

https://dspace.org/

When a bad thing happensyou are better only when you are home alienation and mental health challenges experienced by Congolese and Somali migrants in Johannesburg South Africa

Rebecca Walker; Mulopo Lakika; Tackson Makandwa; C Boeyink

https://hdl.handle.net/10539/39398
DOAJ

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

frontiers | Frontiers in Human Dynamics

TYPE Original Research
PUBLISHED 09 November 2023
DOI 10.3389/fhumd.2023.1260042

Check for updates

OPEN ACCESS

EDITED BY
David P. Lindstrom,
Brown University, United States

REVIEWED BY
O. Alexander Miller,
Voorhees College, United States
Thembani Dube,
Stellenbosch University, South Africa
Thabiso Muswede,
University of Limpopo, South Africa

*CORRESPONDENCE
Clayton Boeyink
✉ cboeyink@ed.ac.uk

RECEIVED 17 July 2023
ACCEPTED 27 October 2023
PUBLISHED 09 November 2023

CITATION
Walker R, Lakika D, Makandwa T and Boeyink C (2023) "When a bad thing happens…you are better only when you are home:" alienation and mental health challenges experienced by Congolese and Somali migrants in Johannesburg, South Africa.
Front. Hum. Dyn. 5:1260042.
doi: 10.3389/fhumd.2023.1260042

COPYRIGHT
© 2023 Walker, Lakika, Makandwa and Boeyink. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

"When a bad thing happens…you are better only when you are home:" alienation and mental health challenges experienced by Congolese and Somali migrants in Johannesburg, South Africa

Rebecca Walker[1], Dostin Lakika[1], Tackson Makandwa[1] and Clayton Boeyink[2]*

[1]The African Centre for Migration & Society (ACMS), University of Witwatersrand, Johannesburg, South Africa, [2]Centre for African Studies, School of Social and Political Science, University of Edinburgh, Scotland, United Kingdom

This article explores the link between migration and alienation and its impact on the mental health and wellbeing of Congolese and Somali asylum seekers and refugees—two of the largest populations of displaced migrants in South Africa. Drawing on ethnographic research in Johannesburg, we highlight the various ways alienation is both imposed upon and experienced by migrants and argue that systemic *dis*integration, or acts of alienation, can be seen as deliberate and active policies and practices that are instrumental in excluding asylum seekers and refugees from everyday life. The experiences of marginalization and othering narrated by Congolese and Somali migrants highlight ways in which alienation and *dis*integration from critical social connections including family, community, and familiar contexts fundamentally impact wellbeing and mental health as well as strategies of care-seeking, and other forms of relational resilience. While conceptualizations and metrics of integration may in some ways capture the fallout of disintegration, such as access to livelihoods, housing, education, and healthcare, we suggest that this does not adequately assess the profound damage by acts of alienation on crucial relationships. The alienated psyche of innumerable migrants in South Africa results in the feeling that "when a bad thing happens…you are better only when you are home." This pain, or feelings of alienation, we argue, are a crucial aspect to our understanding of alienation and in turn, highlight the importance of alienation as an apt analytical tool through which experiences of asylum-seeking in South Africa can be understood.

KEYWORDS

alienation, integration, displacement, refugee, Somali, Congolese South Africa, mental health

Introduction

In Johannesburg, South Africa asylum seekers and refugees[1] face multiple forms of stigma, discrimination, and alienation when negotiating integration and daily life. Since its

1 We use refugee, asylum seeker, migrant, forced migrant interchangeably because these are the local terms used, which reflects the complexity of perceptions and lived realities of "life seekers" or "people on the move."

first democratic election in 1994 and the adoption of a progressive and protective legal framework to protect human rights—including the rights of migrants—South Africa has been perceived as a place of safety and opportunity for asylum-seekers and refugees from across the African continent. The majority of these migrants have gravitated toward urban spaces such as Johannesburg (Misago et al., 2015; Walker et al., 2017; Schockaert et al., 2020).

However, despite the fact that South Africa is built on and shaped by historical and contemporary regional and circular migration, many asylum seekers and refugees face multiple barriers to regularizing their stay in the country, accessing employment, and basic services such as education, healthcare, and social support (Hassim et al., 2008; Amit and Kriger, 2014; Vearey, 2017; Gandar, 2019; Walker, 2021). The South African government has placed greater emphasis on securitizing the border, simultaneously painting non-national as a threat to national security and a burden on state resources. As a result, migrants increasingly experience hostility, threats, and alienation (Walker and Oliveira, 2020). Therefore, although many migrants find ways to navigate and negotiate strategies for survival, including informal work and tapping into support networks, this xenophobic discourse persists, which enables the state to push (and justify) the active and deliberate exclusion or "disintegration" (Collyer et al., 2020) of migrants and refugees. This is done through policies and practices aimed to restrict migrants' rights and curtail movement, which ultimately creates and re-enforces feelings of alienation.

Recognizing that historically alienation has been identified as an important lens to exploring and explaining the process of separation—from one's work, one's purpose, and ultimately one's sense of power—in this paper we contend that the concept of alienation is an apt analytical tool through which experiences of asylum seekers and refugees living in Johannesburg can be understood.

In this article we focus on asylum seekers and refugees from the Democratic Republic of Congo (DRC) and Somalia—two of the major source countries of forced migrants into South Africa (second and third to Ethiopia) (Moyo, 2021). The research informing this article is a part of a larger multi-sited project (including Johannesburg and Nairobi), which explores the relationship between displacement, gendered violence, and mental ill-health for internally displaced persons (IDPs), refugees, and asylum seekers who face multiple barriers to accessing healthcare.[2] Looking at Congolese and Somali migrants in Nairobi, Kenya and Johannesburg, South Africa meant that we could explore the experiences of two of the largest displaced population groups in Africa and compare them across two different cities. In Johannesburg particularly, Congolese and Somalis are a part of well-established communities that have been living in Johannesburg for many years and groups of new arrivals have come to the city in recent years in search of safety and support. Through qualitative research with the diverse groups of Congolese and Somali refugees and asylum seekers in Johannesburg, we aimed to better understand the interrelationship of migration and health, including mental health, as determined by the broader context of xenophobic violence.

In this article we draw on this research to interrogate how alienation from critical social connections including family, community, and familiar contexts fundamentally impacts wellbeing and mental health as well as strategies of care-seeking, and other forms of relational resilience.

Despite alienation's important place in social theory with a long history in Marxian and Hegelian thought (Seeman, 1959), there is little recent scholarship linking migration and alienation. Various isolated forms of research through film (Gürkan, 2017) and literature (Khan, 2021), or the analysis of policymakers' failure to capture migration policy (Scholten, 2020), have provided some sense of how alienation can impact and shape migrants' lives, we contend that they do not fully apply to or capture the ways we conceptualize alienation.[3]

Drawing from the development of the term alienation and locating this within the complex context of migrant lives in Johannesburg, South Africa, we contribute two interrelated aspects to understanding alienation as it relates to migration: acts of alienation and feelings of alienation. Acts of alienation include the processes of *dis*integration and othering by the state and society. This includes the role of policies, practices, and discourses of (re)producing and imposing *alien*ation through the creation and reification of migrants and refugees as the "other," that is, the alien. Acts of alienation lead to the estrangement to customs, family, and an existential loss or incomplete sense of belonging—the feelings of alienation. Noting that these forms of enacting and embodying alienation are intersecting, our findings suggest that alienation is felt particularly through three key areas of life: in gender roles; relationships with family, and through religiosity and faith-based spaces.

Structure of the paper

In what follows we begin with an overview of the methodology of the research that informs this paper. We then focus on "acts of alienation" through which we present Johannesburg as a city of stark inequality and shaped by policies and practices of exclusion, which enforce deep feelings of alienation such as denied access to documentation and health care. We then explore the complex feelings of alienation amongst Congolese and Somalis through their narrations of challenges faced in the key spheres of gender roles, family, and faith. In doing so we show how systemic *dis*integration, or acts of alienation, are the deliberate and active policies and practices in South Africa that are instrumental in excluding asylum seekers and refugees from accessing basic services and employment, which profoundly impacts their mental health and wellbeing.

2 The support of the Economic and Social Research Council (ESRC) (UK) is gratefully acknowledged.

3 We identified only one scoping study linking feelings of alienation to migrants' lived experiences, which recognizes the complexities of defining alienation (Yang et al., 2022).

Methodology

The fieldwork for the project was conducted between 2020–2022 at the time of the COVID-19 pandemic and as South Africa implemented a series of strict national lockdowns to prevent the spread of the virus. When we had initially planned the research, we had envisaged an ethnographic study which would incorporate a series of interviews and focus-group discussions with Somali and Congolese asylum seekers and refugees in two areas of Johannesburg. However, due to the pandemic and the unpredictability of the situation we found that initially interviews had to be online and, only after some time could interviews be conducted in person.

Interviews had to be carefully planned due to enforced social distancing and researchers and participants could not interact "naturally" but instead had to be vigilant with every step. In addition, the impact of the COVID-19 pandemic meant that many potential participants had been forced into greater states of precarity with a loss of income and challenges in accessing support (Oliveira and Walker, 2021; Vearey et al., 2021; Mutambara et al., 2022). Therefore, while the pandemic itself created a new lens to examine migration and mental health (Walker and Vearey, 2022), it also pushed many of the most marginalized and othered groups into deeper poverty, isolation, and desperation. This is a point that should be recognized as central in this research and as raising questions about doing research during times of crisis.

Despite the practical challenges of research during COVID-19, overall we managed to conduct 123 semi-structured interviews, with 83 adult participants from the Congolese community (44 males and 39 females); and 40 adult participants from the Somali community (25 males and 15 females).[4] The interviews aimed to explore experiences of health and mental health including access to healthcare, understandings and perceptions of mental health, and alternative strategies for care (where the public health system is not/cannot be accessed).

As lockdown was lifted in South Africa, we were able to conduct most of the 123 interviews in-person as long as they were outside. These took place outside participants' homes, open spaces of lodges, and sometimes sitting on pavements beside busy streets. As many of the migrants interviewed were undocumented, access to informants was difficult at times due to the fear of being exposed and suspicion of the researchers' intentions.

Access to participants therefore was based on the researchers own social networks and negotiated through trusted local organizations and faith-based spaces. Both the fieldworkers are migrants (one from the DRC) and understanding the challenges of living as a non-national in South Africa including documentation and access to services was important to developing relationships of trust. It also helped particularly with awareness and sensitivity toward the anxieties and concerns of migrants about participation in the study specifically, and life in South Africa generally. That said, it remained difficult for the fieldworkers to form connections and trust and willingness to talk could not be assumed. All of these challenges, including the ones created and, exacerbated by the Pandemic are reflections as to how alienation impacts migrants and refugees in South Africa—as we go onto discuss.

The interviews were conducted in a mixture of languages. The Somali participants' interviews were either in English or Arabic with an interpreter to assist. The Congolese participants' interviews were in Lingala. All interviews were recorded (where consent was provided) and written as notes (where recording was not possible). Interviews were then transcribed and analyzed using thematic analysis and coding to identify key themes.

Acts of alienation

In South Africa migrants are often accused of stealing jobs from locals, burdening the public healthcare system and other public services, and blamed for high levels of crime and violence (Amnesty International, 2018; Vearey et al., 2022; Palmary et al., 2014b). Data shows that the overall cross-border migrant population in South Africa is estimated to fall around 3 percent of the overall population. Although 3 percent reflects a global norm, non-South Africans (particularly from other African and South Asian countries) are routinely portrayed as "flooding" into the country. Resonating with nationalist rhetoric across the globe, concerns about border security, national-sovereignty, and protecting citizens have been used to justify increasingly restrictive migration governance in South Africa (Amit, 2015; Landau, 2017). In fact, a country once lauded for its progressive and human-rights based constitution is now reconsidering its stance on allowing asylum seekers to self-settle rather than being interned in refugee camps (African National Congress, 2022).

The majority of migrants arriving in South Africa head toward urban spaces such as Johannesburg. The city hosts migrants from within its borders, across the Southern African Development Community (SADC) region, and further afield (Jinnah, 2010; Makandwa and Vearey, 2017; Misago, 2019). Stats SA estimates that at the mid-point of 2021 there were about 3.95 million international migrants in South Africa out of a total population of 60 million in the country (Ogunnubi and Aja, 2022). While a rich and diverse mix of people and communities, the city of Johannesburg is also mapped by inequality. Considered as the economic hub of the country and still referred to by many as "the city of gold" (Palmary et al., 2014a) due to the opportunities for employment (mostly within the informal sector) and improved livelihoods, Johannesburg is more often known as a place of violence and insecurity.

This originates from the enduring impact of apartheid's politics of "ghettoization" of urban spaces marked by unequal disparities of wealth and extreme poverty (Palmary et al., 2014a, p. 103). This not only makes acceptance and/or integration for migrants into communities a challenge but intensifies the competition and tension between different communities and groups, particularly in marginalized areas. The resultant high levels of xenophobia increase the discrimination and violence that non-South Africans face and lead to an acute sense of alienation—from safety, from being accepted and from feeling a sense of belonging in Johannesburg (Walker and Oliveira, 2020).

Socio-economic precarity and marginalization impacts the mental health and wellbeing of asylum seekers and refugees.

4 Each participant verbally consented to interviews and audio recordings and the study was approved by the [University 1].

Although the South African Constitution and National Health Act provide for the right to free primary health care for all, refugees and asylum seekers are often prevented from accessing healthcare including mental health services.[5] Discrimination from public healthcare facilities in South Africa is routine (Walker and Vearey, 2022) and this exacerbates and extends the ubiquitous feelings of alienation amongst migrant communities.

As a country, South Africa continues to face challenges in the provision of public mental health services while experiencing an escalating crisis with a high prevalence of mental disorders linked to social determinants like poverty, violence, and substance abuse (Burns, 2015; SACAP, 2019). Although neuropsychiatric disorders are ranked third after HIV/AIDS and other infectious diseases in their contribution to the burden of disease in South Africa, there is not only underfunding of mental health services but also enormous inequity between provinces in the distribution of mental health services and resources (Docrat et al., 2019a,b).

There is also a lack of public awareness of mental health and widespread stigma against those who suffer from mental illness (Walker and Vearey, 2022). This means that many feel a reluctance to acknowledge mental health challenges or to even try to seek care (Walker and Vearey, 2022).

"*Little Mogadishu*" and "*Gambela*"

For Somalis and Congolese who are forced to cross many countries and borders to reach South Africa, the physical and psychological distance from home is felt acutely. The United Nations High Commissioner for Refugees (UNHCR) (2021) estimates that approximately 13.2% of the Somali national population have fled Somalia due to conflict, climate shocks, and resulting widespread poverty, and it is estimated that between 21,000 (Jinnah, 2017) and 32,000 (Alfaro-Velcamp, 2017) have settled in South Africa. Meanwhile, of the estimated 800,000 Congolese who have fled abroad (Gusman, 2018), many have crossed into South Africa with the help of smugglers commonly known as *Tindikeurs* (Tshimpaka and Inaka, 2020). Although there is little documentation on the migration of Congolese (Steinberg, 2005, p. 1), it is estimated that about 60,000 Congolese citizens live as asylum seekers and refugees in South Africa (Alfaro-Velcamp, 2017).

Somali and Congolese communities are not homogenous and both groups are diverse in terms of religions, ethnicity, gender, sexual orientation, region of origin, age groups, and periods of arrival, which impact ways in which they settle and live in South Africa. However, despite these differences, most Congolese and Somalis are concentrated in certain inner-city urban spaces. Somalis tend to gravitate toward the suburb of Mayfair in Johannesburg, commonly referred to as "*Little Mogadishu*" (Jinnah, 2010), while many Congolese live in Yeoville, an inner-city fringe suburb of Johannesburg with a public market nicknamed "*Gambela*" in reference to one of the popular markets in Kinshasa.

For both, Congolese and Somalis, the precarious processes of migration, settling, creating social ties, and attempting to make a new life are reflected in the renaming of these areas in which they live: "*Little Mogadishu*" and "*Gambela*". While such challenges are faced by different migrant groups across South Africa, these particular spaces mark the role and establishment of communities in South Africa while also demarcating their difference—and alienation—from surrounding society. Both groups tend to engage in a variety of businesses such as owning *spaza* shops (small retail outlets selling household necessities); clothing shops, restaurants, internet and telephone shops; and some engage in informal trade as "hawkers" selling goods on the streets. The majority of this work is precarious but when going well can pay rent, school fees, and support basic needs.

Denied documentation as a tactic of alienation

Documents—particularly legal state documents like visas and permits—have been increasingly recognized as enabling a sense of security, legitimacy and, accessing services (Willen, 2012; Cooper-Knock and Owen, 2018). Central to "the relationship between people and papers" (Tarlo, 2001, p. 87), state documents are embedded in the micro-politics of everyday life in South Africa. As Freeman and Maybin point out, "documents tell stories…because they embody the political processes by which they were produced" (Freeman and Maybin, 2011, p. 11). For asylum seekers and refugees, the status of documents—whether one is "documented," waiting for documents, or deemed "illegal" due to a lack of documents—can communicate a sense of security, safety, belonging, and/or alienation. We lay out the situation of documentation in the country and how this affects the lives of our informants.

Without documentation and a means to regulate their stay in South Africa, asylum seekers and refugees are excluded from participating further in everyday life and taking steps toward better security and wellbeing. For Congolese and Somalis in South Africa, as with many other migrants, documentation lies at the center of almost every challenge faced and is one of the most reported obstacles relating to daily living such as poverty, barriers to healthcare, education and employment opportunities. This produces a strong sense of alienation (Amit and Kriger, 2014; Schockaert et al., 2020).

Barriers to accessing documentation can be traced directly to South Africa's Department of Home Affairs (DHA) and its system which (often intentionally) presents non-nationals with numerous barriers to accessing legal permits (Amit and Kriger, 2014; Amit, 2015; Alfaro-Velcamp, 2017) and undermines efforts of regularization and integration.[6] The DHA is rife with bureaucratic

5 Section 27 of the Constitution provides that everyone has the right to access healthcare services, including reproductive health. Section 4 of the National Health Act provides that the state must provide pregnant and lactating women and children under six, except members of medical aid schemes and their dependents, with free healthcare (The Republic of South Africa, 2003; South Africa, South Africa, and Department of Justice and Constitutional Development, 2015).

6 The COVID-19 pandemic exacerbated the crisis of documentation. The closure of the Refugee Reception Offices (RROs) as part of the lockdown

inefficiency and corruption and asylum cases are faced with years-long backlogs with lengthy appeals. In fact, the rejection rate reached as high as 96 percent for all asylum cases in 2019 (Amit, 2015; Schockaert et al., 2020; Moyo, 2021). The majority who apply are left in states of limbo for years, unable to move their cases forward or find out their status due to a DHA crippled by corruption, poor management, and an increasingly restrictive and securitized approach toward migration (Amit, 2015; Landau, 2017; Gandar, 2019).

Even when refugee status or other documentation is regularized, refugees, and other migrants find their permits contested and rights to employment, health, and education denied. Police harassment is also frequent (Crush and Tawodzera, 2017; Walker, 2021; Walker and Vearey, 2022). While those who remain undocumented face multiple forms of discrimination, insecurity, and threat, even those with documents do not experience security and stability. The efforts of *dis*integration effectively criminalizes all asylum seekers and refugees regardless of their status of documentation. In this way the mere identity of being an African or Asian, cross-border migrant, asylum seeker, or refugee of lower economic status renders one an alien.

Ovidy, a Somali man interviewed in Mayfair in Johannesburg, describes how documents alienate and impact asylum seekers who have not managed to regulate their documentation:

> *The people who are facing challenges are the asylum-seekers. Refugees have their documents, if they know their language they can fix their problems, but those who cannot fix their problems are the asylum-seekers because asylum-seekers don't have IDs. That ID allows a person to register a business, allows them to go to a hospital, allows the right for business or cars. So, the asylum-seekers are those who are facing problems. The refugees are better than the asylum-seekers (Interview Ovidy, Somali man, Oct 2021).*

This quote illustrates the challenges faced even when in possession of an asylum-seeking permit—due to its temporary and impermanent nature. Asylum permits must be renewed every 3–6 months, often involving a lengthy and expensive process for asylum seekers as they have to travel to the Refugee Reception Offices, spend hours- even days queuing and routinely leave without having completed their renewal. In most cases, employers are reluctant to hire asylum seekers for these reasons and may even dispute the validity of the documents claiming that asylum seekers cannot legally work in the country.

Bomba, a Congolese man, explains these challenges further:

> *Refugees and asylum seekers are made illegal not because they themselves want to, but the system does not allow them to keep the document up to date for a longer or shorter time. Sometimes the documents we have whether refugee status or asylum seeker permits are rejected especially when you apply for a job. The employer's requirement is that you must only possess a green ID. Document issue is very complex in South Africa (Interview Bomba [Congolese man], October 2021).*

The precarity and uncertainty for those without (regularized) documents means increased exposure to discrimination and exclusion. Located at the core of "acts of alienation" to asylum seekers and refugees, to be rendered "alien" in this way significantly impacts wellbeing and mental health.

This is captured most starkly in the following statement by a woman whom, since her arrival in South Africa in 2002, has not been granted refugee status and faces consistent difficulties in renewing her temporary permit:

> *In any case for the documentation, I cry morning, noon and night and I am not the only one in this situation... Recently, I went to Home Affairs, and they confiscated my document on the grounds that my file had never been found since I arrived in this country in 2002. They asked me to start afresh with a new file. I had to give R1700 to this officer to help me. I cried because I didn't have that money. . . . . I finally gave him R1000, and he gave me a three months extension. When these months expired, I went back to the Home Affairs, and they asked me for R2000 to renew my permit. As I had no money, they refused to help me, and I never went back until COVID-19 started. I did the online renewal for myself and my child. My paper was renewed but my child's paper has not been renewed until now. They only returned us to the 3 months or 6 months permits (Interview Jane, November 2021).*

This emotive response demonstrates the extent of powerlessness enforced on migrants as the attempt to access documentation as a means to increase and improve their security and integration in South Africa. The extent of the callousness of these policies and practices of exclusion is matched by the extent of distress expressed by Jane and the subsequent deep feelings of alienation. This next section explores these complex feelings of alienation amongst migrants and refugees in Johannesburg further through the key spheres of gender roles, family, and faith.

Feelings of alienation

> *When a bad thing happens here then you are better only when you are home. So, you miss home especially when bad things like violence happen. When you have the ID, you go to hospitals or somewhere, instead of being treated the same way, you are treated otherwise, you know. On those occasion, you will feel like down, and you miss home, sweet home (Interview Pedro [Congolese man], Sept. 2021).*

Pedro, a Congolese man described his feeling of marginalization, exclusion, and rejection—with being "treated otherwise" as a key indicator of the entrenched sense of alienation. This alienation is often in relation to "bad things" or distressing experiences that happen in different areas of their lives. The experiences shared by Congolese and Somali migrants, like Pedro

regulations, meant that foreign nationals could not apply or renew refugee permits, asylum permits, and residence permits during the pandemic.

highlight alienation as a result of acute levels of desperation due to poverty, unemployment, and poor mental health. As the above quote suggests, the absence of a sense of security, integration, and belonging increases a sense of alienation and with this, the desire and longing to return "home" also intensifies. In the following, we consider alienation in relation to the shaping of gender roles, and family relations, and religious and faith communities.

Alienation and gender roles

Holding social esteem in one's family and social networks is closely tied to gender expectations around finances. What follows are excerpts of stories shared by the Congolese and Somali migrants we spoke with about the effects that alienation from gender roles have on peoples' relationships and sense of achievement. While understandings and expectations around gender are not wholly homogenous in any society or community, amongst many Congolese and Somalis the traditional cultural ideas of gender continue to identify men as the providers and breadwinner for women who stay at home and care for children (Lwambo, 2013; Johnson-Agbakwu et al., 2014; Perrin et al., 2019; Mulumeoderhwa, 2022). For these communities living in South Africa—not being able to adhere to these traditional roles and the alienation of men from secure employment can have a significant impact on their wellbeing and mental health.

According to Jinnah (2016), many migrants possess desired skills in the professions that are scarce in South Africa (Crush and Peberdy, 2018). However, the majority are unable to use their skills due to a lack of employment opportunities and their documentation status, which prevents entry into the formal economy of work. As a result, many end up working within the informal economy—a broad and diverse space where different trades and skills can be utilized—but also lacking in financial security and protection from workplace dangers and exploitation (Khan and Lee, 2018; Schockaert et al., 2020).

The narration by a Congolese woman of how she had to "force" her husband, a skilled graduate, to join a security company for the family's survival reflects this difficult situation in which many find themselves:

> *My husband is a university graduate but does not work. Since he came to this country, he only uses the asylum seeker permit. Even I, who arrived after him, already was granted refugee status. At first, he didn't want to be employed as a security guard because he thought that job was humiliating and not commensurate with his skills, and moreover he was discouraged by the low pay, but since I forced him, he finally accepted to do it for the survival of the family (Interview Amelia, a Congolese woman, Nov. 2021).*

In capturing the challenge of finding work and the sense of "humiliation" faced by a university graduate working in a low-skilled job, this quote speaks to the way in which gender roles are undermined and enforce a sense of alienation from status, family role, and self.

This also links back to the role of documentation. The temporary nature of asylum permits not only limit or prevent access to skilled and educated migrants accessing skilled employment but are also a part of specific policies and practices of exclusion and disintegration (Collyer et al., 2020).

Participants in the study shared accounts of a perceived loss of economic power by men due to unemployment or employment in "unskilled" positions and how this impacted gender norms in their households. This was also influenced by the pandemic whereby many breadwinners suffered a loss of employment without a social safety net (as initially migrants were excluded from the support grants provided by the state at this time). In some instances, women took over the breadwinning role as they found ways of making an income, and this further affected men's sense of their gender role and responsibility.

However, some participants also pointed out that women's new leadership roles challenging the traditional division of labor did not necessarily improve their status within the families or in the society. As a result, rather than seeing this change of roles as positive, some women also considered it disrupting their own understandings of gender roles (Chesley, 2017).

As a result of these cultural shifts through a lack of secure employment and status, some participants also reported tensions between couples and in some cases domestic violence. This was described as a result of men feeling "belittled" or "threatened" and therefore seeking to "reassert" control in some way. Reports from participants referred to women facing violence in their homes and communities and others being rejected and shunned:

> *My partner used to insult me profusely in front of the children and even the landlord. He would always come home drunk and start abusing me. Our son was very affected by our daily quarrels and started accusing us at school. When the child woke up at five o'clock to get ready for school, that's when Dad would start with his insults toward me. We used to fight a lot and sometimes he would come and destroy the staff (sic) I was selling* (Pinky, Congolese woman, Nov. 2021).

This quote by Pinky illustrates the violence emerging from a context of socio-economic alienation triggering rapid changes in gendered roles which permeates through families and communities. One young Somali pointed out that this has been a particular issue for many young couples:

> *We got a problem as Somalis around here, we have youths and some couples who are homeless because of COVID, and some men resort to drug abuse, and it has resulted in fighting among young couples as to who should provide for the family to survive and that is an important matter that our elders are concerned with (Interview Taiwo, a Somali youth, Oct 2021).*

Like violence, the use of drugs by men to numb the emotional and psychological burden can be related to the restrictions on their ability to provide and take care of the needs of their families as well as remitting in their home countries. This "crisis" in gender roles, which can be seen in different ways as disruptive, can result in a sense of economic disempowerment and marks another form of alienation.

Alienation from family

Congolese and Somali migrants in this study also reflected on the disruption of family ties and on a sense of familiarity due to their precarious status and the ongoing risks they face in South Africa. While physically away from their loved ones, many Congolese and Somalis seek to remain connected to those in the home country in various ways including through customs and rituals (marriages, funerals, and other key events) as well as giving and receiving financial support. This section illuminates the importance of families for mobilizing care, the anguish of missing out on giving and receiving care, and the psychological safety and the complexity of emotions people feel around familial care obligations.

For Somali and Congolese refugees in South Africa, the support of the family is valuable and expected, even in very desperate situations across multiple borders. However, when unable to give care, this causes acute feelings of alienation and pain. Hawy, a Somali man described the impact of not being able to travel and attend funerals for loved ones on his mental health:

> *Yes, I am a sad man and in pain because I miss my mother. Since I came here in 2004, my father and my brothers passed away, I could not attend their burial. It is because I do not have proper papers (documents) to travel back home or to nearby countries such as Kenya or Tanzania to at least meet with my relatives. But when I see the news, I see that there is a lot of fighting from when I left there and there is a lot of blood coming from my home. But I miss my home a lot (Interview Hawy, Somali man, Oct 2021).*

The line "there is a lot of blood coming from my home" powerfully captures the sense of fear and loss which is entangled with the sense of alienation—from home, from loved ones, and from life and death. Hawy's experience also reflects the alienating significance of the huge geographic distance between South Africa and Somalia and DRC. Crossing multiple borders is costly, exhausting, and distressing, which makes the logistics of visiting family left behind extremely difficult, especially due to the state's acts of alienation and marginalization of migrants. In the quote below, Rafiq also demonstrates his ongoing anguish after missing out on the end-of-life care of his mother who lived in Kenya:

> *So, for the past 2 years I was trying to go to Kenya because my mother was sick but because of COVID-19 lockdown I could not, she passed away while I was trying. It was traumatic and still it's troubling me…Sometimes I want to sleep but I cannot, thinking and worrying all night and when day comes, I will not function properly, I only have my Somali elders and community who keeps comforting me" (Interview Rafiq, A Somali man, Nov, 2021).*

While the loss of a loved one leads to intense grief for family members, the ability to witness and go through the rituals and procedures of burial are critical for feeling connected and supported. As the quotes above highlights, migrants who are already disconnected from their families are devastated for being unable to participate in a burial and important stages of grieving through connection. Not taking part in burial and care rituals enforces a stronger feeling of isolation and disconnection from familiarity and customs resulting in poor mental health and existential alienation.

For Congolese and Somali migrants, there are complex obligations and feelings toward giving and receiving care. Sending money or gifts is another way migrants seek to connect to their loved ones in the home country, especially across such great distances. For many, the fulfillment of migration dreams is made possible by the concerted support of family members, and the resultant status and esteem that comes from this (Kihato, 2013; Dzingirai et al., 2014). Hence, for these migrants, sending money from abroad not only means keeping connections in the home country, but also means expressing appreciation and gratitude to the relatives who supported this project. Often migrants are viewed by their families as problem solvers (Torres and Casey, 2017; Lakika, 2020). While such responsibilities increase the pressure to maintain contact and familial ties, many of the participants described wanting to reduce or cut contacts due to fear of their precarious life being exposed. Unemployed, unable to earn a living and provide were all seen as a form of embarrassment and as negatively impacting family and social ties. This leads to increased isolation and alienation, contributing to poor mental health. Salamaleko, a Somali man, expressed this dilemma below:

> *Sometimes you prefer not to bother your family members back home when you have problems here in South Africa, but as a human being you have to think about all of this. About your friends and the problems, they can face, your family members about how you can be there for them, although it's very difficult and how you can be there for yourself and your prosperity. A person should worry… (Interview Salamaleko, Somali man, Nov 2021).*

A Congolese woman explained that after spending many years in South Africa, she was never able to provide for her parents, which is a key responsibility of the first-born of the family. This left her feeling disappointed in herself and anxious about how this is seen by her family too.

> *After 18 years in this country, I see that I have gone backwards a lot. I have nothing and I suffer too much. My little brothers and sisters who went to Europe have made a lot of progress and support our parents. However, I do not do anything if something happens in the family. My mother often calls me to tell me that my father is sick and as the firstborn I do absolutely nothing. My mother tells me that she always prays that my father will not die before I do something for him because I am the eldest. When she talks to me like that, I always feel pain and I have trouble sleeping. But she encourages me by always telling me to stop worrying that God will help me (Interview Julia, a Congolese woman, Nov. 2021).*

This quote speaks to the woman's sense of alienation resulting from her inability as the first-born to meet expectations to financially participate in family matters. Being physically absent from the family, she thought she could maintain contact through providing when the family faced hardship. However, her

marginalization in South Africa has prevented this and disrupted important family structures and norms. As the eldest sibling, Julia is unable to support her younger siblings, leading to a loss of status in the family and feelings of inadequacy and isolation.

At the same time, Congolese and Somali participants also described being on the receiving end of family care and support in times of need. Unlike Salamaleko and Julia's experiences, others reported unconditional support from their families even when they failed to remit. In fact, in some cases families understood and encouraged them as one Somali woman indicated:

> *You came from a family then if you have a problem, you go straight to the family. The most important thing why I speak to my parents mostly is because they are the ones who brought me up and helped me to learn something in this world and they are the people who always help and make me happy when I speak to them even if I don't give them anything (Interview Amigos, Somali woman, Nov 2021).*

That her contact with her family "makes her happy" is notable in that it is a stark difference to the alienation from family that most of our participants describe. This is also shown in the experiences of Nadia, a Congolese woman whom despite being unable to send money to her family during her 18 years in South Africa, she has continued to receive financial support from her brothers and sisters in Europe. She has also felt encouragement from her mother in the Congo.

> *My brothers and sisters who live in Europe are the ones who always help me. Whenever I face financial challenges in terms of paying rent or school fees for my child, they always assist me financially. It pains me to be always dependent on them. I told them I wanted to go back to the DRC, but all of them, including my parents refused; they kept on encouraging me to remain here. If they were not there, I could become crazy because life is not easy in this country (Interview Nadia, a Congolese woman, Nov. 2021).*

These comments demonstrate an internal dissonance in Nadia's emotions from gift giving and receiving. Her family is a lifeline that she requires to survive in South Africa, yet this also contributes to a sense of guilt that she does not reciprocate the care expectations. Furthermore, her quote also illuminates the tensions that often exists between Congolese migrants and their families about the decision to return to the country of origin. As migration is often considered a source of investment and enrichment, advising their loved ones to return home after failing to achieve their migration objectives has often been the last option that families back home have ever thought about. In the case of Congolese, families often encouraged their loved ones abroad to remain there even amidst alienation and precariousness. The failure of a migratory project has often been a source of shame and frustration, not only for the migrants but also for the whole family. Sometimes people would discourage their loved ones abroad from returning to the country arguing that their precarious situation in the receiving country is better than the economic downturn of the DRC. This section highlights the complexity with which social relations operate across space. Families separated by migration and displacement stay connected through giving, yet even if the support reduces economic strife, when the gifts go unreturned alienation feelings are exacerbated.

Alienation and religious faith

Throughout the course of fieldwork, religion and faith were identified both as central resources and key sources of hope, which at times also enforced a sense of alienation.

In terms of hope, participants in both communities reported that when faced with uncertainty, their faith provided a source of strength. A Somali woman, for example, explained how the mosque was a place and source of comfort in times of loneliness—and alienation:

> *I mostly went to the Mosque and then there is a whole Mass that they are doing for, like, Islamic studies. That is the best things for me, always, to cure my heart or to cure my loneliness. If I remain alone in one place, I will be crazy" (Interview Mother J, a Somali woman. Nov 2021).*

This quote speaks to how alienation experienced as loneliness drives a need for connection and comfort—which is found spiritually through Islam and experienced literally in the routine of attending mass at the Mosque. A Congolese participant also reported prayer as a means of coping with difficult situations in South Africa.

> *Yes, I do pray. I nourish myself with hope and work on plan B, plan C so that my family doesn't fall victim of this violence. Yeah, the first thing, I pray, I nourish myself with faith and hope. I believe that if I pray, God can protect me and the rest of my family. At the same time one can ask for God's guidance about what to do so that one's family may not be a victim (Interview Pedro [Congolese man], Sept 2021).*

Pedro's reflections demonstrate the importance of prayer for him in addressing or alleviating the uncertainties of life in contemporary South Africa. Accordingly, participants also pointed to the role of faith-based organizations where Congolese and Somalis in South Africa seek support. Jinnah (2017) has highlighted the Somali religious solidarity support which their community members received. Congolese citizens often seek care from the countless Pentecostal churches in South Africa which originate from the DRC. These churches' teachings force their members to "say no" to stress which they believed was not godly. A female participant who belonged to one of the churches stated:

> *The church teaches us that stress is not good for the children of God. We must try by all means to avoid it. That's why when it affects me, I come back to what the church says that stress is not good for the God's children, especially committing suicide is strictly forbidden by the bible. If you commit suicide, you are going straight to hellfire. So, pastors always warn us that stress is evil and that we must avoid it. That's why I have become cautious, whether I have or not I always minimize stress (Interview Alice, a Congolese woman, Nov. 2021).*

Where a body of research has highlighted ways in which the church has played a key role in helping cross-border migrants to deal with their violent experiences and adversity in the host society, it is also evident that the emphasis on prayer and healing and interpretation of stress and mental health can be limited in addressing the challenges migrants face (Sommers, 2001).

Some participants, reflected on the nuances of religion and faith. They identified that religious communities are not always a direct response and answer to suffering and referred to the need for more concrete and sustainable responses, especially to acute socio-economic needs. As one of the female Congolese participants explained,

> *That one whether you like it or not will affect you. Right now, I've got nothing to eat while my children want to eat, but I don't have. You know that we are approaching the end of the month, like me I have to pay rent on the second, but until now I don't know how to start and where the money will come from. In this condition, whether you like it or not you will be stressed even if you have God. Somehow, we think, and God has given us knowledge and a brain to think. You will always think, you know. You feel like you want to break down, but you say God, support me (Interview Jane, a Congolese woman, September 2021).*

Our participant shows her recognition of the complex and challenging situations that she faces—which she feels require more than simply prayer. As she notes, God has given them "knowledge and brain to think" about how to improve their conditions, but the socio-economic deprivation experienced in South Africa is a psychological burden that needs a different response. This point is important not only in highlighting the multiple ways in which care can be sought—often simultaneously—but also that these strategies are shaped and textured by the changing socio-political context in South Africa.

Participants also noted that religious leaders sometime take financial advantage of followers—particularly women in need of spiritual guidance and support. Others noted that pastors were less concerned about the challenges their congregants faced, but rather drew from "prosperity gospel" principles, insisting on money through the parable of "sowing a seed" as one participant explained.

> *When the pastor is asking too much which I don't have, it stresses me too much. I, myself, still struggle to meet my own needs and those of my family, but the pastor doesn't care. He only pesters me to give money. It becomes another source of stress. We don't receive any support from the church. Even if I have a problem the church doesn't do anything to assist me (Interview Emma, a Congolese woman, Nov. 2021).*

This quote illuminates the complexity the care and demands come with religious institutions in South Africa. In seeking support from the church, they are confronted with another reality in which the church turns solace into stress, which is further fueled by pressure for money and other demands. Emma points out a conflictual situation in which the members struggle to make ends meet while the pastor betters his own financial position to the detriment of his congregants. The participant expressed concern not only about the level of financial exploitation here but about what this meant for them in terms of fulfilling their perceived financial obligations to the church—a symbol of their commitment to the church. As a response, she underlined that the church's response to the challenges people face cannot only be based on prayer and contributions from congregants, they must also take heed of their socio-economic needs. This points to the alienation felt when seeking community, purpose, and comfort and instead finding judgement and exploitation.

Therefore, while many acknowledge the support of the church in dealing with their ever-present stress, others (particularly Congolese participants) also identified a negative impact religious social connections have due to judgment, labeling, suspicions, and different interpretations of what people are going through. Many individuals described states of pervasive precarity and desperation as leading to a sense of general suffering—resulting in people feeling unable and/or unwilling to support one another, or what Omata (2017) calls "shared destitution." This links directly to the subjective experience of alienation—of being cut off from ties or threads of security and solace—even when the expressed intention is otherwise. For some participants, the practices within religious institutions and spaces—that ostensibly intend to provide support and community—can actually increase a sense of alienation both physically and existentially.

Conclusion

This article explores the link between migration and alienation with the impact on the mental wellbeing of Congolese and Somali asylum seekers and refugees in South Africa. We document and explore the various ways alienation is both imposed upon and experienced by these migrant groups. As we have shown, systemic disintegration, or acts of alienation, are the deliberate and active policies and practices in South Africa that are instrumental in excluding asylum seekers and refugees from accessing basic services and employment while in turn impacting their mental health and wellbeing. This study's findings show that like many asylum seekers and refugees, Congolese and Somalis' face many obstacles which affect aspirations for a better life and increase their experience of being othered in South Africa. In other words, the state and society in South Africa actively impede possibilities of integration and care. However, specific to the Congolese and Somali communities are the spaces in which they live and work; "*Little Mogadishu*" and "*Gambela*" offer to some extent a sense of community and connection, yet on the other hand set the communities apart and increase the sense of alienation.

The article shows how several intersecting issues—accessing documentation; the breakdown of familiar routines; customs, and family ties; extreme poverty and socio-economic marginalization caused by the lack of decent employment—converge to trigger trauma, frustration, and ultimately pose a serious burden to the mental health of migrant populations. While conceptualizations and metrics of integration put forth by Ager and Strang (2008) may capture the fallout of disintegration, such as access to livelihoods, housing, education, and healthcare, it does not adequately assess the profound damage that acts of alienation does to the crucial relationships and psyches of innumerable migrants in South Africa.

This pain, or feelings of alienation, we argue, is a crucial aspect to our understanding of alienation.

In the absence of formal mental health care, migrants seek and provide alternative social connections for care. While religion, family and community support are looked to as ways of seeking help for poor mental health, these areas are also identified as creating greater burdens and stress, deepening feelings of alienation. The paper also shows how Congolese and Somalis' efforts to navigate structural challenges by adopting alternative means of survival can sometimes lead to an increased sense of isolation and alienation which one participant expressed in these words, "When a bad thing happens…you are better only when you are home."

Data availability statement

The original contributions presented in the study are included in the article/supplementary material, further inquiries can be directed to the corresponding author.

Ethics statement

The studies involving human participants were reviewed and approved by the University of Edinburgh Research Ethics Committee and the University and the Human Research Ethics Committee of the University of the Witwatersrand. Informed consent was obtained from the participants for both participation in the research and for the publication of potentially/indirectly identifiable information. The consent was documented within the digital recordings. All names used in the article are pseudonyms to protect identities.

Author contributions

RW: Conceptualization, Data curation, Formal analysis, Investigation, Methodology, Project administration, Supervision, Writing—original draft, Writing—review & editing. DL: Conceptualization, Data curation, Formal analysis, Investigation, Methodology, Project administration, Writing—original draft, Writing—review & editing. TM: Conceptualization, Data curation, Formal Analysis, Investigation, Methodology, Project administration, Writing— original draft, Writing—review & editing. CB: Conceptualization, Writing—original draft, Writing—review & editing.

Funding

The author(s) declare financial support was received for the research, authorship, and/or publication of this article. This project is publicly-funded academic research, supported by a grant (reference No. ES/T004479/1) from the UK Economic and Social Research Council (ESRC) via the Global Challenges Research Fund (GCRF) Development-based approaches to Protracted Displacement scheme.

Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Publisher's note

All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.

References

African National Congress (2022). *Migrant issues, opening of refugee offices, statelessness: stakeholder engagement, with Ministry; Electoral Amendment Bill: summary of public input | PMG*. Available online at: https://pmg.org.za/committee-meeting/35586/ (accessed July 13, 2023).

Ager, A., and Strang, A. (2008). Understanding integration: a conceptual framework. *J. Refugee Stud.* 21, 166–191. doi: 10.1093/jrs/fen016

Alfaro-Velcamp, T. (2017). "Don't send your sick here to be treated, our own people need it more": immigrants' access to healthcare in South Africa. *Int. J. Migr. Health Soc. Care.* 13, 53–68. doi: 10.1108/IJMHSC-04-2015-0012

Amit, R. (2015). *Queue here for corruption: measuring irregularities in South Africa's asylum system*. Lawyers for Human Rights and the African Centre for Migration and Society Report.

Amit, R., and Kriger, N. (2014). Making migrants' il-legible': the policies and practices of documentation in post-apartheid South Africa. *Kronos* 40, 269–290.

Amnesty International (2018). Refugees, Asylum Seekers and Migrants - Amnesty International. Available online at: https://www.amnesty.org/en/what-we-do/refugees-asylum-seekers-and-migrants/ (accessed July 13, 2023).

Burns, J. K. (2015). Poverty, inequality and a political economy of mental health. *Epidemiol. Psychiatr. Sci.* 24, 107–113. doi: 10.1017/S2045796015000086

Chesley, N. (2017). What does it mean to be a "breadwinner" mother? *J. Family Issues* 38, 2594–2619. doi: 10.1177/0192513X16676857

Collyer, M., Hinger, S., and Schweitzer, R. (2020). "Politics of (dis)integration–an introduction," in *Politics of (dis)integration* 1–18. doi: 10.1007/978-3-030-25089-8_1

Cooper-Knock, S., and Owen, O. (2018). Government paper: the negotiated production and life of state documents. *Canad. J. African Stud.* 52, 269–287. doi: 10.1080/00083968.2018.1546601

Crush, J., and Peberdy, S. (2018). *Criminal Tendencies: Immigrants and Illegality in South Africa, Africa Portal*. Southern African Migration Programme (SAMP). Available online at: https://www.africaportal.org/publications/criminal-tendencies-immigrants-and-illegality-south-africa/ (accessed May 31, 2023).

Crush, J., and Tawodzera, G. (2017). *Living with Xenophobia: Zimbabwean Informal Enterprise in South Africa*. The Cape town: Southern African Migration Programme. doi: 10.2307/j.ctvh8r19b

Docrat, S., Besada, D., Cleary, S., Daviaud, E., and Lund, C. (2019a). Mental health system costs, resources and constraints in South Africa: a national survey. *Health Policy Plan.* 34, 706–719. doi: 10.1093/heapol/czz085

Docrat, S., Lund, C., and Chisholm, D. (2019b). Sustainable financing options for mental health care in South Africa: findings from a situation analysis and key

informant interviews. *Int. J. Mental Health Syst.* 13, 1–11. doi: 10.1186/s13033-019-0260-4

Dzingirai, V., Mutopu, P., and Landau, L. B. (2014). *Confirmations, coffins and corn: Kinship, social networks and remittances from South Africa to Zimbabwe*. University of Sussex Sussex.

Freeman, R., and Maybin, J. (2011). Documents, practices and policy. *Evid. Policy.* 7, 155–170. doi: 10.1332/174426411X579207

Gandar, S. (2019). *They treated me as if I was nothing': Research report on the gendered impact of the decision to close the Cape Town Refugee Reception Office.*

Gürkan, H. (2017). Transnational life: where'd I be happy? A research on the films of immigrant directors from Turkey living in Austria. *Cinej Cinema J.* 6, 6–31. doi: 10.5195/cinej.2017.159

Gusman, A. (2018). Stuck in kampala. witchcraft attacks, "blocages" and immobility in the experience of born-again congolese refugees in Uganda. *Cahiers d'études Afric.* 231, 793–815. doi: 10.4000/etudesafricaines.22554

Hassim, S., Kupe T., Worby E. (2008). *Go home or die here: violence, xenophobia and the reinvention of difference in South Africa*. Wits University Press. Available online at: https://www.cambridge.org/core/books/go-home-or-die-here/5F22AA08AAE0A63650D0947AD13A28AC (accessed July, 2023).

Jinnah, Z. (2010). Making home in a hostile land: Understanding Somali identity, integration, livelihood and risks in Johannesburg. *J. Sociol. Soc. Anthropol.* 1, 91–99. doi: 10.1080/09766634.2010.11885542

Jinnah, Z. (2016). "Rational routes? Understanding Somali migration to South Africa," in *Mobility and Migration Choices* (London: Routledge), 61–72. doi: 10.4324/9781315595740-12

Jinnah, Z. (2017). "Cultural causations and expressions of distress: a case study of buufis amongst Somalis in Johannesburg," in *Urban Forum* (Springer), 111–123. doi: 10.1007/s12132-016-9283-y

Johnson-Agbakwu, C. E., Helm T., Killawi A., Padela A. I. (2014). Perceptions of obstetrical interventions and female genital cutting: insights of men in a Somali refugee community. *Ethn. Health* 19, 440–457. doi: 10.1080/13557858.2013.828829

Khan, F., and Lee, M. (2018). Policy shifts in the asylum process in South Africa resulting in hidden refugees and asylum seekers. *Afr. Hum. Mobil. Rev.* 4, 1205. doi: 10.14426/ahmr.v4i2

Khan, M. A. (2021). Identity and victimization of the Muslims in America: a literary study'. *J. Dev. Soc. Sci.* 2, 1063–1078. doi: 10.47205/jdss.2021(2-IV)84

Kihato, C. (2013). *Migrant Women of Johannesburg: Everyday Life in an in-Between City*. Cham: Springer. doi: 10.1057/9781137299970

Lakika, D. (2020). *African Migrants' Remittance: An Avenue of Giving and Receiving Severely Disrupted during the Covid-19 Lockdown'.*

Landau, L. B. (2017). Southern urbanism, legalization, and the limits of migration law. *Am. J. Int. Law* 111, 165–171. doi: 10.1017/aju.2017.39

Lwambo, D. (2013). "Before the war, I was a man": men and masculinities in the Eastern Democratic Republic of Congo. *Gender Dev.* 21, 47–66. doi: 10.1080/13552074.2013.769771

Makandwa, T., and Vearey, J. (2017). "Giving birth in a foreign land: exploring the maternal healthcare experiences of zimbabwean migrant women living in johannesburg, South Africa," in *Urban Forum* (Springer Netherlands), 1–16. doi: 10.1007/s12132-017-9304-5

Misago, J. P. (2019). Political mobilisation as the trigger of xenophobic violence in post-apartheid South Africa. *Int. J. Conflict Viol.* 13, a646–a646. doi: 10.4119/ijcv-3118

Misago, J. P., Freemantle, I., and Landau, L. B. (2015). *Protection from Xenophobia. An Evaluation of UNHCR's Regional Office for Southern Africa's Xenophobia Related Programmes*. Geneva: UNHCR.

Moyo, K. (2021). *South Africa Reckons with Its Status as a Top Immigration Destination, Apartheid History, and Economic Challenges*. Available online at: https://www.migrationpolicy.org/article/south-africa-immigration-destination-history (accessed October 11, 2023).

Mulumeoderhwa, M. (2022). "A woman's degree must end in the kitchen": expectations of women in the eastern democratic republic of congo. *J. Family Issues* 43, 1190–1218. doi: 10.1177/0192513X211022398

Mutambara, V. M., Crankshaw, T. L., and Freedman, J. (2022). Assessing the impacts of COVID-19 on women refugees in South Africa. *J. Refugee Stud.* 35, 704–721. doi: 10.1093/jrs/feab044

Ogunnubi, O., and Aja, U. A. (2022). Citizen diplomacy in nigeria-South Africa relation: confronting the paradox of xenophobia. *J. Ethnic Cult. Stud.* 9, 133–151. doi: 10.29333/ejecs/1018

Oliveira, E., and Walker, R. (2021). *OP-ED: No country for poor people: South African government must act on its motto ofsaving lives and protecting livelihoods*. Daily Maverick. Available online at: https://www.dailymaverick.co.za/article/2021-03-24-no-country-for-poor-people-south-african-government-must-act-on-its-motto-of-saving-lives-and-protecting-livelihoods/ (accessed July 11, 2023).

Omata, N. (2017). *The Myth of Self-Reliance: Economic Lives Inside a Liberian Refugee Camp*. Berlin: Berghahn Books. doi: 10.2307/j.ctvw04cnz

Palmary, I., Hamber, B., and Nunez, L. (2014a). *Healing and Change in the City of Gold: Case Studies of Coping and Support in Johannesburg*. New York: Springer. doi: 10.1007/978-3-319-08768-9

Palmary, I., Rauch, J., and Simpson, G. (2014b). "Violent crime in Johannesburg," in *Emerging Johannesburg* (London: Routledge), 117–138.

Perrin, N., Marsh, M., Clough, A., Desgroppes, A., Phanuel, C. Y., Abdi, A., et al. (2019). Social norms and beliefs about gender based violence scale: a measure for use with gender based violence prevention programs in low-resource and humanitarian settings. *Conflict Health* 13, 6. doi: 10.1186/s13031-019-0189-x

SACAP (2019). *How Social And Emotional Learning Can Transform Classrooms - SACAP*. Available online at: https://www.sacap.edu.za/blog/applied-psychology/social-emotional-learning/#:%7E:text=Social%20and%20emotional%20learning%20is,academic%2C%20social%20and%20emotional%20competence.andtext$=$These%20competencies%20%20are%3A%20Self%2DAwareness,Skills%20and%20Responsible%20Decision%2Dmaking (accessed July 13, 2023).

Schockaert, L., Venables, E., Gil-Bazo, M.-T., Barnwell, G., Gerstenhaberk, R., Whitehouse, K. (2020). Behind the scenes of South Africa's asylum procedure: a qualitative study on long-term asylum-seekers from the Democratic Republic of Congo. *Refugee Surv. Quart.* 39, 26–55. doi: 10.1093/rsq/hdz018

Scholten, P. (2020). Mainstreaming versus alienation: Conceptualising the role of complexity in migration and diversity policymaking. *J. Ethnic Migr. Stud.* 46, 108–126. doi: 10.1080/1369183X.2019.1625758

Seeman, M. (1959). On the meaning of alienation. *Am. Sociol. Rev.* 24, 783–791. doi: 10.2307/2088565

Sommers, M. (2001). *Fear in Bongoland: Burundi Refugees in Urban Tanzania*. Oxford: Berghahn Books.

South Africa, South Africa, and Department of Justice and Constitutional Development (2015). *The Constitution of the Republic of South Africa, 1996: as adopted on 8 May 1996 and amended on 11 October 1996 by the Constituent Assembly*.

Steinberg, J. (2005). A mixed reception: Mozambican and Congolese refugees in South Africa. *Instit. Secur. Stud. Monogr.* 2005, 45.

Tarlo, E. (2001). "Paper truths: The emergency and slum clearance through forgotten files," in *The Everyday State in Modern India,* eds. C. J. Fuller and V. Benei (London: C Hurst & Co Publishers Ltd.).

The Republic of South Africa (2003). *The Republic of South Africa National Health Act (No. 61 of 2003.).* Available online at: https://www.gov.za/sites/default/files/gcis_document/201409/a61-03.pdf (accessed July 25, 2022).

Torres, J. M., and Casey, J. A. (2017). The centrality of social ties to climate migration and mental health. *BMC Public Health* 17, 1–10. doi: 10.1186/s12889-017-4508-0

Tshimpaka, L. M., and Inaka, S.-J. (2020). "Long march to South Africa: The breaking of colonial borders through migrant smuggling of Congolese," in *Borders, Sociocultural Encounters and Contestations* (Routledge), 89–111. doi: 10.4324/9781003013747-8

Vearey, J. (2017). "Urban health in Johannesburg: migration, exclusion and inequality," in *Urban Forum* (Springer), 1–4. doi: 10.1007/s12132-017-9306-3

Vearey, J., de Gruchy, T., and Maple, N. (2021). Global health (security), immigration governance and Covid-19 in South (ern) Africa: an evolving research agenda. *J. Migr. Health* 3, 100040. doi: 10.1016/j.jmh.2021.100040

Vearey, J., Walker, R., Lakika, D., Makandwa, T., and Iturralde, D. (2022). *Scapegoating migrants in SA undermines progress on healthcare for all.* Available online at: https://www.dailymaverick.co.za/article/2022-09-06-scapegoating-migrants-in-sa-undermines-progress-on-healthcare-for-all/ (accessed July 15, 2023).

Walker, R. (2021). *Migration, Trauma and Wellbeing: Exploring the Impact of Violence within the Healthcare System on Refugee Women in South Africa*. Available online at: https://cap-press.com/books/isbn/9781531020316/Mobilities-of-Wellbeing (accessed July, 2023).

Walker, R., and Oliveira, E. (2020). A creative storytelling project with women migrants in johannesburg, South Africa. *Stud. Soc. Just.* 14, 188–209. doi: 10.26522/ssj.v2020i14.2218

Walker, R., and Vearey, J. (2022). "Let's manage the stressor today" exploring the mental health response to forced migrants in Johannesburg, South Africa. *Int. J. Migr. Health Soc. Care* 19, 1–15. doi: 10.1108/IJMHSC-11-2021-0103

Walker, R., Vearey, J., and Nencel, L. (2017). Negotiating the city: Exploring the intersecting vulnerabilities of non-national migrant mothers who sell sex in Johannesburg, South Africa. *Agenda* 31, 91–103. doi: 10.1080/10130950.2017.1338858

Willen, S. S. (2012). Migration, "illegality," and health: Mapping embodied vulnerability and debating health-related deservingness. *Soc. Sci. Med.* 74, 805–811. doi: 10.1016/j.socscimed.2011.10.041

Yang, T., Featherston, R., and Shlonsky, A. (2022). Exploring migrant mothers' experiences of alienation in association with parenting: A scoping review. *Child Family Soc. Work* 27, 567–582. doi: 10.1111/cfs.12904