Services	Non Gov't	Female
DOE	Department of Education	Gov't	Female
DOE	Department of Education	Gov't	Female

To begin the analysis I will be summarising the interviews by the questions individually. The question were:

1) What are the primary services given (by your respected organisation) to unaccompanied minors? 2) What do you think are the greatest psychosocial needs of an unaccompanied minor? 3) Have you received training specifically pertaining to the care of unaccompanied minors? 4) How do you think service providers could improve the already existing services, and what would you change or add?

There is an interesting discrepancy between responses provided by governmental organisations on the one hand and NGOs and NPOs on the other. The former gave a unanimous responseNo special services are given, the law (this refers to the Children's Act (2008)) recognises 'all children' in need of protection and care'.

The NGOs and NPOs, however, described a multitude of services specifically designed for UAMs. CSVR and Sophiatown offer counselling services, but hold specific sessions for UAMs as well as other groups of minors since they noted (as Crawley (2011) and Mahati (2009) also point out) that UAMs are a specific group of minors that require attention to their specific needs. As seen in Clacherty (2006a), the UAMs previously interviewed did not find counselling particularly helpful because it was not addressing areas pertaining to their situation. Sophiatown and CSVR have developed programmes from years of experience working with UAMs. JRS attends to the educational needs of UAMs and supports them by referral to appropriate Service providers such as DSD (Department of Social Development) and/or counselling

centres to meet their psychological and safety needs. RAO supports UAMs' social needs by providing foster grants to asylum seeking care-givers and or the UAMs themselves to keep them out of institutions (unless necessary) and promote cultural ties.

ISS and Child Welfare answered the question to what the psychosocial needs of UAMs are by addressing the Children's Act (2008). Both noted that under the law, minors' psychosocial needs include basic needs being met, school, and family reunification (if possible). The interviewee from ISS added that if a minor enters into South Africa in search of assistance, they will subject to the laws of South Africa, independently of the assistance desired is (e.g. asylum or livelihood opportunities). And as service providers must follow the law so to do the minors entering into the country.

JRS and the DOE highlight the importance of education and helping UAMs and other cross-border minors to attend school. Timngum (2002) suggested that an essential factor of successfully merging with the South African society is attending school and learning English. Førde (2007) and Kia-Keating et al. (2007) note that school is a primary yet invaluable need of cross-border UAMs in their acclimation to a new society.

Sophiatown, CSVR and RAO reported that the psychosocial needs of each UAM are subjective. Each UAM carries different experiences, and most importantly, becomes a UAM at a different age. The list of reported psychosocial needs include: caregiver (discussed further in the latter part of this analysis), shelter, identity, psychological assistance (this can be as straightforward as having someone to talk to), community, religion (if the UAM is religious), independence, and empowerment. These themes support Clacherty's (2006a) findings and align with research conducted by Raghallaigh and Gilligan (2010) and Wessells and Monteiro (2004a and 2004b).

When the representatives from the organisations stated that training was either not available or practical. ISS, DOE, Sophiatown and RAO attend the monthly UAM Forum held by the DSD. At this forum service providers discuss problematic cases and possible solutions. The interviewee from JRS stated that he has received various

training in dealing with cross-border UAMs, but his education is directed in Social Work and therefore he follows the procedures proscribed by the Children's Act (2008). The interviewees from Child Welfare said that they have not had any specific training in dealing with UAMs, but they learn through experience and other organisations who work directly with the cross-border UAMs. CSVR, RAO and Sophiatown all reported that learning through experience is the only sure way to help the group you are working with.

As for the last question and discussion about suggestions for improavements in the care of UAMs, all organisations interviewed recognised that there are laws, legislation and policy in place to aid cross-border UAMs as well as procedural notes clarifying problematic areas. However, all organisations, with the exception of the ISS noted that the laws, legislation and policy are not functional (in certain aspects such as; documentation, placement and family tracing), especially when dealing with cross-border UAMs. Palmary (2009) and Eisenbruch (1988) note that there is a constant gap that exists between policy and practice especially in conduct with foreign populations (Engebrigtsen, 2003). Sophiatown noted that there was a lack in harmonisation in legislation, which is why policy does not always function properly. The most interesting part of the discussion was that although all the participants (with exception to ISS) highlighted the policy vs. practice gap, they all suggested strengthening of the laws for better assistance to cross-border UAMs.

Semi-structured Interview Analysis:

The Children's Act (2008) states that any person under the age of 18 is in need of protection and care. However, minors have the right to work at the age of 16 and school is not compulsory after the age of 16, therefore if a South African wanted to work instead of study at the age of 16 it would be permissible. Mahati (2009) writes that due to a lack of livelihood opportunities in their countries of origin and/or failure to rejoin the schooling system cross-border UAMs are forced to work to survive. He also notes that most UAMs are not children and do not want to live in shelters or with foster families because they feel secure and more protected in their chosen groups. Crawley (2011) supports the independence of UAMs because, as suggested by Boyden (2003) and Duncan (2009), it builds resiliency and enhances their protection

mechanisms (Apfel and Simon, 1996). When dealing with cross-border UAMs, there is not an 'inbetween' state, minors are either accepted into the system and treated as a child or left to survive on their own. Sophiatown and CSVR highlighted that the Children's Act (2008) is a sound legislation, and commitment by the state, but there is no legislation to deal with the psychosocial needs of these individuals hindering cross-border UAMs' well-being. As mentioned in the literature review, the policy makers' and states' conceptualisation of 'child' seriously undermines the protection of those who are deemed part of this group by service providers (Bhabha, 2008; Crawley, 2011; Springfield, 1999 and 2001). Kohli et al. (2003) adds that the 'minor' is often undermined in psychosocial programmes because of social constructs that define them as minors incapable of participation in 'adult' activities.

An emphasised theme that is not presented in the literature is the debate surrounding **places of safety, foster care and shelters** basically because the literature presented focuses on cross-border UAMs in camp settings. Sophiatown expressed that the well-being of some UAMs is to stay with members of the community rather than in foster care. The Children's Act (2008) states that a child has the right to a say in their placement and conditions in which they live, as does the CRC. However, the interviewee from ISS pointed out that the law does not permit asylum seekers to become foster parents because their stay in South Africa is not assured. If they were forced to leave the country, the child could experience separation trauma. The law does permit refugees and residents to foster UAMs. Although the law promotes foreign residents becoming foster parents, CSVR, Sophiatown and RAO expressed difficulty in finding refugees and/or permanent residents that could foster UAMs because they were being blocked from accessing SASSA grants. CSVR, Sophiatown, Child Welfare and RAO have noticed that this discrepancy between policy and practice has a considerable impact on cross-border UAMs psychosocial well-being.

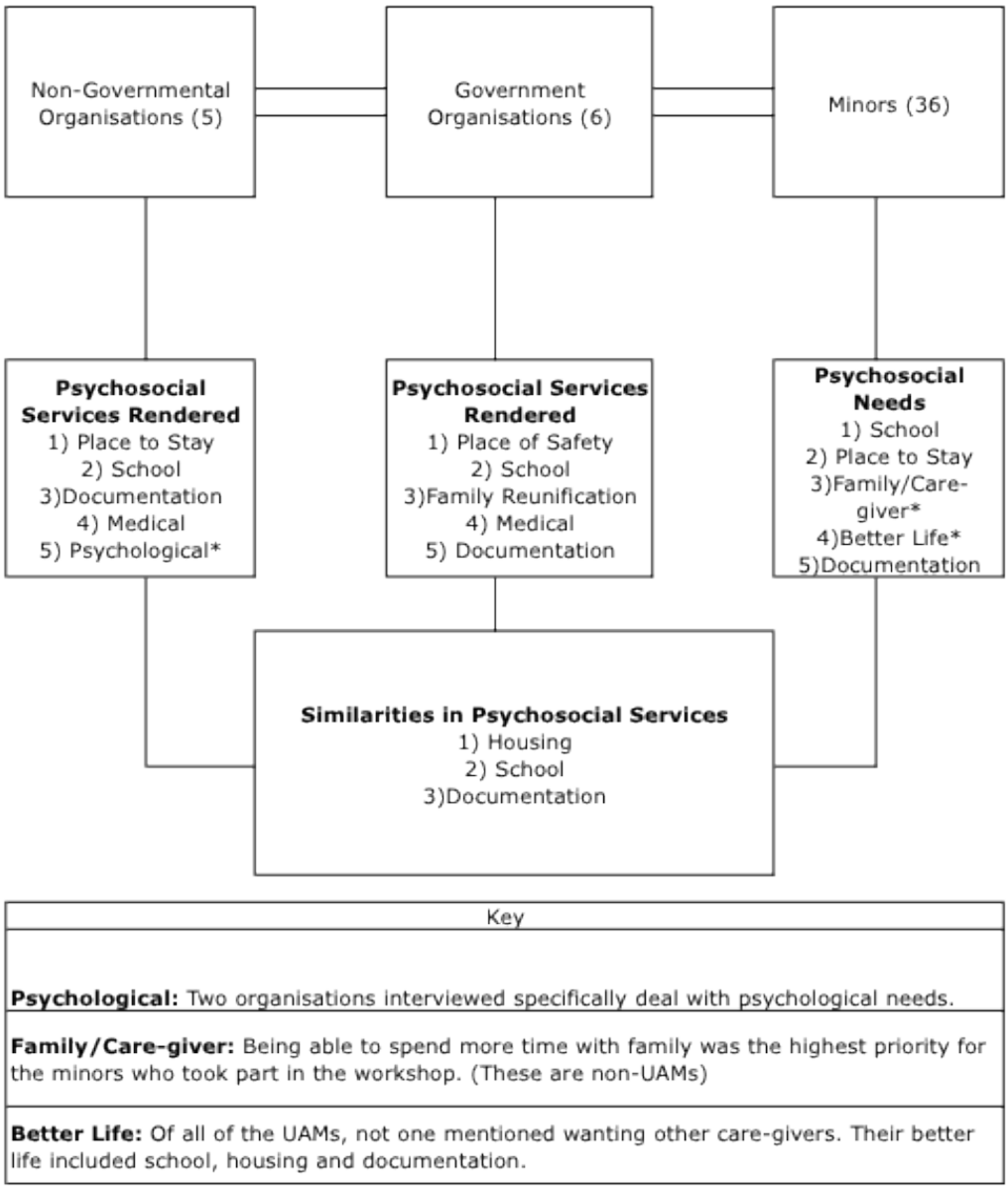
Documentation is another serious issue that has been debated and a cause for concern, not just amongst cross-border migrants but also South Africans. Service providers have struggled with documenting cross-border UAMs more than South African nationals according to Child Welfare, ISS, JRS and RAO. This is mainly attributed to the different laws and policies followed by various departments. In the Children's Act (2008) it states that all minors have the right to be documented and

should be documented however, it does not describe the necessary procedure for documenting them. The Department of Home Affairs (DHA) has different legislation that does not allow UAMs to be documented unless they are claiming asylum[15] (Engebrigtsen, 2003). It is procedural gaps like this that makes cross-border UAMs a challenging group to work with and assist.

Child-Headed Households was a theme that Sophiatown felt was critical to discuss during the interviews. The Children's Act (2008) promotes family reunification and/or preservation, which allows for child-headed households. Sophiatown notes that although scholars such as Bernard (1993) and Lustig et al., (2003) recommend family unity for the benefit of the UAMs, child-headed households cannot work because of the amount of stress, financial burden and security issues. Both governmental and non-governmental organisations have tried to incorporate child friendly practices, although in most of the interviews it was mentioned that policy such as the Children's Act is not necessarily 'child' and 'family' friendly.

[15] DHA was contacted to comment on the information presented by the service providers, but I received no response from any representative. There was an UAM meeting held in September 2011, where DHA presented new legislation claiming the new legislation would close the gap preventing minors from being documented. However, since the two-day conference there has been no further communication from DHA.

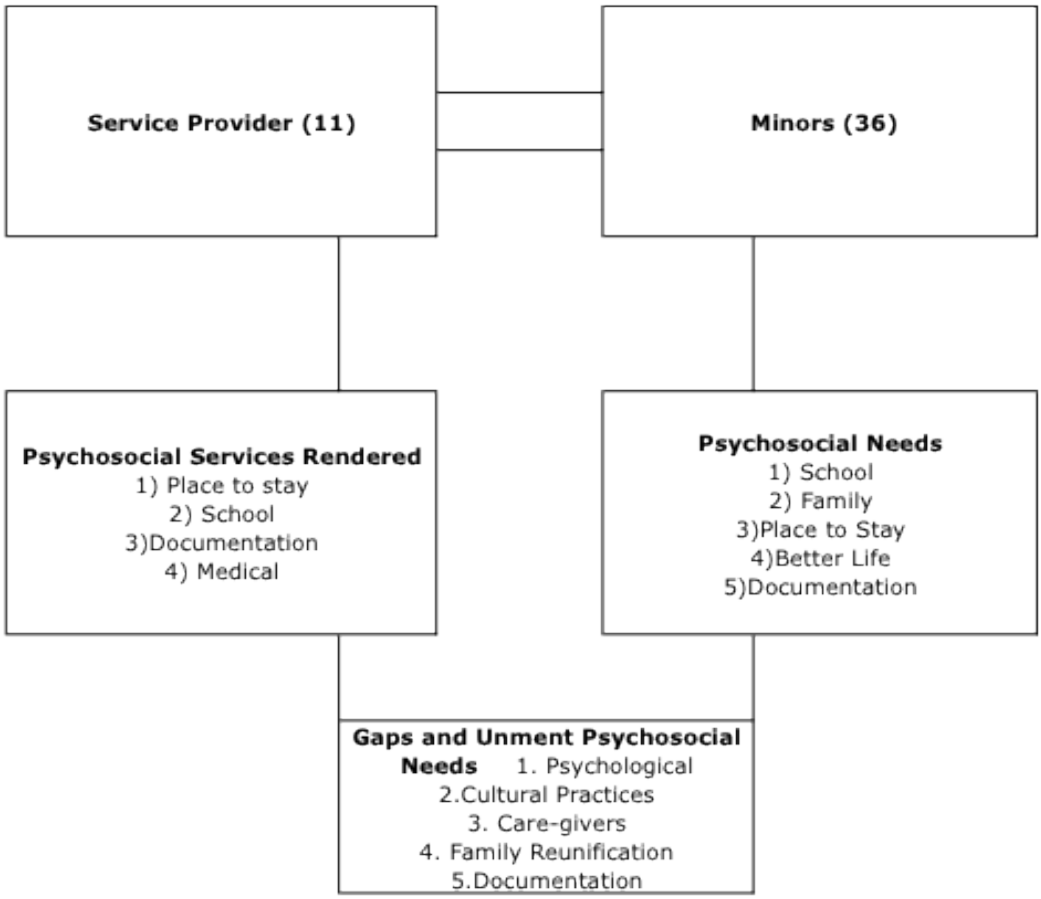
Figure2: NGO/Gov't/UAMs



The above figure represents the three different measures of psychosocial need of cross-border UAMs. The three centralised at the bottom represent common psychosocial needs that all sectors find fundamentally crucial. The final table highlights the major gaps in the perception of psychosocial needs between service providers and UAMs.

This Figure 3 (below) represents the overall gaps in meeting the psychosocial needs of cross-border UAMs. This is a more general evaluation of the psychosocial needs of cross-border UAMs and service providers response because this diagram does not separate the UAMs nor does it divide NGO and governmental organisations.

Figure 3: The Gap



As seen in the figure above, the psychosocial needs of cross-border minors reflects the service providers services to a certain extent. However, when combining the service provider assistance and all the cross-border migrant minors' psychosocial needs there becomes a gaps in catering to the psychosocial needs of UAMs. There are still fundamental psychosocial needs that are overlooked by service providers because of their system of ranking 'needs' of minors. For example, medical is one of the essential 'needs' of service providers, this stems from a number of reasons one of the most common being shelters, places of safety and foster care will not accept minors that do not have medical clearance. However, documentation, education and shelter are far more pertinent to the minor participants than medical assistance.

In conclusion, this chapter has presented the main psychosocial needs of cross-border UAMs and cross-border minors. The final figure represents the gaps that still persist between the actual needs of cross-border minors and the services rendered by the service providers.

7 Limitations

In this section I look into the limitations of working with minors as well as other issues that had risen during my research. I would like to highlight is that the researcher had less than a year to perform a proper analysis of the psychosocial needs of cross-border UAMs. In addition, given the nature of fieldwork with minors, one cannot predict their motivations or behaviours towards the interviewer. It may be possible that the behaviour is altered in the presence of the researcher, or that the researcher may not fully understand the child/rens' situation.

As stated in previous parts of this thesis, if anything were to happen to the minors, this study would cease immediately, and assistance would be assured. If the minors were unwilling to participate or their care-giver removes the child from the interview, there could be a lack of information to fully answer the main question.

However, even with all these limitations this research has the potential to make valuable contributions to the literature. The data gathered in this study can be used in a broader study focusing on other South African cities and urban areas. This project seeks to generate discussion on approaches to treatment cross-border UAMs in order to improve their well-being and behaviour.

7.1 Working with RAO

My work at Refugee Aid Organisation (RAO) as the UAM and vulnerable youth worker is what sparked my interest in focusing on UAM and their living conditions in Johannesburg. RAO works with multiple organisations, both governmental and non-governmental in Johannesburg in order to meet the needs of UAMs, refugee and asylum seeking children. There is a monthly forum on UAMs, which was created because to the Central Methodist Church (CMC)[16] crisis and closing for children, which allows service providers to speak to governmental department about problems being experienced by the service provider, but also bring forward problems

[16] The CMC housed hundreds of cross-border migrants (both minors and adults), mainly from Zimbabwe. The CMC was closed to all minors due to its deplorable living conditions. However, the CMC is not closely monitored and cross-border migrants are still residing there.

highlighted by the UAMs.

The limitation created by my work with RAO was that of information sharing and limitation in my participant pool. My working hours were also a considerable restraint on my time and ability to travel. RAO assists UAMs financially so they can support themselves. RAO also is the only refugee organisation in Pretoria and Johannesburg that handles and has a well-founded knowledge of UAMs and refugee children and therefore, partner organisations including DSD (Department of Social Development) often refer cross-border UAMs to RAO for assistance. Because RAO provides financial, food and other forms of living assistance to refugee UAMs, there were 8 cross-border UAMs that were not asked to participate in this study. Therefore, I only researched the cross-border minors at Kids Haven. I felt that it would not clear through the ethics committee as I am responsible for these minors and RAO houses, feeds and clothes them. They also do not have social workers or care-givers to watch over their best interest, which was another concern.

The limitation in accessing information was the hardest obstacle. I had never personally met before the cross-border UAMs that participated in the workshop (with the exception of one), but I knew their names and stories on paper. As stated previously, I work closely with other non-profit organisations, I represent RAO at the Child Advocacy Forum and the UAMs forum. Many of the cross-border minors at Kids Haven had been presented to these forums and therefore, I knew information about these minors before I started the workshops. However, I would like to clarify, I did not know where these minors were placed nor did I know they were going to take part in the UAMs Workshops. I consider this a limitation because although I knew the stories of a majority of the UAMs' that took part in the workshop, I could only use the information they provided in their drawings and discussions.

7.2 Who Participates?

There are always discussions around reaching the 'unreachable' groups, but this clearly defies the definition of 'unreachable'. I found that the 36 cross-border 'UAMs' that volunteered to participate in this study, had already participated in similar

workshops with Sophiatown (in play therapy, group therapy and counselling sessions) and/or with Glynis Clacherty (with the exception of three UAM new-comers).

The participants were ideal for the study, however, their activities in similar projects posed a limitation because they had prior knowledge to what I was 'looking for' and for the most part, knew the questions I was going to ask. When I attempted to explain the activity, with the exception of the three new-comers previously mentioned, all the participants knew the activities without explanation. Two of the participants, even approached me after the workshops to show me additional methods of mind-maps that they found most effective for them, when trying to analyse their future.

The UAMs who were unable to participate were those who had not been studied, and I felt that this was mostly because these UAMs did not have care-givers or social workers who could oversee the research and look-out for the best interest of the minor. Also, most are undocumented so combining these two factors it becomes difficult to interview UAMs other than those who are in a stable environment and formally placed.

7.3 Who is an UAM?

For the purposes of this research an UAM is a person who has not reached the age of 18, who is without any legal guardian, care-giver, or person over the age of 18. This can be a child separated, abandoned, orphaned or run-away (UNHCR, 1996). However, it was challenging to find UAMs who met this definition. All 36 cross-border minors that participated in the first two UAM workshops were considered UAMs; however most had parents and/or relatives living close by that could not care for them. Taking this into consideration Kids Haven considered an UAM minor to be any person under the age of 18 is not living with their family. Finding cross-border UAMs was extremely difficult because of the number of definitions of UAM there are. However, I used the UNHCR (1996) definition throughout the study in order to have a 'clear-cut' group of participants. In fact my research has concluded that the definition of UAM should be challenged and adapted to appropriate categories of UAMs.

7.4 Working with Minors

Working with minors was challenging because of the ethical consideration and protection of the minor, before, after and during the research. Although, ethics play a paramount role in any research no matter the group, minors tend to have more policy in place to protect them. For example all minors/children in South Africa are protected by The Children's Act (2008), which proved to be a serious restraint for my research. I received ethics approval from Wits, and I wrote the research and ethics department of DSD and DHSD in Johannesburg, but I never received a response and therefore did not have clearance to interview a potentially new pool of UAMs.

7.5 Limited Time Frame

Time constraints were a serious issue throughout my research. Working with UAMs was difficult. I have known the RAO UAMs for nearly a year, and only recently (three or four months ago) have they opened up to me and come to me with their problems or talked to me because they were bored. The cross-border UAMs that I worked with opened up with me, but to what extent? I know that their stories, ideas, dreams, needs and desires were told to me, but only to a limited extent. With the time frame given there was only a limited time to see the actual psychosocial needs of UAMs. There was a lack of time to discover why the UAMs felt they needed these things or to produce more in-depth answers to my questions.

7.6 Limitation of Language and Translation

Visual research methods were used with the UAMs in order to overcome the language barriers that were present. The UAMs discussed their drawings and stories to the best of their ability, but drawings themselves complemented and enhanced their descriptions and clarified their stories.

7.7 Truthfulness

Working with minors is challenging and under pressure (even if it is unknown to the researcher) answers given by the participants may not be truthful or accurate. Lying is part of a street childs' or UAMs' behaviour (Young and Barrett, 2000; Summerfield, 2001; Le Roux and Smith, 1998). It has become part of these two groups' culture and is used as a survival strategy (ibid). In an interview with Child Welfare Johannesburg North, it was made clear that UAMs who were sent by their parent to South Africa to capitalise on school and care, run-aways and abused minors lied to protect their identity in fear of being returned. The social worker also noted that within a few days of arrival newcomers learn how to respond to intake workers and what to say to be placed in the state's care (Young and Barrett, 2001).

8 Conclusion

Conclusively, it was through participatory research I was able to access a 'hard-to-reach' and marginalised group which allowed me greater insight into difficult topics like the psychosocial needs of UAMs. The participants were able to contribute to the research in the manner that they felt most comfortable with, this included the sharing of feelings and stories by drawing, writing or discussions.

In answering the research question what are the psychosocial needs of UAMs in Johannesburg I also addressed my objectives. To conclude, the key findings of this research, I have shown that the psychosocial needs of cross-border UAMs are vast and varied, as shown in the tables in previous sections. However, it can also be concluded that there are certain underlining psychosocial needs such as school are not specific to cross-border UAMs, but to all minors. There is a host of psychosocial needs of cross-border UAMs in Johannesburg. The main psychosocial needs that were most highlighted throughout this research were: **family, care-givers, documentation, schooling, better life, food, housing, counselling, playing and fitting-in with their South African counterparts**.

While answering my research question I was able to address my objectives i) to analyse how cross-border UAMs challenge existing psychosocial programmes, ii) to ascertain the roles of the state, service providers and community in meeting those needs, iii) to determine how cross-border UAMs deal with unmet psychosocial needs and iv) to challenge socially constructed notions of childhood in this study. Cross-border UAMs are able to challenge existing psychosocial programmes because, as uncovered in this research and raised in other research such as Mahati (2009) and Clacherty (2003, 2006a and 2006b), UAMs are not a homogenous group of minors. Each UAM has a category (such as refugee, livelihood seeking, abandoned, run-away, etc.), and although there are certain psychosocial needs that remain relevant to all UAMs (besides the ontological needs) such as family and education, issues such as safety, fitting-in and documentation are more crucial to particular groups of UAMs. Service providers tend to overlook these differences which leaves the UAMs with unmet psychosocial needs.

The second objective was to define the role of the service providers in meeting the psychosocial needs of cross-border UAMs. Governmental agencies like Child Welfare and ISS use legal tools such as the Children's Act (2008) to assist cross-border UAMs, whereas NGOs and NPOs create their own psychosocial programmes to assist these minors. However, whichever system was used, there always seem to be remaining gaps in implementation. These gaps derive from a number of issues mainly because all 'children' are different and each has their own story and own need. These organisations have tried to adopt child friendly practices, but there is a need to develop practices which cater to minors at their different stages of development. As mentioned throughout the text, psychosocial needs such as school and work have a valuable effect on cross-border UAMs for integration, emotional well-being and identity development (Gonzales, 2011). By adopting practices that are "minor friendly" it would not only assist cross-border UAMs in meeting their psychosocial needs but other minor groups as well. Through the semi-structured interviews, I noted that the roles of governmental departments are both significant (legislatively) and insignificant in meeting the needs of cross-border UAMs. Legislatively, the cross-border UAMs cannot obtain documentation, go to school or find shelter without the legal assistance of the Children's Act (2008) and South African Constitution (1996). Governmental departments, due to the lack of implementation of legislation, have been rendered insufficient by the cross-border UAM leaving them to find means of support elsewhere. Cross-border UAMs tended to rely on NGOs and NPOs to meet their psychosocial needs. However, this is not withstanding the psychosocial needs of the UAM that cannot be met by outside sources. Psychosocial needs such as 'family' and 'care-givers' can superficially be appointed (i.e. foster care and adoption) by governmental agencies, but as Summerfield (2000 and 2001) and Boyden (2003) highlight, it is the minor that must bond and connect with their 'chosen' care-giver. As seen in Mahati (2009) family is a relative term, the cross-border minors in his study chose their 'family' as means of security (protection) and support, yet there was no link to these groups prior to their journey. NGOs and NPOs play a significant role in the psychosocial well-being of cross-border UAMs. This was found to be because of their flexible infrastructure that can accommodate personalisation and prompt redesigning of programmes offered, in contradiction to the recalcitrant governmental infrastructure.

The third objective was determining how cross-border UAMs deal with unmet psychosocial needs. There were several psychosocial needs that were still being unmet by service providers and the cross-border UAMs these were: psychological, cultural practices, care-givers, family reunification and documentation (as presented in Figure 3). These psychosocial needs are unmet, and there was no conclusion as to how cross-border UAMs deal with these unfulfilled psychosocial needs, mainly because these needs must be fulfilled by external sources. For example, documentation can only be acquired through DHA and if DHA is blocking the documentation of minors (without being accompanied by a parent), then it is not possible to meet this psychosocial need. As mentioned previously in Gonzales (2011) the psychosocial effects of 'being' undocumented is detrimental to cross-border migrant minors in a social, economic and legal capacity. However, the cross-border UAMs were able to meet certain unmet psychosocial needs on their own such as their ontological needs and community needs. For example, the 17-year-old Zimbabwean girl (***"I can't go to school, so I help"***) was able to find stable income, shelter, protection and family through her religious community (Raghallaigh and Gilligan, 2010). In conclusion, the unmet needs of cross-border UAMs is dependent on service provider to a certain degree, but also on the minors' ability to adapt to his/her surroundings, neither are mutually exclusive.

The final objective was to challenge socially constructed notions of 'childhood'. In addressing this objective, I also had to challenge the term 'child' as referring to a minor. As mentioned in the literature review 'childhood' is relative to each person, but it has been acknowledged that there are transitions into each life-stage (Erikson, 1950; Arnett, 2000). The process of transition from childhood (3–12 years of age) to adolescence (12–17) is casual and long-term (Arnett, 2000; Erikson, 1950; Rumbaut, 2005). Although law, policy and social construction often view minors as children, their 'childhood' life-stage may have passed (Campbell, 1992). Viewing all minors as children in practice seriously undermines the well-being of the minor (as seen in Mahati, 2009). The South African legislation that specifically deals with minors is known as the Children's Act (2008), and a child is defined as a person under the age of 18 years of age. The definition in the Children's Act (2008) does not cater or recognise to the life-stages and transition periods of minors nor the manufactured sub-

stages such as the discovery stage (ages 16-18). Using the life-stage definitions of Erikson (1950) and Arnett (2000) 'childhood' ends at the age of 12, when a person stops being a child and becomes an adolescent (aged 12-18 years) minor. As presented in the literature review and data analysis, Gonzales (2011) highlights the importance of the 'discovery' life-stage (aged 16-18 years). This is when a minor begins to build their social capital and actually makes the transition towards adulthood. Currently, the legislation involved in aiding cross-border UAMs and minors as well as internal UAMs and minors does not observe these different, but significantly distinguished life-stages, which is one of the biggest drawbacks to providing social services to these particular groups.

Currently, South Africa is under a change in legislation. DHA is planning to move all Refugee Reception Offices (RRO) to border posts along South Africa. This could have a detrimental affect on cross-border UAMs. Working at RAO and with international and government agencies, I have noticed an increase in asylum seeking UAMs that are being sent to Lindela detention centre for deportation. If the RROs are moved to the border posts, I fear that asylum seeking UAMs will not be permitted into the country and will be sent away, putting their lives at greater risk to harm. Negative changes to the law, such as this one, will only hinder cross-border UAMs from meeting their psychosocial needs, not to mention their basic human rights, such as that to safety and security.

The overall outcome of this research indicates that governmental departments, NGOs and NPOs have the tools necessary to cater to the psychosocial needs of cross-border UAMs, such as school and family reunification. However, implementation and social constructs prevent these agencies from utilising the tools available. Certain psychosocial needs, such as fitting-in, cannot be met by laws or new policy, which highlights the fact that the cross-border UAMs must rely on internal sources to meet specific needs. In these cases UAMs resort to catering to their own needs relying on service providers for emotional support and/or basic (ontological) needs. As cross-border migration increases in Johannesburg and into urban areas, there is a need to update and produce policy that reflects the population. With the growth of livelihood-seeking cross-border UAMs and minors, there is a profound need to produce further research on these groups and adapt public policy to each individual group and not

continue to over-generalise (catering to UAMs as if they were a homogenous group). By adapting legislation and policy to these specific groups - and with proper implementation - there is a better chance for service providers to meet certain psychosocial needs of cross-border UAMs.

References

Abrego, Leisy J. 2008. "Legitimacy, Social Identity, and the Mobilization of Law: The Effects of Assembly Bill 540 on Undocumented Students in California." *Law & Social Inquiry* 33:709–34.

Adato, Michelle, Michael Carter and Julian May. (2006). "Exploring poverty traps and social exclusion in South Africa using qualitative and quantitative data." *Journal of Developmental Studies* 42.2: 226–247.

Ahearn, Frederick. (2005). *Psychosocial Wellness of Refugees*. Oxford: University of Oxford.

Amit, Roni. (2010). "Lost in the Vortex: Irregularities in the Detention and Deportation of Non-Nationals in South Africa". FMSP Research Report. 1–76.

Apfel, Roberta and Bennett Simon. (1996). "Psychosocial Interventions for Children of War: The Value of a Model of Resiliency". *Medicine and Global Survival 3*.

Arafat, Cairo. (2003). *A Psychosocial Assessment of Palestinian Children*. USAID Save the Children.

Arnett, Jeffrey J. 2000. "Emerging Adulthood: A Theory of Development from Late Teens through the Twenties." *American Psychologist* 55:469–80.

Arntson, Laura and Christine Knudsen. (2004). *Psychosocial: Care & Protection of Children in Emergencies*. Save the Children Federation.

Babbie, Earl. (2011). "The Basics of Social Science Research". Fifth Edition. Wadsworth, Cengage Learning. Belmont, California.

Banks, Marcus. (1995). Visual Research Methods. *Social Research Updates*. Sociology at Surrey. University of Surrey.

Bean, Tammy. (2006). "Assessing the Psychological Distress and Mental Healthcare Needs of Unaccompanied Refugee Minors in the Netherlands". PhD Dissertation: Leiden University, Leiden.

Bernard, B. (1993). "Fostering Resiliency in Kids." Educational Leadership. Vol.2, 1993.

Bhabha, Jacqueline. (2008). "Independent Children, Inconsistent Adults: Child Migration and the Legal Framework". UNICEF Innocent Discussion Papers. www.unicef-irc.org/publications/503/.

Black, Aretha. (2008). "One Million Kids on a Couch? Approaches to Psychosocial Rehabilitation in Post-Conflict Situations". Baccalaureate dissertation: Dalhousie University, Halifax, Nova Scotia.

Blaikie, Norman. (2010). "Designing Social Research". Third Edition: 179–181. Polity Press. Cambridge, United Kingdom.

Boyden, Jo. (2003). "Children under Fire: Challenging Assumptions about Children's Resilience." *Children, Youth and Environments* 13.

Campbell, Tom. (1992). *The Rights of the minor: As a person, as child, as juvenile, as future adult*. Oxford University Press.

Campbell, Elizabeth. (2006). "Urban Refugees in Nairobi: Problems of Protection, Mechanisms of Survival, and Possibilities for Integration." *Journal of Refugee Studies* 19 (3): 396–413.

Chatty, Dawn, Gina Crivello and Gillian Lewando Hundt. (2005). "Theoretical and Methodological Challenges of Studying Refugee Children in the Middle East and North Africa: Young Palestinian, Afghan and Sahrawi Refugees". *Journal of Refugee Studies* 18 (4): 388–409.

Children's Act, (2008). *Government Gazette* 2008, No. 38 of 2005.
Chimedza, Nely. (2005). "The Psychosocial Challenges Facing Unaccompanied Refugee Children in Urban Zimbabwe". MA Thesis: University of Witwatersrand, Johannesburg.
Christoffersen, Mari. (2007). "But if you tell somebody, the hurt disappears: A qualitative study of how unaccompanied refugee minors cope with their problems during adaptation in Norway". MA Thesis: University of Oslo, Oslo, Norway.
Clacherty, Glynis. (2003). "Poverty Made Me Do This: Children in Musina, their experiences and needs". Save the Children UK, unpublished report.
Clacherty, Glynis. (2006a). "The World in a Suitcase: psychosocial support using artwork with refugee children in South Africa". In Giacomo Rambaldi, Jon Corbett, Michael K. McCall, Rachel Olson, Julius Muchemi, Peter A. Kwaku Kyem, Daniel Wiener and Robert Chambers (eds.*), Participatory Learning and Action* 54. South Africa: IIED and the Technical Centre for Agricultural and Rural Cooperation ACP-EU (CTA).
Clacherty, Glynis. (2006b). *The Suitcase Stories. Refugee children reclaim their identities*. Cape Town: Double Storey.
Clacherty, Glynis and David Donald. (2007). "Child participation in research: reflections on ethical challenges in the southern African context". *African Journal of AIDS Research* 6: 147–156.
Coordinating Body of Refugee Communities. (2007). "Deeping Youth Participation in Development through Dialogue." Johannesburg.
Consortium for Refugees and Migrants in South Africa (CoRMSA). (2010). Submission to the Portfolio Committee on Home Affairs on the Immigration Amendment Bill 32.
Convention on the Rights of the Child. (1989). United Nations General Assembly. Geneva.
Crano, W. and M. Brewer. (2009). "Principles and Methods in Social Research". Second Edition. Berkley, California.
Crawley, H. (2011). "Asexual, Apolitical Beings': The Interpretation of Children's Identities and Experiences in the UK Asylum System". *Journal of Ethnic and Migration Studies* 37.8: 1171–1184.
Crush, Jonathan. (2001). "The Dark Side of Democracy: Migration, Xenophobia and Human Rights in South Africa". In IOM, The Human Rights of Migrants. 103–131.
Crush, Jonathan. (2005). "Johannesburg, South Africa. Breaking with Isolation". In M. Balbo (Ed.), *International Migrants and the City*. Venice: UN-HABITAT and dipartmento di Pianifacizone.
Crush, Jonathan and Dodson, Belinda. (2007). Another Lost Decade: The Failures of South Africa's Post-apartheid Migration Policy. Tijdschrift Voor Economische En Sociale Geografie, 98(4): 436–454.
Davis, Linda. (2003). "The prevention and control of youth misbehaviour in South Africa". In Christiaan Bezuidenhout and Sandra Jeroma Joubert (eds.), *Child and youth misbehaviour in South Africa: A holistic view.* Hatfield, Pretoria: Van Schaik Publishers, 23–50.
Department of Home Affairs (2011). "2010-2011 Annual Report on Asylum Statistics". Department of Home Affairs, Pretoria.
Derluyn, Ilse, Eric Broekaert. (2008). "Unaccompanied refugee children and adolescents: The glaring contrast between a legal and a psychological

perspective". *International Journal of Law and Psychiatry* 31: 319–330.
Duncan, Yvonne. (2009). "In South Africa, few comforts await children fleeing Zimbabwe". UNICEF. http://www.unicef.org/emerg/southafrica_48340.html.
Eisenbruch, Maurice. (1988). "Mental Health of Refugee Children and Their Cultural Development. *International Migration Review* 22(2): 282–300.
Elder, Glen H., Jr. (1987). "War Mobilization and the Life Course: A Cohort of World War II Veterans." *Sociological Forum* 2:449–72.
Ellis, Carolyn S. and Arthur Bochner. (2001). "Autoethnography, Personal Narrative, Reflexivity: Researcher as Subject". In Norman Denzin and Yvonna Lincoln (eds.) *The Handbook of Qualitative Research*, 733–768. Sage.
Engebrigtsen, Ada. (2003). "The Child's – or the state's – best interests? An examination of the ways immigration officials work with unaccompanied asylum seeking minors in Norway". *Child and Family Social Work* 8: 191–200.
Erikson, Erik. (1950). *Childhood and Society*. New York: Norton.
Eshia, Owusuaa. (2010). "Streetism: The Lived Experiences of Unaccompanied Migrant Children and their Right". MA Thesis: Norwegian University of Science and Technology, Trondheim, Norway.
Eyber, Carola (2004). "Forced Migrant Children and Youth in Urban Johannesburg". In Loren Landau (ed.), *Forced migrants in the new Johannesburg. Towards a local government response*. Johannesburg: University of the Witwatersrand.
Fass, Paula. (2005). "Children in Global Migrations". *Journal of Social History* 38: 937–953.
Felsman, Kirk, Frederick Leong, Mark Johnson and Irene Crabtree Felsman. (1990). "Estimates of psychological distress among Vietnamese refugees: Adolescents, unaccompanied minors and young adults". *Social Science Medicine* 31: 1251–1256.
Felsman, Kirk. (1993). A review of "The Psychological Well-being of Refugee Children: Research, Practice and Policy Issues" by Margaret McCallin (ed.), Geneva: International Catholic Child Bureau.
Flores, William. (2003). "New Citizens, New Rights: Undocumented Immigrants and Latino Cultural Citizenship". *Latin American Perspectives* 30.2: 295–308.
Førde, Siv. (2007). "Refugee children and resilience: Empowerment, participation and subjective wellbeing". MPhil Thesis: University of Bergen.
Frasier, Evan, Andrew Dougill, Warren Mabee, Mark Reed and Partick McAlpine (2006). 'Bottom up and Top Down: Analysis of participatory processes for sustainability indicator identification as a pathway to community empowerment and sustainable environmental management'. School of Earth and Environment, Sustainability Research Institute, University of Leeds.
Gans, Herbert J. (1992). "Second Generation Decline: Scenarios for the Economic and Ethnic Futures of the Post-1965 American Immigrants." *Ethnic and Racial Studies* 15:173–92.
Giner, Clotilde. (2006). "Asylum and Childhood in the UK: A Highly Political Relationship". MS Thesis: University of Oxford.
Gleeson, Shannon and Roberto G. Gonzales. Forth- coming. "When Do Papers Matter? An Institutional Analysis of Undocumented Life in the United States." *International Migration*.
Gonzales, Roberto. (2011). "Learning to Be Illegal: Undocumented Youth and Shifting Legal Contexts in the Transition to Adulthood." *American Sociological Review* 76(4):602–619

Goodman, Janice H. (2004). "Coping with trauma and Hardship Among Unaccompanied Refugee Youths from Sudan". *Qualitative Health Research* 14: 1177–1196.

Government Gazette. (1996). Constitution of the Republic of South Africa No. 108 of 1996.

Hashim, Iman. (2006). "The Positive and Negatives of Children's Independent Migration: Assessing the Evidence and the Debates". Development Research Centre on Migration, Globalisation and Poverty, University of Sussex.

Hillier, Lucy. (2007). "Children on the Move: Protecting unaccompanied migrant children in South Africa and the region." Save the children UK, South Africa Programme.

Human Rights Watch. (1998). "Prohibited Persons": Abuse of Undocumented Migrants, Asylum Seekers, and Refugees in South Africa. South Africa: Human Rights Watch.

Human Rights Watch. (2002). "Nowhere to Turn: State Abuse of Unaccompanied Migrant Children by Spain and Morocco". South Africa: Human Rights Watch.

Human Rights Watch. (2005). Living on the Margins Inadequate protection for refugees and asylum seekers in Johannesburg. Human Rights Watch. Vol. 17, No. 15(A).

Human Rights Watch. (2007). "Keep Your Head Down. Unprotected Migration in South Africa." Human Rights Watch report 19(3A).

Immigration Act, 2002. *Government Gazette* No. 13.

Ingleby, David. (2005). "Forced Migration and Mental Health: Rethinking the care of Refugees and Displaced Persons". New York.

Inter-Agency Standing Committee (IASC) (2008). Mental Health and Psychosocial Support: Checklist for Field Use. Geneva: IASC.

International Save the Children Alliance (ISCA). (1996). "Promoting Psychosocial Well-being Among Children Affected by Armed Conflict and Displacement: principles and approaches". Working Paper No 1. Geneva: ISCA.

Jacobsen, Karen. (2002). "Livelihoods in Conflict--The pursuit of livelihoods by refugees and the impact on the human security of host communities". *International Migration* 40: 95–123.

Jacobsen, Karen. (2006). "Refugee and Asylum Seekers in Urban Areas: A livelihoods Perspective". *Journal of refugee Studies* 19: 273–286.

Joyce, Corona and Emma Quinn (2009). "Policies on Unaccompanied Minors in Ireland". Ireland: European Migration Network.

Kasinitz, Philip, John H. Mollenkopf, Mary C. Waters, and Jennifer Holdaway. 2008. *Inheriting the City: The Children of Immigrants Come of Age*. Cambridge, MA.: Harvard University Press.

Kia-Keating, Maryam and Heidi Ellis. (2007). "Belonging and Connection to School in Resettlement: Young Refugees, School Belonging, and Psychosocial Adjustment". *Clinical Child Psychology and Psychiatry* 12: 29–43.

Kinzie, Dave J., William H. Sack, Richard Angell, Greg Clark, and Rath Ben. (1989). "A three year follow-up of Cambodian young people traumatized as children". *Journal of the American Academy of Child and Adolescent Psychiatry* 28: 501–504.

Kohli, Ravi and Rosie Mather. (2003). "Promoting Psychosocial Well-Being in Unaccompanied Asylum Seeking Young People in the United Kingdom." *Child and Family Social Work* 8: 201–212.

Kok, P. & Collinson, M. (2006). 'Migration and urbanization in South Africa. Pretoria: Statistics South Africa.

Kruger, Jill and Louise Chawla. (2002). "We know something someone doesn't know': children speak out on local conditions in Johannesburg." *Environment and Urbanization* 14: 85–96.

Kwankye, Stephen, John Anarfi, Cynthia Addoquaye Tagoe and Adriana Castaldo. (2007). "Coping Strategies of Independent Child Migrants from Northern Ghana to Southern Cities". Development Research Centre on Migration, Globalisation and Poverty, University of Sussex.

Lamchek, J. (2011). "Clandestine Activists: Human Rights Activism for Undocumented Migrants" (A case study of a campaign of domestic workers in the Netherlands). School of Global Studies, University of Gothenburg.

Landau, Loren and Jean Pierre Misago. (2009). "Who to Blame and What's to Gain? Reflections on Space, State, and Violence in Kenya and South Africa." *Africa Spectrum* 44: 99–110.

Landau, Loren and Segatti, Aurelia Wa Kabwe (2009). "Case Study: South Africa, in Human Development Impacts of Migration". *United Nations Development Programme*. http://www.undp.org.

Landau, Loren (2009). "Living Within and Beyond Johannesburg: Exclusion, Religion, and Emerging Forms of Being." *African Studies Review* 68:2.

Landau, Loren and Veronique Gindrey (2008). "Migration and population trends in Gauteng province 1996–2055. University of Witwatersrand.

Landau, Loren. (2006), "Protection and Dignity in Johannesburg: Shortcomings of South Africa's Urban Refugee Policy." *Journal of Refugee Studies* 19: 308–327.

Landau, Loren. (2004). "Xenophobia in South Africa and the Problems Related to It, Forced Migration Working Paper Series #13". http://migration.wits.ac.za

Lawyers for Human Rights (LHR). (2005). Applicant Access Case. Case No. 5251/2005. High Court. Transvaal Provincial Division.

Leggett, T. (2002). 'A den of iniquity? Inside Hillbrow's residential hotels.*' SA Crime Quarterly*,2.

Le Roux, Johann, and Cheryl Smith. (1998). "Psychological characteristics of South African street children". *Adolescence* 33: 891–899.

Le Roux, Johann. (1993). "Street children in South Africa: findings from interviews on the background of street children in Pretoria, South Africa." *Adolescence* 31: 423–431.

Liebkind, Karmela, Inga Jasinskaja-Lahti and Erling Solheim. (2004). "Cultural Identity, Perceived Discrimination, and Parental support as Determinants of Immigrants' School Adjustments: Vietnamese Youth in Finland". *Journal of Adolescent Research* 19: 635–656.

Lloyd, C.B., editor. (2005). *Growing Up Global:* The Changing Transitions to Adulthood in Developing Countries. Washington, DC, National Academies Press.

Lustig, S., M. Kia-Keating, W. Knight, P. Geltman, H. Ellis, J. Kinzie, T. Keane, and G. Saxe. (2003). "Review of Child and Adolescent Refugee Mental Health". *Child Adolescence and Psychiatry* 40.1: 25–36.

Massey, Douglas and Magaly Sánchez R. (2010). *Brokered Boundaries: Creating Immigrant Identity in Anti- Immigrant Times*. New York: Russell Sage Foundation.

Machel, Grac'a. (1996). “Promotion and Protection of the Rights of the Children: Impact of Armed Conflict on Children”. UN Document, Item 108 of the provisional agenda. www.unicef.org/graca/a51-306_en.pdf

Mahati, Standford (2009). “The Representations of Unaccompanied Working Migrant Male Children Negotiating for Livelihoods in a South African Border Town”

Mann, Gillian and David Tolfree. (2003). “Children’s Participation in Research: Reflections from the Care and Protection of Separated Children in Emergencies Project”. Stockholm: Save the Children Sweden.

Markstrom, Carol; Vicky Sabino, Bonnie Turner, and Rachel Berman. (1997). “The Psychosocial Inventory of Ego Strengths: Development and Validation of a New Eriksonian Measure”. *Journal of Youth and Adolescence* 26: 705–32.

Marshall, Catherine and Gretchen B. Rossman. (1989). *Designing qualitative research*. Newbury Park, CA: Sage Publications.

McCloskey, Laura and Karen Southwick. (1996). “Psychosocial Problems in Refugee Children Exposed to War”. *Pediatrics* 97: 394–397.

McKernan, Mary McKay, Judith Stoewe, Kathleen McCadam, Jude Gonzales. (1998). “Increasing access to child mental health services for urban children and their caregivers”. *Health and Social Work* 23: 9–15.

Melzak, Sheila. (1995). “What Happens to Children When Their Parents are Not There?”. Ouder-eukindzorg voor migranten en vluchtelingen. Holland: Van Gorcum Assem.

Miller, Kenneth and Lisa Rasco (eds.). (2004). *The Mental Health of Refugees: Ecological Approaches to Healing and Adaptation.* Mahwah, NJ.: Lawrence Erlbaum Associates.

Misago, J.P., Landau, L. & Monson, T. (2008). *Towards Tolerance, Law and Dignity: Addressing Violence against Foreign Nationals in South Africa*, International Organisation for Migration, Pretoria.

Misago, J.P. (2008), *May 2008 Violence Against Foreign Nationals in South Africa*: Understanding Causes and Evaluating Responses, FMSP and CoRMSA.

Mollenkopf, John H., Mary Waters, Jennifer Holdaway, and Philip Kasinitz. 2005. “The Ever-Winding Path: Ethnic and Racial Diversity in the Transition to Adulthood.” Pp. 454–97 in *On the Frontier of Adult- hood: Theory, Research, and Public Policy*, edited by R. Settersten Jr., F. F. Furstenberg Jr., and R. G. Rumbaut. Chicago: University of Chicago Press.

Nader, Kathleen. (2008). “Treating people of varied Cultures: Honoring the Individual in Context”. http://www.giftfromwithin.org/html/culture.html.

Niolon, Richard. (2010). “Erickson's Psychosocial Stages of Development”. http://www.psychpage.com/learning/library/person/erikson.html.

O’Connell Davidson, Julia and Caitlin Farrow. (2007). “Child Migration and the Construction of Vulnerability”. Stockholm: Save the Children Sweden. europe.savethechildren.se/Global/scs/EUROPE/.../ChildMigration.pdf.

Oliveira, Elsa. (2011). “Migrant Women in Sex Work: Does urban space impact self-(re)presentation in Hillbrow, Johannesburg?”. MA Thesis. University of Witwatersrand.

Palmary, Ingrid. (2009). “For Better Implementation of Migrant Children’s Rights in South Africa”. UNICEF South Africa.

Peberdy, Sally and Zonke Majodina. (2000). “Just a roof over my head?’ Housing and the Somali refugee community in Johannesburg”. *Urban Forum* 11: 273–288.

Pieterse, Edgar. (2004). “Untangling ‘Integration’ in Urban Development Policy Debates”. *Urban Forum 15(1).*

Polzer, Ngwato, Tara (2009). "Zimbabwean migration to South Africa: from myth to management". The Star Special Insert on Migration.

Polzer, T. (2007). "Local Government and Migration Management in Border Areas Challenges and Opportunities for Public Service Provision." Johannesburg: Forced Migration Studies Programme, University of Witwatersrand.

Portes, Alejandro and Patricia Fernandez-Kelly. 2008. "No Margin for Error: Educational and Occupational Achievement among Disadvantaged Children of Immigrants." *ANNALS of the American Academy of Political and Social Science* 620:12–36.

Pupavac, Vanessa. (2001). "Therapeutic Governance: Psycho-social Intervention and Trauma Risk Management." *Disasters* 25.4: 358–372.

Pupavac, Vanessa. (2004). "Psychosocial Intervention and the Demoralization of Humanitarianism". *Journal of biosocial Science* 36: 491–504.

Raghallaigh, Ní Muireann and Robbie Gilligan. (2010). "Active Survival in the lives of unaccompanied minors: coping strategies, resilience, and the relevance of religion". *Child & Family Social Work* 15: 226–237.

Reamer, Frederic. (1979). "Protecting Research Subjects and Unintended Consequences: The Effect of Guarantees of Confidentiality". *Public Opinion Quarterly*. Vol. 43.4: 497–506.

Refugee's Act, 1998. *Government Gazette* 2002.

Rumbaut, Rubén G. 1997. "Assimilation and its Discontents: Between Rhetoric and Reality." *International Migration Review* 31: 923–60.

Rumbaut, Rubén G. 2005. "Turning Points in the Tran- sition to Adulthood: Determinants of Educational Attainment, Incarceration, and Early Childbearing among Children of Immigrants." *Ethnic and Racial Studies* 28:1041–86.

Rutter, Michael. (1985). "Resilience in the face of adversity: Protective factors and resistance to psychiatric disorder". British Journal of Psychiatry 147.12:598–611

Ryan, Richard and Edward Deci (2001). 'On Happiness and Human Potentials: A review of Researcg on Hedonic and Eudaimonic Well-Being'. *Annual Review of Psychology.* Vol. 52: 141–166.

Saha. Asoke. (2010). "Impact of Social Identity on Participation Process in Development". *J. Psychosocial Res.* Vol. 5(2):247–252.

Save The Children Norway. (2008). "Our Broken Dreams: Child Migration in Southern Africa". Save the Children UK and Save the Children Norway in Mozambique. Mauritius: Precigraph Ltd.

Schweitzer, Robert, Fritha Melville, Zachary Steel and Philippe Lacherez. (2006). "Trauma, post-migration living difficulties, and social support as predictors of psychological adjustment in resettled Sudanese refugees". *Australian and New Zealand Journal of Psychiatry* 40: 179–187.

Simpson, Barbara and Thamary Zambuko. (2007). "The Psychosocial Rehabilitation Needs of Residents of a Half-Way House for Mental Health Care Users in Durban, South Africa". *International Journal of Psychosocial Rehabilitation* 15: 69–78.

Smith, Jonathan, Mike Osborn (2008). "Doing Psychological Research", *Interpretative Phenomenological Analysis*: Chapter 10. The British Psychological Society.

Spaun, Hege. (2007). "Reconstructing Social Networks: The importance of friends and family in the acculturation of unaccompanied minors". MA Thesis: University of Oslo.

Strauss, Anselm and Juliet Corbin. (1990). *Basics of Qualitative Research.* Newbury Park, CA: Sage Publications.

Steier, Frederick (1991). "Research and reflexivity. Inquiries in Social Construction". Sage Publications. Thousand Oaks, California.

Summerfield, Derek. (1999). "A Critique of Seven Assumptions behind Psychological Trauma Programmes in War-affected Areas", *Social Science and Medicine* 48: 1449–1462.

Summerfield, Derek. (2000). "War and Mental Health: a brief overview". *British Medical Journal* 321: 232–235.

Summerfield, Derek. (2001). The invention of post-traumatic stress disorder and the social usefulness of a psychiatric category. *British Medical Journal*. 322:95-98.

Thabet, Abdel and Panos Vostanis. (2000). "Post Traumatic Stress Disorder Reactions in Children of War: A Longitudinal Study". *Child Abuse & Neglect* 24: 291–298.

The South African Children's Act (1993). Available Online At: http://www.naturalchild.org/advocacy/south_africa/childrens_charter.html

Thom, David. (2007). "Migration and Unaccompanied Minors in Southern Africa".

Timngum, Desire. (2002). "Assisting Urban Refugee Children in South Africa: Humanitarian Challenges to State and Non-State Actors". University of the Witwatersrand, Johannesburg

Todes, A. (2000). 'Reintegrating the Apartheid City? Urban Policy and Urban Restructuring in South Africa', in G. Bridge and S. Watson (eds) *A Companion to the City*. Oxford: Blackwell.

UngKul. (2010). "Unaccompanied refugee minors are children and young people under 18 who come to Norway to seek asylum without their parents or other legal guardians". http://www.fhi.no/eway/default.aspx?pid=238&trg=MainArea_5811&MainArea_5811=5903:0:15,5186:1:0:0:::0:0.

United Nations Children's' Fund (UNICEF). (2009). "Children on the Move: Unaccompanied Migrant Children in South Africa". UNICEF.

United Nations High Commissioner for Refugees UNHCR and The World Health Organisation WHO. (1996). Mental Health of Refugees WHO, England.

United Nations High Commissioner for Refugees, UNHCR (2008). UNHCR policy on refugee protection and solutions in urban areas.

United Nations High Commissioner for Refugees UNHCR. (1951). Art. I, UN Convention relating to the status of refugees.

United Nations High Commissioner for Refugees UNHCR. (1996). Working with Unaccompanied Children: A community-based Approach. *Community Service Guidelines*.

United Nations Council on Human Settlements (UNCHS). (1996). *Global Report on Human Settlements 1996*. Oxford: Oxford University Press.

Van Willigen, L. (2000). "Health hazards of organised violence in children II – Coping and Protective Factors." Utrecht: Pharos.

Vearey, Jo. (2011). "Exploring the psychosocial and health rights of forced migrants in Johannesburg. The impact of 'daily stressors' on the emotional wellbeing of forced migrants". African Centre for Migration and Society.

Vearey, Jo (2010a). “Hidden Spaces and Urban Health: Exploring the Tactics of Rural Migrants Navigating the City of Gold”. *Urban Forum* 21.1: 7–53.

Vearey, Jo (2010b). “Migration and Health Delivery Systems in Southern Africa”. *Open Space: On the Move: Dynamics of Migration in Southern Africa* 3.3: 17–23.

Vearey, Jo, Ingrid Palmary, Thomas, L., Nunez, L. and Drimie, S. 2010. “Urban Health in Johannesburg: The Importance of Place in Understanding Itra-Urban Inequalities in a Context of Migration and HIV”. *Health and Place* 16.4: 94–702.

Walsh, J. (2005). “Migrant Mobilization: Factors Contributing to the Success of the Coalition of Immokalee Workers”. Duquesne University.

Watters, Charles. (2008). *Refugee Children: Towards the next horizon.* London: Routledge.

Werner, Emmy. (1984). “Research in Review: Resilient Children”. *Young Children* 40: 68–72.

Wessells, Michael and Carlinda Monteiro. (2004a). “Internally Displaced Angolans: A Child-focused, Community-Based Intervention”. In Kenneth Miller and Lisa Rasco (eds.), *The Mental Health of Refugees*. Mahwah, NJ: Lawrence Erlbaum.

Wessells, Michael and Carlinda Monteiro. (2004b). "Psychosocial Assistance for Youth: Toward Reconstruction for Peace in Angola.” *Journal of Social Issues* 62: 121–139.

Wiles, Rose, Graham Crow, Sue Heath and Vikki Charles. (2008). “The Management of Confidentiality and Anonymity in Social Research”. *International Journal of Social Research Methodology*. Vol. 11.5: 417–428.

Young, A. (2002). *PTSD, Traumatic Memory and the Lessons of History*. Paper presented at the Conference on Trauma, Culture and the Brain.

Young, L. and H. Barrett (2001). “Adapting Visual Methods: Action research with Kampala street children”. Royal Geographical Society (with the Institute of British Geographers.

Zhou, Min. 1997. “Segmented Assimilation: Issues, Controversies, and Recent Research on the New Second Generation.” *International Migration Review* 4:825–58.

Zingu, Julia. (2007). “Children crossing borders: Report on unaccompanied minors who have travelled to South Africa”. Save the Children UK–South Africa Programme.www.savethechildren.org.uk/en/docs/children-crossing-borders.pdf.

APPENDIX A:
Ethics Clearance Certificate

Research Office

HUMAN RESEARCH ETHICS COMMITTEE (NON MEDICAL)
H110803 Johnston

CLEARANCE CERTIFICATE	**PROTOCOL NUMBER H110803**
PROJECT TITLE	How foreign unaccomanpied minors are meeting their psychosocial needs in Johannesburg
INVESTIGATOR(S)	Ms L Johnston
SCHOOL/DEPARTMENT	African Centre for Migration and Society
DATE CONSIDERED	12 August 2011
DECISION OF THE COMMITTEE	Approved Unconditionally
EXPIRY DATE	31 August 2013
DATE 14 October 2011	**CHAIRPERSON** (Professor R Thornton)

cc; Professor E Kaseke

DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and **ONE COPY** returned to the Secretary at Room 10005, 10th Floor, Senate House, University.

I/We fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee. **I agree to completion of a yearly progress report.**

Signature

27 / 10 / 2011
Date

APPENDIX B:
Information Sheet and Assent Form: Unaccompanied Minors.

Title of Study:	Exploring How Cross-border Unaccompanied Minors are Meeting their Psychosocial Needs in Johannesburg.
Principal Investigator:	Libby Johnston
Phone Number:	0820916937
Email Address:	libby.johnston15@gmail.com
Purpose:	Research study for Master Thesis at ACMS, Wits

Hello,

My name is Libby Johnston and I am conducting a research project that is exploring what the psychosocial needs of unaccompanied minors in Johannesburg are and how they are meeting their psychosocial needs. This is an MA research at ACMS Wits.

Please read the following to the unaccompanied minors for their knowledge and assent to take part in the study.

I would like to invite you to take part in this study as it will help me to understand the experiences of unaccompanied minors in Johannesburg, and to learn more about how you meet your needs such as; health care, mental health services, communities, activities, and cultural practices. This study will also help me to understand the migration experiences of unaccompanied minors to and in Johannesburg, and learn about challenges that you experienced on your journey and residence in Johannesburg.

What will this study entail?

If you decide to participate in the study, the researcher will make an appointment to meet with you and explain the study and invite you to participate in collecting information about your experiences in meeting your needs and how you deal with your unmet needs.

I will be at Kids Haven, October 13th and 14th to hold an activities workshop. There will be breakfast, lunch and a snack provided at the workshop. At this workshop, we would like to spend the day having group activities such as; games, drawing and group discussions or if you prefer we could meet for a face-to-face interview.

The information that will be collected is purely for research purpose only. I hope the information collected will be used to improve the treatment of unaccompanied minors and their experience in Johannesburg. Your experience will help me to learn more about unaccompanied minors in Johannesburg and how they cater to their psychosocial needs.

The information you share with me may be written up in research reports. I will not use any of your personal details and it will not be possible to identify you personally in any of the research reports.

PARTICIPATION

Participation is completely voluntary; you are under no obligation to take part in the project. You may withdraw from this project at any stage; this will not affect you in any way.

PARTICIPATION:

- I agree to participate in this research project.
- I have read this consent form and the information it contains and had the opportunity to ask questions about them.
- I agree to my responses being used for research on the condition that my privacy is respected, subject to the following:
- I understand that my personal details will be used in aggregate from only, so that I will not be personally identifiable.
- I understand that I am under no obligation to take part in this project.
- I understand I have the right to withdraw from this project at any stage.

SIGNATURE:

Participant:

Printed Name	Signature/Mark	Date

Guardian:

Printed Name	Signature/Mark	Date

Researcher:

Printed Name	Signature/Mark	Date

APPENDIX C:
Information Sheet for Service Providers

Title of Study: Exploring How Cross-border Unaccompanied Minors are Meeting their Psychosocial Needs in Johannesburg.

Principal Investigator: Libby Johnston

Phone Number: 0820916937

Email Address: libby.johnston15@gmail.com

Purpose: Research study for Master Thesis at ACMS

My name is Libby Johnston and I am conducting a research project that is exploring what the psychosocial needs of unaccompanied minors (UAMs) in Johannesburg are and how they are meeting those psychosocial needs. This is an MA research at ACMS Wits.

As stated above the main part of this study will be to ascertain what the psychosocial needs of UAMs[17] are and how they are meeting these needs. I would like to learn more about the challenges that UAMs have experienced while living in Johannesburg and the responses that they have had to their psychosocial needs.

I would greatly appreciate if you, the service provider, could identify UAMs who are willing to participate in this study who are currently not being assisted by RAO.

I would like to invite you to take part in this study as it will help me understand the experiences of unaccompanied minors in Johannesburg and learn more about how you, the service provider, cater to their: health care, mental health services, communities, activities, legal assistance and cultural practices. This study will eventually sketch out the migration experiences of unaccompanied minors in Johannesburg as well as the challenges you have experienced in working with them.

What will this study entail?

If you decide to participate in the study, the researcher will make an appointment to meet with you and explain the study and invite you to participate in collecting information about your experiences in working with UAMs and how you feel the services provided to these children could be enhanced.

I expect to be meeting with you at an agreed upon location. If you travel to meet me, specifically in order to participate in the research, I will reimburse people for their travel expenses for each visit. At this visit, we would like to spend about 45 minutes making a semi-structured[18] interview.

The information that will be collected is solely for research purposes and will be used towards developing polices and improving the treatment of UAMs. Your experience is vital for a better understanding of the psychosocial needs of UAMs in Johannesburg and how those needs are currently catered.

The information you share with me may be written up in research reports. I will not use any of your personal details and it will not be possible to identify you personally in any of the research reports. Participation is completely voluntary; you are under no obligation to take part in their project. You may withdraw from this project at any stage without any repercussions.

---

[17] Unaccompanied minor is defined as a person who has not reached the age of 18, who is without any legal guardian, care-giver, or person over the age of 18. This can be a child separated, abandoned, orphaned or run-away.

[18] A semi-structured interview is one where most of the interview questions are set for each person, but additional questions can be asked of individual participants.

PARTICIPATION:

- I agree to participate in this research project.
- I have read this consent form and the information it contains and had the opportunity to ask questions about them.
- I agree to my responses being used for research on the condition that my privacy is respected, subject to the following:
- I understand that my personal details will be used in aggregate form only, so that I will not be personally identifiable.
- I understand that I am under no obligation to take part in this project.
- I understand I have the right to withdraw from this project at any stage.

SIGNATURE:

Participant:

Printed Name	Signature/Mark	Date

Researcher:

Printed Name	Signature/Mark	Date

APPENDIX D:
Semi-Structured Interviews
Community Leaders and Service Providers

Welcome to this interview. As you will remember from the Information Session, I am doing research on unaccompanied minors to see what are their psychosocial needs and how these needs are being met. You are involved in service provisions or provide assistance for this particular group, as well as others, but this interview will specifically look at unaccompanied minors. Your views and experiences are very important for my research and I would invite you to speak openly.
The things we discuss here will be done confidentially and when I write about the research findings, I will make sure not to discuss the information given outside of the interview itself, and I encourage you to not quote what someone else has said but express your own ideas. You have the right to speak generally about our discussion, but for confidentiality reasons, please do not repeat what someone else has said.

Are there any questions?

1) What are the primary services give (by your respected organisations or communities) for unaccompanied minors?
2) What do you think are the greatest psychosocial needs of an unaccompanied minor?
3) Have you received training specifically pertaining to the care of unaccompanied minors?
4) If a child was found in Johannesburg. He/she does not have a document, but he/she claims to be 16-years-old, and an unaccompanied minor, who is seeking asylum. What course of action would you take?
5) How do you think service providers could improve the already existing services, and what would you change or add?

APPENDIX E:
Workshop Activities
(1) Unaccompanied Minors

Welcome to this workshop. As you will remember from the Information Session, I am doing research on unaccompanied minors to see what their psychosocial needs are and how these needs are being met. You are essential to my research because you are unaccompanied minors. Your views and experiences are very important for my research and I would invite you to speak openly.
The things we discuss here will be done confidentially and when I write about the research findings, I will make sure not to discuss the information given outside of the interview itself, and I encourage you to not quote what someone else has said but express your own ideas. You have the right to speak generally about our discussion, but for confidentiality reasons, please do not repeat what someone else has said.

Are there any questions?

Activity 1:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw your house and the people that live inside that house.

Activity 2:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw a weekly timeline of your activities and where you go to do them.

Questions:
- *Tell me about all the places you go?*
- *Do you go to different places on the weekends?*
- *Do you go to school?*
- *How do you get to school?*
- *Do you work?*
- *When you are sick where do you go?*
- *Do you go to church?*
- *Do you play sports?*
- *Do you do any other activities like a choir or youth group?*
- *How do you get there?*

Activity 3:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw your flight, reception and journey to your current location.

Questions:
- *What violence happened to children in the place where you lived before?*
- *What violence happened to children on the journey here? Which adults or children made that violence?* (Do not focus on war-related violence but rather on violence related to those situations related to flight and assistance in refugee situations)
- *What did children do to keep themselves safe?*
- *What did adults do to help keep children safe? Which adults?*

Activity 4:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw on violence and problems that you encountered in Johannesburg.

1. Draw some of the things that can be done to make avoid the problems you have faced. Think about what can be done at school, at the shelter, at home, on the streets.

2. Think about what caregivers, service providers and the community can do.

3. What children themselves can do, what teachers can do, what community leaders can do, what government can do?

4. Just think of ideas that will prevent these problems for you.

Activity 5:

Discussion:

1. What recommendations would you make for service providers?

2. What recommendations would you make for the government?

3. What recommendations would you make for the community?

Activities taken from:

Clacherty, Glynis. (2003). "Poverty Made Me Do This: Children in Musina, their experiences and needs". Save the Children UK, unpublished report.

(2) Unaccompanied Minors

Welcome to this interview. As you will remember from the Information Session, I am doing research on unaccompanied minors to see what their psychosocial needs are and how these needs are being met. You are essential to my research because you are unaccompanied minors. Your views and experiences are very important for my research and I would invite you to speak openly.
The things we discuss here will be done confidentially and when I write about the research findings, I will make sure not to discuss the information given outside of the interview itself, and I encourage you to not quote what someone else has said but express your own ideas. You have the right to speak generally about our discussion, but for confidentiality reasons, please do not repeat what someone else has said.

Are there any questions?

Activity 1:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw your house and the people that live inside that house.

Activity 2:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw a weekly timeline of your activities and where you go to do them.

Questions:
- *Tell me about all the places you go?*
- *Do you go to different places on the weekends?*
- *Do you go to school?*
- *How do you get to school?*
- *Do you work?*
- *When you are sick where do you go?*
- *Do you go to church?*
- *Do you play sports?*
- *Do you do any other activities like a choir or youth group?*
- *How do you get there?*

Activity 3:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw your flight, reception and journey to your current location.

Questions:
- *What violence happened to children in the place where you lived before?*

- *What violence happened to children on the journey here? Which adults or children made that violence?* (Do not focus on war-related violence but rather on violence related to those situations related to flight and assistance in refugee situations)
- *What did children do to keep themselves safe?*
- *What did adults do to help keep children safe? Which adults?*

Activity 4:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw on violence and problems that you encountered in Johannesburg.

1. Draw some of the things that can be done to make avoid the problems you have faced. Think about what can be done at school, at the shelter, at home, on the streets.

2. Think about what caregivers, service providers and the community can do.

3. What children themselves can do, what teachers can do, what community leaders can do, what government can do?

4. Just think of ideas that will prevent these problems for you.

Activity 5:

In front of you is paper, some drawing materials, magazines and other items that you can use for this activity. Please draw what you want to be when you grow-up.

Questions

1. *What do you want to be when you grow-up?*
2. *What tools do you need to get there?*
3. *What are five steps you can take to reach your objective?*
4. *What obstacles are/can stop you from reaching your objective?*
5. *How have/can you overcome these obstacles?*

APPENDIX F:
Workshop Games

Name Game

Stand in a circle. Throw a ball or beanbag or ball made from plastic bags to someone else in the circle as you throw call out the name of the person, to whom you are throwing. They then throw the ball on to someone else while saying their name aloud and so on.
This is a good game for learning names. You can add to it as you go, for example if someone drops the ball they have to do 'shake shake banana' (i.e. put hands on hips and shake their hips - see game below)

Shake shake banana!

This is an adaptation of the game 'Simon Says'. Play in a circle. The leader says. 'When I say the word *Orange* touch your head, When I say *Apple* touch your toes. When I say *Shake shake banana* put both hands on your waist and shake your hips.' The leader then calls out 'Apples' etc. At first put the correct action with what you call out but as you go on call out one word and do the action for another. Children will get confused and there will be much laughter. Keep the atmosphere light and non-competitive. Use fruit that children will know.

Yebo!

Yebo means 'yes' – you can use the word that means 'yes' in your language if you want. This game involves close eye contact so you need to make sure it is culturally appropriate and do not play it first as it can be a little threatening.
Stand in a circle. The leader begins by saying 'Yebo xxx (call out the name of one of the children), look them in the eye and then walk slowly and purposefully to their place and take their place in the circle. They then walk out into the centre of the circle and say 'Yebo xxx (another person in the circle's name) and go to their place and so the game goes on. Encourage the group to play it in a flowing way. This is a lovely game to play if you have been talking about sad things, as it is a positive and group affirming game.

Clicks

Stand in a circle. Set up a simple rhythm with claps and clicks. For example, clap both hands on your lap, clap your hands together and then click each finger in turn. Teach the rhythm to the group slowly at first until they have it. Then, keeping in time with the rhythm call across the group, begin by saying your name (on the first finger click). 'Glynis to Martha', Martha then calls her name and someone else in the group (keeping in time with the finger clicks) 'Martha to Jessie', Jessie then calls 'Jessie to Thami' and so the game goes on.

Groups

The group sits in a circle on chairs or you can also sit in a circle on the ground. The

leader stands in the centre and calls ‘Everyone with a red piece of clothing’ everyone wearing red that day has to swap seats and the leader takes one of the empty seats. The person left without a seat then calls ‘Everyone with shoes on’ or ‘Everyone who has a big brother’ and so on. This game does not always work well through translation.

River bank

The group stands in a long line in front of the leader. If the room is small make two lines. If the leader calls ‘river’ the whole group has to hop with legs together to the right. If he or she calls ‘bank’ they have to hop to the left. If she calls ‘riverbank’ then they stay where they are and wave their hips in a circle. As the game speeds up those who go in the wrong direction are out. Don’t make the game too competitive, there is no need to play until everyone is out – just have fun with it.

Coconut

This is a great game if everyone is falling asleep or losing concentration. Stand up and spell out the letters of the word Coconut with your bodies. Make sure you stretch up as high as you can and as low to the ground as you can as you spell out the letters. This is a real stretching game.

I am, I can, I have

This is appropriate when you have been talking about sad things in the group. Stand in a circle and throw the beanbag to each child around the circle. When they catch the bag they have to say, ‘I am xxx’ and then say one positive thing about themselves. Do the same with ‘I have xxx’ and ‘I can..

APPENDIX G:
Sample Schedule of Workshop

The interviews are planned according to the following guidelines; UNICEF 'Participatory Assessment with Children in Dzaleka Refugee Camp in Malawi', 2005 and Glynis Clacherty 'Poverty made this decision for me. Children in Musina: Their Experiences and needs', 2003.

Day 1
Individual

09:00	Breakfast (Juice and biscuits) and Introduction of activity.
10:00	Activity 1: Draw your house and the people who live in it.
11:00	Discussion about the drawing.
12:00	Activity 2: Draw a weekly timeline of your activities and where you go to do them.
13:00	Break for Lunch: Sandwich and drink available for the UAM/s.
13:30	Discussion about the drawing.
14:30	Activity 3: Draw your flight, reception and journey to your current location.
16:00	End of interview Day 1

Day 2
Individual

09:00	Breakfast (Juice and biscuits) and Introduction of activity.
10:00	Discussion of Drawing (Activity: 3)
11:00	Activity 4: Drawing on violence and problems encountered by you.
12:00	Discussion of Drawings
13:00	Activity 5: Discussion on solutions to the problems faced. What recommendations would you make?
13:30	Lunch: Sandwich and drink available for the UAM/s
14:30	Interview finished.

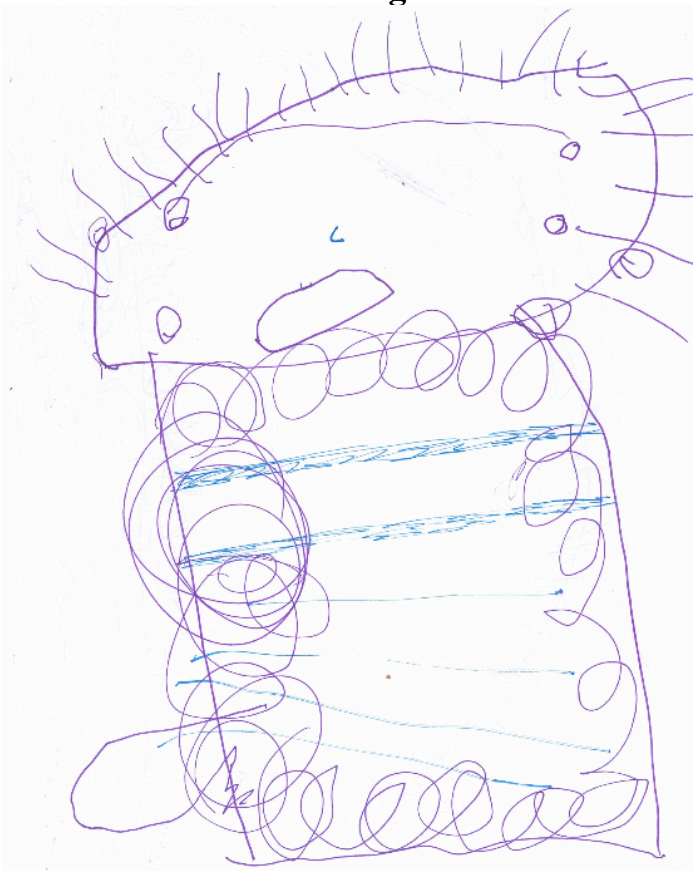
Day 1
Group

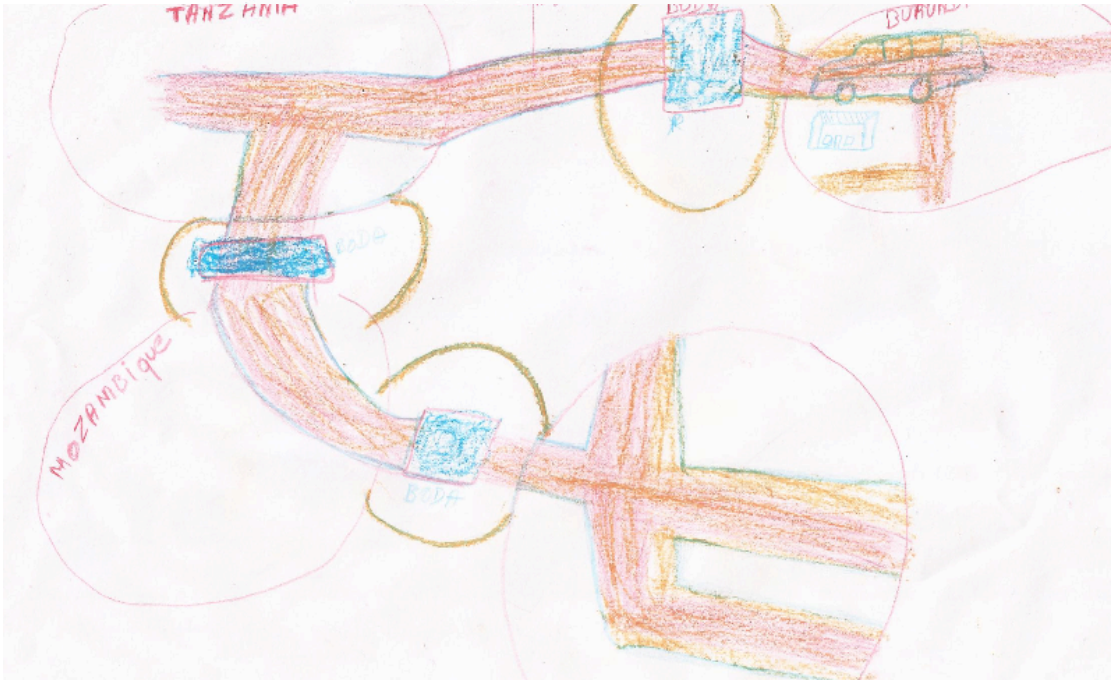
09:00	Breakfast (Juice and biscuits) and Introduction of activity.
10:00	Activity 1: Draw your house and the people who live in it.
11:00	Discussion about the drawing.
12:00	Games
13:00	Break for Lunch: Sandwich and drink available for the UAM/s.
13:30	Activity 2: Draw a weekly timeline of your activities and where you go to do them.
14:30	Discussion on the drawing.
15:30	End of interview Day 1

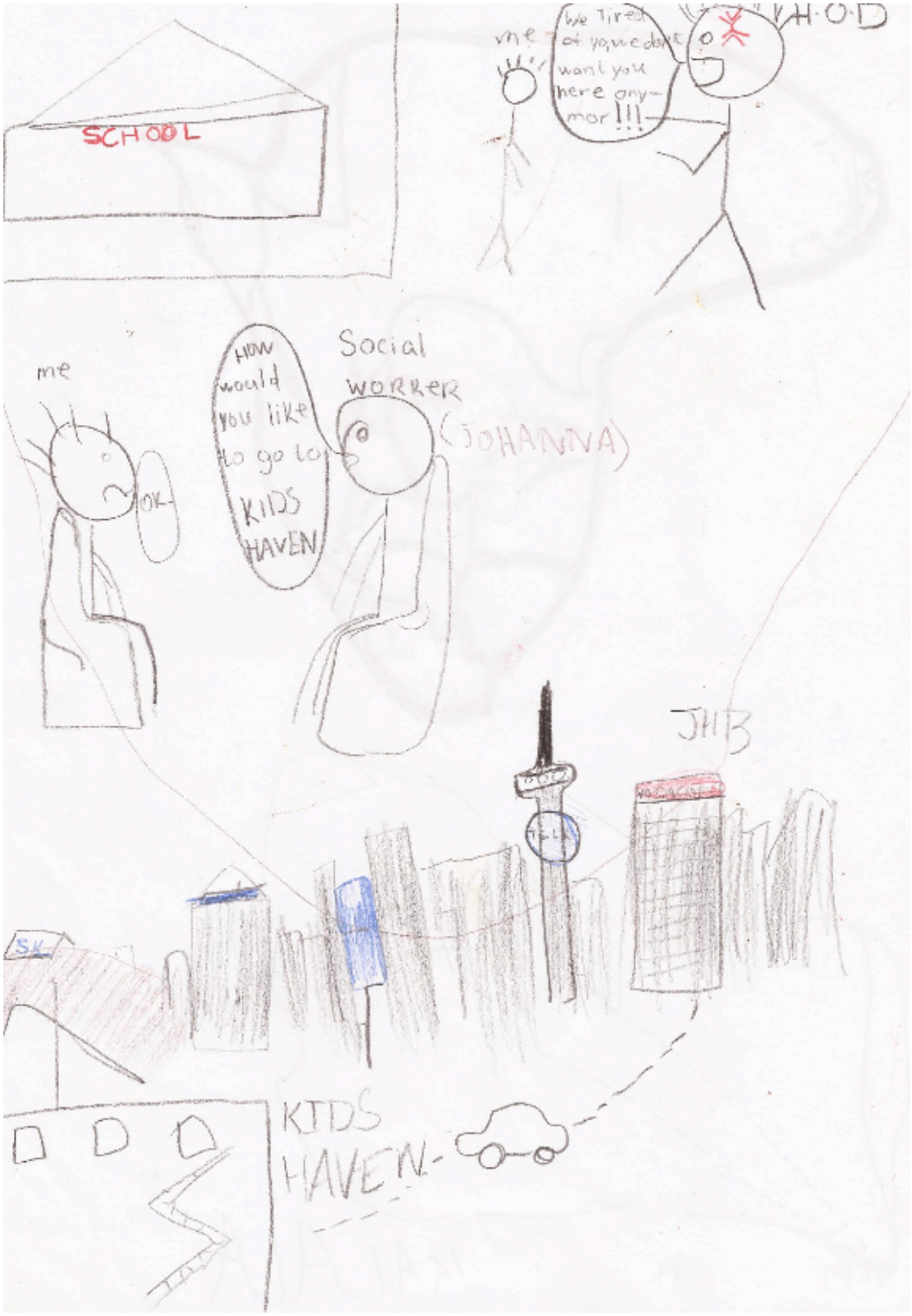
Day 2
Group

09:00	Breakfast (Juice and biscuits) and Introduction of activity.
10:00	Activity 3: Draw your flight, reception and journey to your current location.
11:00	Discussion on Drawings.
12:00	Activity 4: Drawing on violence and problems encountered by you.
13:00	Discussion on Drawings.
13:30	Lunch: Sandwich and drink available for the UAM/s. (Games)
14:30	Activity 5: Discussion on solutions to the problems faced. What recommendations would you make?
15:30	Discussion on Drawings.
16:30	End of Interview.

APPENDIX H:
Drawings

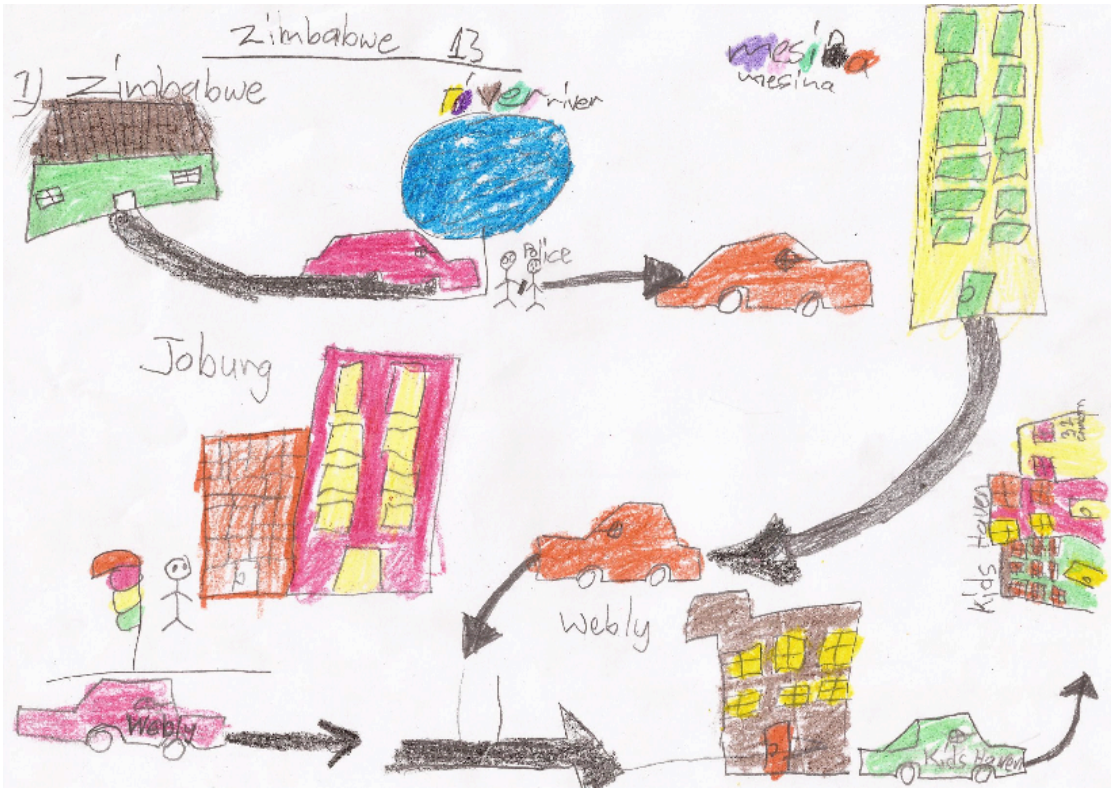


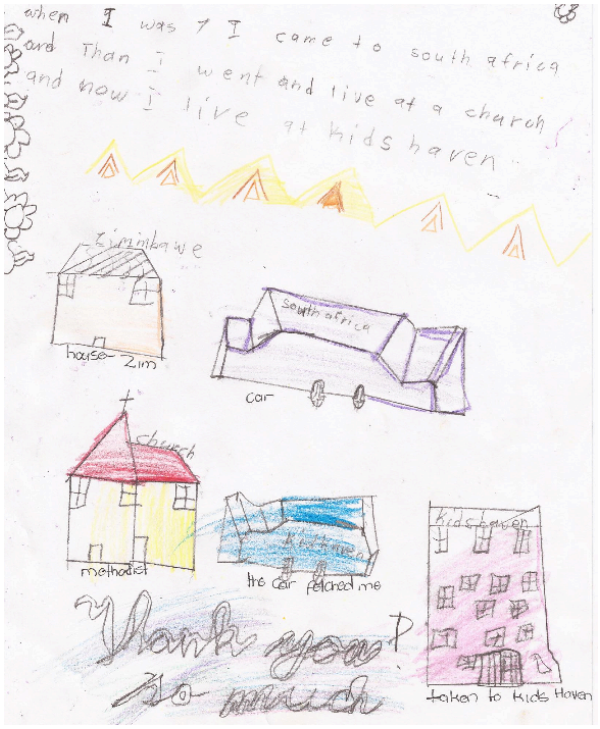


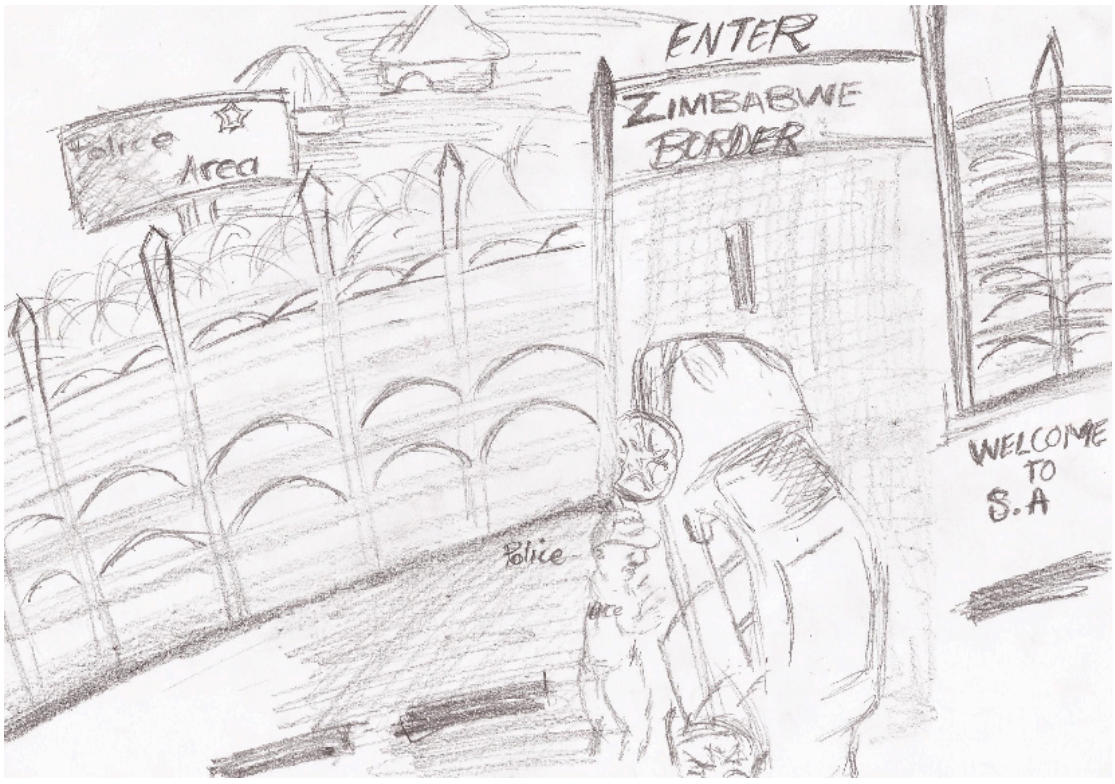

SCHOOL
me
We Tired of you we don't want you here anymor!!!
H.O.D
me
How would you like to go to KIDS HAVEN
Social worker
(JOHANNA)
JHB
KIDS HAVEN

I came to South Africa by my brother and we lived by our sister but my sister was poor he did not have a job so he saiyed I must look for you a shelter for you to live in. and she went to look for us and he found kid haven and we lived in kid haven and my sister got a job and now he working in a nice job for her and his family to live

THANK YOU KID HEVAN

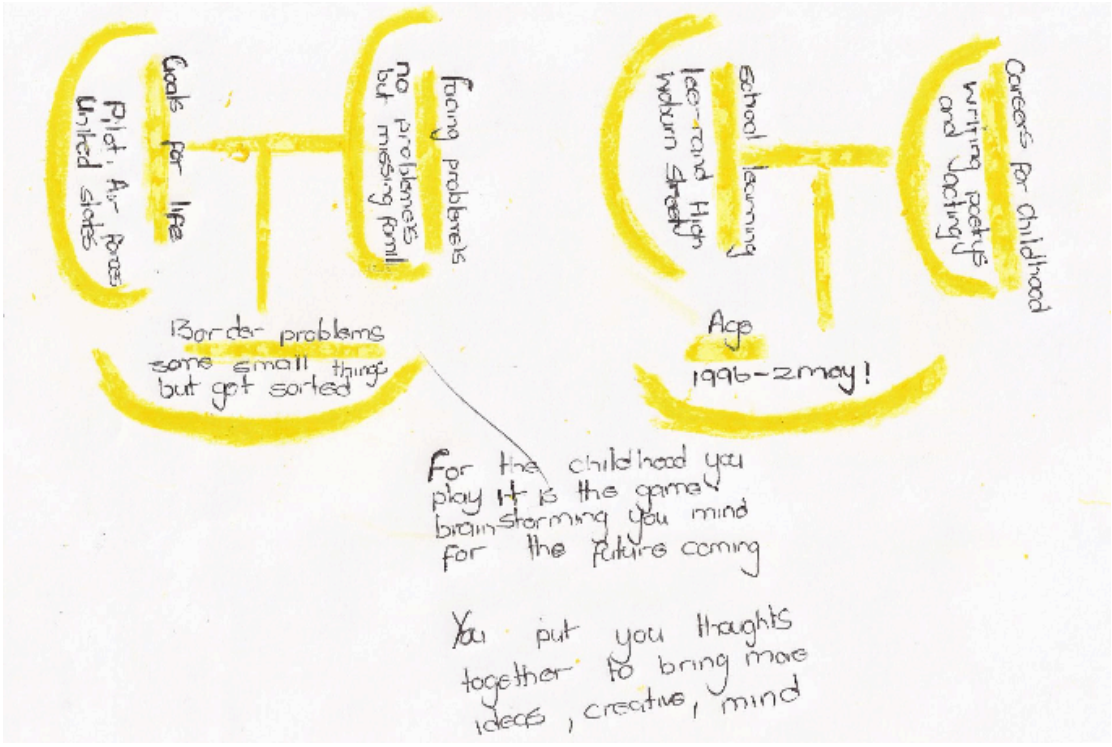



when I was 7 I came to south africa
and Than I went and live at a church
and now I live at kids haven
zimbabwe
house Zim
south africa
car
church
methodist
the car fetched me
Kids haven
taken to Kids Haven
Thank you
so much


ENTER
ZIMBABWE
BORDER
Police
Area
WELCOME
TO
S.A
Police

I how is ye old I would like to saying thank
for kids haven ~~of~~ ~~the~~ ~~she~~ to take to school
and Seeing the kids haven is help people
From Zimbabwe. The other thing that I need
if was school of the Johannesburg the was
on food, school, the places to sleep and other
~~thi~~ challenges




Goals for life
Pilot, Air Force United states
facing problems
no problems but missing family
Border problems some small things but got sorted
School learning
learn and High work turn street
Careers for childhood
writing poetry and acting
Age
1996-2may!
For the childhood you play it is the game brainstorming you mind for the future coming
You put you thoughts together to bring more ideas, creative, mind


Singly