

***The Minibus Taxi Industry, Public Health, and Passengers'
Pandemic Stories in Soweto***



Photo captured by Dineo Mtetwa

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Abstract

The minibus taxi industry has played a critical role in the mobility of South Africans for decades. Since the outbreak of the COVID-19 Virus, it has proven to play a role in the economic activities of the country, particularly transporting essential workers and consumers. Despite this importance, there is a significant gap in the literature about the experiences of passengers using taxis during a pandemic. This study hopes to contribute to filling this gap. It is a qualitative study that uses ethnography, semi-structured interviews, and taxi diaries as the main methods of data collection. My research found that passengers perceive the government's rapid increase of passenger capacity at the height of the COVID-19 pandemic as an act of support for the economic survival of the minibus taxi industry which put general public health concerns in second place. Passengers reported that high levels of non-compliance by taxi drivers and passengers make them susceptible to infection. Overall, the findings of this paper indicate that passengers' experiences of moving along the Khulu Township – Johannesburg route are shaped by decisions made by the government as well as the relationship that the minibus taxi industry has with the post-apartheid government of South Africa.

Keywords: Minibus taxi industry, Passengers, COVID-19, Government, Township, Soweto.

Abbreviations

COIDA	Compensation for Workplace Injuries, Diseases and Death
GDP	Gross Domestic Product
PPE	Personal Protective Equipment
RDP	Reconstruction and Development Programme
SANTACO	South African National Taxi Council
SDL	Skills Development Levy
TRP	Taxi Recapitalisation Programme
UIF	Unemployment Insurance Fund
UJ	University of Johannesburg
VAT	Value Added Tax
ZTA	Zenzele Taxi Association (pseudonym)

CHAPTER 1

*Jikeleza Idolobha!*¹

During the national lockdown in July 2020, I was sitting in the front seat of a minibus taxi and the driver was picking up passengers along the Khulu-Johannesburg route. Two of the passengers were not wearing masks and did not wear their masks even after getting on the taxi. Sitting on the front seat next to the driver means that I am responsible for making sure that I count the total fare of the taxi ride. A trip from Khulu² to Johannesburg costs R17.00, so the total fare should be R240.00 (R17.00 x 15 passengers). Unfortunately, the total on this trip was R224.00, suggesting that one person had not paid. *Ongakhokhanga akakhokhe manje before nginibuyisela erenkeni*³, shouts the taxi driver furiously. No one in the taxi responds. The driver repeats his statement, bangs on the steering wheel, and parks his vehicle on the side of the Soweto highway. *Ngithi khokha manje!*⁴ he adds, adamantly. *Ngiyaxolisa mkhwenyana, nayi imali yakho*⁵, says an old woman who sat behind the driver's seat. The driver accepts the money and proceeds with the trip.

Such incidents where the driver is harsh about the taxi fare during trips are common. Some passengers get on taxis knowing very well they will not or do not want to pay, while some, like the old lady, genuinely forget to pay. I asked the driver to sanitise my hands after I had completed counting the total taxi fare for that ride. He casually told me that it was empty and that he always forgets to throw away the empty bottle. The good news is that the bottle being empty indicates the possibility that it has been used is high. The bad news is that he had not replaced it and was not looking to do so any time soon. What I found both problematic and simultaneously interesting was that the driver threw a tantrum over the taxi fare but not over the two passengers who were not wearing masks the entire trip during a global pandemic. Nor did he express a sense of concern or urgency over the fact that his sanitiser is finished. This raised questions, but the most recurring one was – is the taxi fare more important than the health and safety of passengers during the pandemic?

¹ Moving around the city.

² Khulu Township and the names of all participants are pseudonyms used to protect the real identity of participants and the association.

³ the one who did not pay must pay now before I take you all back to the (taxi) rank!

⁴ I am saying pay right now!

⁵ I'm sorry, son-in-law, here is your money.

The burden of the COVID-19 restrictions and their economic implications were severe on South African industries. In attempts to keep the economy afloat while simultaneously working on efforts to contain the virus, employees of many companies were required to work from home. For some employees, this was a positive shift and allowed more flexible ways of being productive (Jenkins & Smith 2020, 23). For others who are caregivers and live with family and extended family, turning their homes into workspaces became unbearable and put a strain on their mental health (Jenkins & Smith 2020, 24). Schools were closed and learning was advised to continue online. Informal workers - street vendors, backroom business owners, and the unemployed, were heavily burdened with the need to keep food on their tables (Stiegler & Bouchard 2020, 696). The minibus taxi industry was one of these industries. The industry's paratransit nature heavily depends on physical interaction with its consumers. The regulation of social interaction and travel under COVID-19 meant that fewer people would be moving around, fewer people would use minibus taxis, and this meant heavy profit losses.

To ensure safety in the use of public transport, the National COVID-19 Command Council (NCCC) imposed a 50% passenger restriction on all public transport in March 2020. However, this was quickly adjusted back to 100% within three months, separate from lockdown level adjustments. Full passenger capacity was introduced because of the economic impact of reduced passenger capacity on the industry, despite the pandemic in South Africa. Understandably, this had a negative impact on the public transport sector as a whole, but here, I place focus on the minibus taxi industry. The reduced passenger capacity affects minibus taxi drivers' responsibility to check-in the days' earnings and owners' ability to pay vehicle instalments, membership fees for the association, and overall expenses. Although full operations of the minibus taxi industry would not benefit them alone. Citizens were also granted the opportunity to work and travel for essential goods and services. As important as this was, the increased passenger capacity adjustment failed to fully consider the conditions in which passengers travel during the pandemic.

Existing literature on COVID-19 is much concerned with its challenges on the biological body, the country's economy, on people's mental health, vaccinations, and the effectiveness of Personal Protective Equipment (PPE) (Fauci et al 2020; Venaval and Meyer 2020; McKibbin and Fernando 2020; Cullen et al. 2020; Rab et al. 2020). These studies have contributed to the critical information about the virus today, especially because these are the most apparent and immediate challenges of the COVID-19 outbreak. However, few studies critically explore how

the government's responses and policies affect millions of public transport users during a pandemic. Moreover, a pool of research on the relationship between public health and urban mobility focuses mainly on road safety, especially when addressing the minibus taxi industry (see Sauti 2006). These are equally important. However, little is known about passengers' views and experiences of using minibus taxis as a means of public transport during a pandemic of this nature.

Aims and Objectives

This study therefore explores passenger capacity restrictions intending to understand the extent to which the minibus taxi industry's responses and attitudes towards COVID-19 affect the experiences and perceptions of passengers, the vast majority of whom are poor and are forced to use taxis as a primary means of transport to and from work and for daily needs. I argue that the minibus taxi industry does place passengers in a vulnerable position during the COVID-19 pandemic. I identify passengers' views on the increase in passenger capacity, the informal nature of the minibus taxi industry whose operations are cash-driven and centred around monetary value as key factors that have impacted passengers' experiences of moving around since the outbreak of the pandemic. Although passengers' daily lives are governed by a set of rules and regulations that control them as biological subjects, this paper does not treat them as passive actors of their own biological bodies. Instead, I also highlight passengers' perceptions suggest that the high levels of non-compliance with COVID-19 regulations by passengers and taxi drivers are indicative of a lack of responsibility for their health. While those who do comply with regulations do so to stay healthy enough to work and earn an income.

There are three main objectives of this study.

- ❖ First, an analysis of the involvement of the association and taxi drivers in the curbing of COVID-19 inside the vehicles.
- ❖ Second, to understand how COVID-19 restrictions might affect driver's income.
- ❖ Finally, to undertake an ethnography of passengers' experiences of minibus taxis during the COVID-19 pandemic to find out the extent to which minibus taxi drivers' and queue-marshals' attitudes towards public health and safety affect passengers' perceptions of mobility during a pandemic.

Central Research Questions

I further explore the following questions:

- What is it like to be a passenger in a mini-bus taxi during different levels of COVID-19 restrictions on the taxi industry?
- What were/are passengers' responses to the rapid increase in passenger capacity?
- What is passengers' response to COVID-19 regulations inside the taxi?
- What are passengers' main concerns about using minibus taxis during the pandemic?
- How does public health affect profit-making in the mini-bus taxi industry?

Theoretical Questions

- What do these reported perceptions and experiences say about the relationship between urban mobility and disease/human body/ social experience of the pandemic?
- What do these reported responses say about the relationship between passengers' concerns and wider public health concerns?
- What do these experiences and perceptions tell us about the minibus taxi industry and public health care?
- What do these reported responses tell us about the relationship between the state government and the minibus taxi industry and the complex power relations that exist there?

Methodology

This study follows a qualitative approach through semi-structured interviews, autoethnography, and ethnographic observations of the adherence to COVID-19 restrictions inside minibus taxis, and specifically at Bree Taxi Rank. I chose to conduct observations at Bree Taxi Rank because it is one of the main taxi ranks that has a wide range of minibus taxis traveling to Soweto. According to Masuku (2016, 13), Bree Taxi Rank serves at least 500 000 commuters daily. Its management of an enormous number of commuters during a pandemic and accessibility to taxis that operate to and from Soweto made it imperative to conduct my research there.

Interviews were conducted with fourteen interviewees each from a range of cohorts within the industry – chairperson of the association, two minibus taxi drivers, two queue-marshals, and ten taxi passengers who rely solely on minibuses for mobility to the city. Data was collected through WhatsApp voice notes, voice calls and in some cases by in-person interviews. In

addition to the interviews, I asked six passengers to keep taxi diaries on their mobile phones for four weeks. However, due to passengers forgetting to record the dairies, I asked them to keep diaries for an additional four weeks.

Recruitment

To recruit taxi association executives, taxi owners, and drivers, I contacted the association assistant and arranged that I telephonically speak to the association's secretary. I then employed the snowball method for the recruitment of other executive members, owners, and drivers. I managed to ask the association assistant to let potential participants know about my study, and to give me the contact details of those interested. This was a very long process and affected my timeline. Workers in all cohorts of the minibus taxi industry are busy and always on the ground. Therefore, communicating and scheduling interviews with them was difficult.

To recruit passengers, I asked my neighbours to participate in telephonic or online interviews via Whatsapp and to commit themselves to the taxi diaries and interviews.

Semi-structured Interviews

Semi-structured interviews were a significant part of collecting qualitative data in my research. These interviews were conducted with taxi association executive members, owners, drivers, and passengers who solely rely on minibus taxis as a mode of transport. Semi-structured questions served as a guide during interviews and allowed the interviewees to explore different aspects of their experiences and to share accounts that may not have been apparent in the designing of the questions. Open-ended semi-structured interviews allowed interviewees to answer questions as broadly as they could, with very few limits. These questions were designed to produce data that would address the central and theoretical questions (Wengraf 2001, 62). In this way, the possibility of collecting data that later became redundant was reduced.

To minimize the risk of contracting COVID-19, I had to conduct all interviews telephonically or via Whatsapp Messenger. I decided to use Whatsapp Messenger to conduct interviews because not only is it the most commonly used app as a primary mode of communication, but its flexible features also allow for typing of messages and an exchange of voice recordings. I then used the telephonic calls to conduct interviews with participants who did not have Whatsapp Messenger, or data bundles to access it.

Auto-Ethnography

In addition to the interviews, I collected ethnographic data through observations of people's health behaviours. Considering that I rely on minibus taxis for mobility, it was of great use for the study to undertake autoethnography inside minibus taxis and at Bree Taxi rank, and to observe people's responses and adherence to COVID-19 restrictions inside the taxi or at the taxi rank. Observations focused on the sanitization of passengers by queue-marshals, social distancing at the taxi rank, and wearing of masks, all of which I recorded in a diary. This helps bring the study to life by adding context for the reader and it allows me to base my central arguments on a variety of data collection methods especially considering the shortcomings encountered in telephonic interviews. Since observations took place in public spaces, no permission letter was needed. This ethnography and observations were drawn from my own personal trips, and did not necessarily identify specific taxis for research. Regardless, it is important to note that as both a researcher and a passenger, the risk of me contracting COVID-19 as a minibus taxi commuter is always there.

Taxi Diaries

Taxi diaries were critical in helping me explore the real-life daily experiences of the passengers. Passengers recorded critical information and details about COVID-19 adherences during their trips. These diaries documented quantitative data of how many people complied with wearing of masks, sanitization, how the participant-passenger was feeling, how the lack of or good compliance to the COVID-19 restrictions affected their trips, and in which ways. Emerson (1995, 20) states that there is no uniform or 'correct' way to write notes on the field as long as they communicate what one has observed. Therefore, the diaries came in the form of WhatsApp texts, voice notes, and screenshots of their notes in the Notes Application. To keep passengers engaged with the study and the taxi diaries, I asked them to send me their notes weekly instead of collecting them at the end of the four weeks. This reassured passengers about my engagement with them.

Ethical Considerations

To protect the identity of the interviewees and of the association I use pseudonyms. This is important because associations are identified with specific routes and neighbourhoods. I acknowledged that some of my participants cannot read or write. In these cases, I read the consent form and participant information sheet at the beginning of a telephonic interview or

shared these as voice recordings on WhatsApp Messenger before commencing the interview. I also used informal, verbal consent (see Appendix 1A – 9B).

Study Limitations

Conducting research during a pandemic meant that there could be little or no physical interaction between me, and my participants and telephonic interviews were one of the few ways that one could turn to. This, I would say, was the most challenging part of my data collection. Besides the fact that I had to buy airtime to call participants because most of them did not have data bundles enough for thirty- to forty-minute-long conversations, the lack of physical interaction made it difficult to truly gauge the interviewees' answers. Although WhatsApp has a video call feature, it is too expensive for participants to bear this cost. These limitations affected my interpretation of the answers, and my process of writing and presenting these answers in a way the reader could understand. Facial expressions play a critical role when writing ethnography and describing people. Without this, I could not fully articulate the emotions evoked by the interviews, and thus affecting the voice or tone, or urgency in the issues discussed in these interviews. This meant that I had to rely on my 'imagining' of interviewees' expressions. Moreover, due to the irregular hours that people in the minibus taxi industry work, scheduling telephonic meetings with the ZTA's executive was difficult. The assistant at the association arranged face-to-face interviews with the chairperson and the general secretary three times and I only managed to meet with the chairperson on the fourth attempt. Queue-marshals and minibus taxi drivers said they were seldom on their phones and would prefer answering questions at the rank. Lastly, as useful as the taxi diaries were, the biggest challenge was constantly asking participants to keep updating the diaries. Participants often forgot or did not write detailed diaries. To compensate for this, I had to conduct follow-up interviews with them in order to fill in the blanks in their taxi diaries. This resulted in interviews being used more in my data analysis and the use of available taxi diaries that were of relevance.

CHAPTER 2

Concepts of Value to this Study

It is of utmost importance for this paper to contextualize the minibus taxi industry using theoretical concepts that will help us understand the COVID-19 pandemic in a South African township context. In this chapter, I draw from Michel Foucault's (2003) concept of biopolitics to contextualise the management of COVID-19 at the state-government level and the imposition of biopower in the form of the passenger capacity and a wide range of restrictions assigned to different economic sectors in South Africa, particularly the minibus taxi industry. I propose a layered understanding of passengers and the minibus taxi industry during the COVID-19 pandemic. I acknowledge that these theoretical concepts were not developed with the aim to conceptualise the minibus taxi industry or issues of urban mobility in general.

To better understand the role of the minibus taxi industry during a pandemic, this paper draws from De Sonto's (1989) concept of informality to show how the lack of training, regular hours, and any other form of labour regulation plays a critical role in how drivers construct understandings of basic conditions of safety, and the prioritisation of money in their operations. Lastly, this paper acknowledges that being an individual who relies on minibus taxis makes one more susceptible to contracting COVID-19 than any other form of public transport because the rest are formalised. Here, I use Paul Farmer's (2004) concept of structural violence and Quesada et al's (2011) concept of structural vulnerability to contextualise the vulnerability and susceptibility of passengers (or Khulu residents) during the COVID-19 pandemic. Acknowledging that individuals who live in contexts with long histories of systematic oppression, that continue to persist in post-Apartheid South Africa, make them particularly vulnerable to illness and affects how passengers manage, treat, and construct perceptions of mobility during a pandemic.

Biopolitics

In *Society Must Be Defended*, Michel Foucault (2003) explores different mechanisms of power exerted on biological bodies by the state. Foucault's analysis of sovereign power played a critical role in the emergence of different technologies and mechanisms of power that are imposed on state subjects, specifically in the emergence of biopolitics as a theoretical concept.

Foucault's scholarship asserts that biopolitics establishes itself through "a set of processes such as the ratio of births to deaths, the rate of reproduction, the fertility of a population, and so on – together with a whole series of related economic and political problems, which become biopolitics' first objects and the targets it seeks to control" (2003, 243). At first, Foucault identified power over the body through an analysis of sovereign power. Questions around the biological control of the body began when sovereigns could declare who got to live and die about matters of war, race, and culture. Foucault states that sovereign power could only be imposed on the right to kill. In his own words, Foucault states that "it is at this moment when the sovereign can kill that he exercises his right to life" (2003, 240). To Foucault, this power was a form of disciplinary power. This disciplinary power, which is an important domain of biopolitics, is centered around ensuring surveillance and spatial distribution of individual bodies, as well as their organisation in the state (Foucault 2003, 242). Foucault's (2003, 242) description of this power as "the disciplinary power of labour" suggests that this form of power aims to ensure discipline and control over working bodies in the most affordable ways to sustain economic productivity by delegating power onto individual bodies and institutions (Foucault 2003, 242). Foucault (2003, 249) writes:

One can easily see how the very grid pattern, the very layout, of the estate articulated, in a sort of perpendicular way, the disciplinary mechanisms that controlled the body, or bodies, by localising families (one to a house) and individuals (one to a room). The layout, the fact that individuals were made visible, and the normalisation of behaviour meant that a sort of spontaneous policing or control was carried out by the spatial layout of the town itself.

Such regulation of labour workers resonates with disciplinary power over mineworkers and their families in the development of townships over the course of South Africa's colonial, apartheid, and post-1994 history. Foucault (2003, 249) describes disciplinary power as a "technology of security" – this description resembles that of the technology of South Africa's history with Apartheid state systems. To Judith Butler this biological power exerted on the body indicates that bodies are highly vulnerable to being coerced. She writes that the body "is forced to do certain things, and it does them in accord with the demands made upon it" (Butler 2004, 13). She continues to write that "the power imposed upon a body is to be understood as part of the political technology of the body, a technology which operates in the form of a 'strategy'" (Butler 2004, 13). However, disciplinary power did not sustain its prominence because, according to Foucault (2003, 249), it failed to incorporate the economic and political processes of a population.

Contrary to disciplinary power, regulatory power does consider the individual body, however, it also focuses more on producing “mass effect characteristics” by imposing power on a population or society (Foucault 2003, 249). Its primary concern is to control the population through a series of unprecedented events - illnesses that may affect the population’s health, death rate, life expectancy -subsequently affecting the population’s economic and political processes (Foucault 2003, 243; 249). In essence, regulatory power is concerned with the longevity of a population by the state. The longevity of the population was ensured through fostering the establishment of state apparatus such as police, health authorities, health insurance, housing saving plans, pension funds, and hygiene education. These were all regulatory technology (Foucault 2003, 251). Often, this power manifests itself through the establishment of “a medicine whose main function will now be public hygiene, with institutions to coordinate medical care, centralize power, and normalise knowledge” (244). This is what Foucault (2003) sees as “medicalising the population” (244).

Medical institutions, medication, medical practitioners, police, and health authorities all form part of the state apparatus used to exercise regulatory power. In the case of COVID-19, protecting or controlling the population against illness was imperative because these illnesses began to affect the population’s productivity and economic activity, thus creating a threat against its longevity. Although regulatory power is different from disciplinary power in that the former is concerned with the population, while the latter focuses on the individual body and its security. Foucault (2003, 249) reminds us that they are not different but rather, they can be articulated parallel to each other. Thus, both forms of power become important mechanisms or dimensions of biopolitics.

Sociologists such as Nicholas Rose and Carlos Novas (2005, cited in Whyte 2009, 11) argue that Foucault’s biopolitics lacks incorporation of socio-political aspects of the human. To bridge this gap, Rose and Novas (2005) propose that people’s health identities and beliefs are connected to how they view themselves as “biological citizens”. (Whyte 2009, 11) cites them and writes:

Biological citizens are “made up” by medical and legal authorities and insurance companies. And they also make up themselves. The active biological citizen informs herself, and lives responsibly, adjusting diet and lifestyle to maximize health. . . Citizens are categorized and behave (or not) in conformity with a biologically oriented discourse.

Here I show the value of biopolitics as a concept - or co-existence of disciplinary and regulatory power - for understanding ways in which political power makes up health identities in everyday urban mobility during the COVID-19 pandemic in the South African township of Soweto.

Given that the minibus taxi industry plays a significant role in urban mobility in Soweto, passenger capacity also counts as an example of this disciplinary power. Disciplinary technologies of power were mainly articulated through the declaration of the national lockdowns and in a significant number of lockdown restrictions, such as curfew, policing which services the population could access, on specific days of the week in limited areas. On the other hand, regulatory power is exercised through the establishment of quarantine facilities and vaccinations, as well as national lockdown restrictions. All of these were aimed at maintaining the health of the population, especially the working population.

The establishment of the National COVID-19 Command Council uses prominent ways to keep citizens alive, regulates the rates of COVID-19 mortality, and predicts the spread of COVID-19. I want to also note that within the context of the COVID-19 pandemic, the coexistence of the aforementioned technologies of biopolitics also converges in national lockdown measures. The lockdown was constituted by a set of disciplinary and regulatory restrictions. Security and high-level administration systems that continue to monitor the influx of COVID-19 patients in hospitals, active cases, and death cases, while at the time providing them with medical care, and a relaxing of some of these restrictions all aimed to ensure the economic activity of the country.

Informality

In 2003, former President Thabo Mbeki defined the informal economy, or what he described as the "second economy", that sparked debates in the literary world. According to him:

"The second economy (or marginalized economy) is characterized by underdevelopment, contributes little to GDP, contains a big percentage of our population, incorporates the poorest of our rural and urban poor, is structurally disconnected from both the first and global economy, and is incapable of self-generated growth and development" (Valodia & Devey 2010, 1).

This definition asserted that the South African economy is a dual economy, where "first" or the formal economy is deemed more beneficial and progressive than the "second" or informal economy. The dualist perspective of the South African economy sparked an interest in scholars

to study and analyse how and why these two economies differ, most of which provided misleading arguments that the informal economy is "autonomous and an economy in its own right" (Bromley 1990, 336). On the contrary, there is literature that challenges these dualist notions and highlights the similarities and a close relationship between the informal and formal economies. Valodia and Devey (2010) indicate that both economies contribute a substantial amount of production, especially in sectors such as trade, construction, and agriculture; they both have high levels of low-wage labour; there are also large indications of churning in the formal and informal labour markets where formal workers move to the informal sector and vice versa (19).

While a significant body of literature is concerned with identifying the extent to which these two economies relate or differ, scholars such as Hernando De Sonto and Keith Hart are more interested in providing an adequate definition of the informal economy through the notion of informality. Cited in Bromley's (1990) *A New Path to Development?* De Sonto (1989) argues that informality is characterized by "ignoring or deliberately breaking unreasonable official laws and regulations to make a living and satisfy basic needs" (331). The common use of personal homes as places of business, irregular working hours and wages, and no unemployment funds, for instance, are primarily rooted in informality. For De Sonto (1989), informality is "a mass response to mindless, pompous bureaucracy and the manipulations of the economic system by corrupt vested interest groups" (Bromley 1990, 331). De Sonto (1989) also asserts that that informality "occupies an intermediate position between "formality/legality", when all laws and regulations are complied with, and "criminality" when acts are performed that are clearly against official laws, basic morality, and the public interest" (Bromley 1990, 331). For De Sonto, although informality may be considered "illegal", it is a kind of illegal that breaks no societal moral codes and whose purpose is to help individuals meet their basic needs (Bramley 1990, 331).

Keith Hart's (1973, 335) *Informal Income Opportunities and Urban Employment in Ghana* simply describes informality as "self-employment" and that it is through the informal sector that the poor can survive when the government or formal sector cannot provide employment opportunities for an increasing population. General attitudes of safety (which I discuss in-depth in chapter 4) and the overlooking of restrictions and rules in the minibus taxi industry are also centered around the need to make money. Here, it becomes clear that the informal sector becomes a space for unemployed people to develop entrepreneurial skills to survive an unstable political and economic context.

The concept 'informality' is useful for understanding the history of the minibus taxi industry and contextualising it in post-apartheid South Africa. It allows for an insightful analysis of both the government's decisions and the minibus taxi industry's attitude toward managing COVID-19, as well as its economic impact, especially during lockdown level five. Considering the informal nature of the minibus taxi industry, it is through informality that I can account for the prioritisation of profits over the fact that increased capacity threatens public health and the curbing of the COVID-19.

Structural Violence

In a country like South Africa, which is ridden with a long history of inequality and oppression, it is important to consider the implications of COVID-19 beyond biology and to prioritize a holistic approach to understanding illness and pandemics in general. Hamdy (2008) proposes 'political aetiologies' as a starting point. According to Hamdy (2008, 554) political aetiologies allows for the understanding of an illness beyond its biological pathologies, and analyses illness as historical, economic, and political failures, as well as how power inequalities influence the reproduction and/or redistribution of illness. In a context within a network of global systems of power and domination, we should consider the impact or influence that history has on how South African citizens manage, perceive, and/or adopt self- and government-imposed preventative measures against COVID-19. Khulu residents, though not all, enjoyed employment opportunities as a result of the economic growth of the early 1990s, while others were victims of ongoing structural violence and rising unemployment rates (Beall et al 2014, 201). Those who fell victim to structural violence and unemployment rates as well as the generations after them, constitute a cohort of people who had been affected by a myriad of economic reforms and changes in the labour market that were a harsh result of apartheid systems. It is important to note that it is impossible to divorce the establishment of the township landscape from the concept of structural violence.

The concept of structural violence was introduced by Johan Galtung in the 1960s in order to understand the complexities and historical, economic, political, and religious implications that hinder societies from prospering and reaching their potential. Paul Farmer (2004, 307), who adopted the concept for further analysis describes structural violence as "social structures characterized by poverty and steep grades of social inequalities". For Farmer (2004), structural violence allows for an analysis of the "social machinery of oppression" (307). Structural violence has often been used to conceptualize cultural and gender inequality factors in discourses, but it has also been useful in analysing issues of systematic oppression and

economic inequality. In medical anthropology, the concept has been used to analyse inequalities in health and highlight socially constructed trends of illness across different populations (Quesada et al 2011, 341). However, Quesada, Hart, and Bourgois (2011, 342) critique it and highlight that it often overlooks the socio-cultural implications of “physical and psychodynamic stress” in illness. Instead, Quesada et al (2011, 341) propose a different approach within structural violence and describe it as “structural vulnerability”, bringing together structural violence and vulnerability in the analysis of health and illness. Suggesting that structural violence automatically makes people structurally vulnerable, they write, “the vulnerability of an individual is produced by his or her location in a hierarchical social order and its diverse networks of power relationships and effects” (Quesada et al 2011, 341). Structural vulnerability does not dismiss structural violence. Instead, it points to the importance of acknowledging how vulnerable structurally oppressed individuals are in illness and how the role that political and economic ecologies play in how families determine their health choices and perceptions (Manderson & Wahberg 2020, 431).

The population of Soweto consists of black residents that are particularly vulnerable to structural violence. The majority are poor and continue to exist in a geographical location historically established to oppress and exclude people of colour. Through the concept of structural violence and structural vulnerability, I am able to contextualize Soweto residents and acknowledge the historical factors that shape their attitudes towards the government and the pandemic and continue to affect their perceptions of health. Furthermore, this concept enables me to understand why and how suddenly increased passenger capacity during the pandemic affects them. Increased passenger capacity makes social distancing impossible during trips rendering passengers more vulnerable and susceptible during the pandemic than other people who use different modes of transport and live in other suburbs.

Conclusion

The aforementioned concepts allow for a layered analysis of Soweto during the pandemic, making it clear that the conditions of the pandemic are layered on top of the historical conditions in Soweto. Through biopolitics, we get to understand that passenger capacity restrictions imposed on the minibus taxi industry are forms of biopower and within this power are disciplinary and regulatory technologies that control and regulate how biological bodies, especially working bodies, are governed during the pandemic. Furthermore, I put to light the biopower imposed on the minibus taxi industry and how it acts during the pandemic,

but it also affects passengers' reported experiences of traveling during the pandemic. While informality allows us to understand the minibus taxi industry, as an informal industry that tends to operate in a manner that does not follow restrictions or legal rules to make money. Lastly, using structural violence and vulnerability highlights how passenger capacity restrictions and the callousness of the minibus taxi industry about health and safety affect reported daily experiences.

CHAPTER 3

Ka Mina, (not) Ka Wena

After an anxious three weeks of waiting for Zenzele Taxi Association's (ZTA) response to my email requesting to conduct research at the association, I visited its offices in person. It was an unusually hot June afternoon. For as long as I can remember, I have relied on ZTA taxis as my main form of transport, but I had never seen nor visited its offices. ZTA offices are in Khulu Township, one of the earliest sub-townships to be established in Soweto. The building looks nothing like what one would imagine. Most houses in Khulu Township are single-storeyed with painted outside walls. ZTA is a two-storeyed house tiled with marble-looking tiles on the outside. It is barricaded by a black gate and surrounded by a tiled wall with a big yellow board which reads "Zenzele Taxi Association. Together We Can!" written in big, bold letters and its contact details in small, black italic letters.

At the gate stood an elderly man, sanitiser in hand, dressed in black, and wearing a blue surgical face mask. "*Ninjani, baba?*"⁶, I asked as I offered my hands for him to sanitise. "*Ngiyaphila?*"⁷, he replied as he gave me a few squirts of the sanitiser. As I was about to explain why I was there, he quickly stopped me and pointed to two gentlemen, possibly in their thirties, standing on the veranda next to the gate. *Ntombazane! Singak'siza ngani?*⁸, asked one in a cheerful tone. I formally introduced myself and explained that I had sent a formal request via email at the end of May and had since been awaiting a response. I was interrupted by a peripheral glance of another man dressed in full personal protective gear (PPE) and off-loading a box with sprays and other equipment I did not recognize. *Eish! I will have to ask the secretary to check for you. But manje uhambile ngoba kmele kuSanitizwe nawe uyabona?*⁹. I was itching to ask about the man in PPE. Did he work for the government or did the association pay him? Later, during my interview with the ZTA chairperson, Bab' Zulu, I found that the association paid him to sanitise their offices every other Tuesday.

Given my experiences of lack of compliance with COVID-19 restrictions *inside* the minibus taxi during my trips to Johannesburg, I never imagined that the association would regularly sanitise its offices. That the association itself paid for this service made me question the

⁶ How are you, sir?

⁷ I am well

⁸ Young lady! How can we help you?"

⁹ Eish! I will have to ask the secretary to check for you. Now she is gone because we have to sanitise, as you can see

government's support of the minibus taxi industry. The shortage of Personal Protective Equipment (PPE) for essential workers was one of the biggest challenges that the government faced. Hospitals were constantly overcrowded, short-staffed, witnessing death at high rates, struggled with limited availability to resources like Personal Protective Equipment (PPE) and ventilators, while health care professionals struggled with the everyday risk of contracting COVID-19 (Adams et al. 2021, 2). My interest in the relationship between the minibus taxi industry and the government grew.

In this chapter, I explore the management of COVID-19 by the Zenzele Taxi Association (ZTA) and reveal the challenges it encountered since the outbreak of the pandemic. To contextualise the operations of the minibus taxi industry and its compliance or non-compliance with COVID-19 restrictions, I first discuss the history of this industry to understand its trajectory in the informal economy from the apartheid era to the post-apartheid era. Furthermore, to help contextualise the tensions found in the relationship between the government and the minibus taxi industry, this chapter will explore some of the most prominent formalisation processes to understand where these tensions may originate from. The title of this chapter, “Ka mina, (not) Ka wena”, is an extraction from the actual saying “Ka mina, Ka wena” I grew up saying and hearing all the time. To directly translate, the saying means “by me, by you”, essentially meaning, “side by side”, referring to kinship or relationship rooted in support and sharing. I added the “(not)” to describe the relationship between the minibus taxi industry and the government. I propose that the COVID-19 Relief Fund exacerbated already existing tensions between the government and the minibus taxi industry because of its primary drive to formalise the minibus taxi industry instead of relieving it from COVID-19 economic challenges. Conditions attached to the COVID-19 Relief Fund indicate that the government is developing new methods to foster the formalisation of the minibus taxi industry.

As I had briefly mentioned, it is through De Sonto's (1989) concept of informality that I account for the struggle that ZTA has in redeeming the COVID-19 Relief Fund and in the overall importance of money in minibus taxi operations over the health of passengers. Furthermore, although the economic implications of COVID-19 may account for the increase of passenger capacity by the government, this increase was at the expense of passengers' health, and it amplified the vulnerability of passengers to COVID-19. Ethnographic data in this chapter is based on interviews with the chairperson of ZTA, bab' Zulu. This data enables critical analysis of the challenges that are faced by the ZTA. Accessibility to the COVID-19 Relief Fund as well as the lack of Personal Protective Equipment (PPE) highlight that some of

the challenges faced by the minibus taxi industry are significantly connected to their consistent contestation of formalization.

Jozi! Jozi: A Brief History of the Soweto-Johannesburg Route

During Apartheid, Johannesburg was home to predominantly white populations. A majority of them draw from the Stallardist principle that black people are incapable of urbanization and that “Africans could not be permanently urbanised” (Nieftagodien 2011, 112; Rich 1980, 70). However, the marginalising of black people according to space could not last too long due to a growing capitalist economy. Following the discovery of gold on the Witwatersrand in 1886, the demand for black unskilled labour increased. Johannesburg became heavily dependent on migrant labour, i.e., black labour. (De Montille 1987, 658; Nieftagodien 2011, 113). This dependency is rooted in the fact that migrant labour was the cheapest form of labour. This essentially meant that the presence and influx of black people in the city could not be simply dismissed. Thus, the Apartheid government was forced to introduce laws and policies aimed at regulating and limiting the presence of black people in the city. Between 1910 and 1936, black people only had access to 7.5% to 13% of the land (Motlhabi 1984, 5) the bulk of which was in the homelands and urban townships.

The establishment of townships was critical for the growing capitalist economy in the 1930s. This was where migrant workers were said to reside at a safe 33-kilometer distance away from the city while being close enough to tend to white people’s needs. Allowing them access to the city for work, but not as a settlement. Khulu township¹⁰ is one of the oldest townships in Soweto¹¹. It was founded in 1958 as a direct consequence of the growing economy and Apartheid state's forced removal policy which continues to embody the history of political volatility that is unique to South Africa's township districts (Burton 2003, 15). The apartheid state built what are called "matchbox" houses, which still dominate Khulu Township today (Beall et al 2014, 201). These houses originally had three rooms – one bedroom, a kitchen, and a sitting room, as well as an outside cubicle toilet. However, the failure of the apartheid local government to provide enough housing for Khulu residents fuelled the rapid growth of backyard rentals such as shacks and backyard rooms, whose existence has continued to persist

¹⁰ Pseudonym used to conceal the identity of the sub-township in Soweto for the purpose of concealing the association that the study focuses on

¹¹ The South Western Townships. The term “Soweto” is an acronym used to categories townships in the South West of Johannesburg since 1963.

in post-Apartheid South Africa, subsequently increasing the population of Khulu rapidly and persistently into the post-apartheid era.

The increase in the population size caused a myriad of infrastructural problems. On top of the lack of adequate housing, health facilities, and transport services in Soweto were an incredible challenge. South Africa's health care system continues to provide residents with mediocre and inadequate health care even in the post-apartheid era. In addition to this, the lack of adequate infrastructures such as electricity and water continues to persist in Soweto. Alex Wafer notes the correlation between infrastructure and the imaginations of citizenship in the post-apartheid era and reminds us that "the infrastructural capacity of the apartheid state entrenched the segregated apartheid urban system and was simultaneously the target of political protest in the 1980s" (2012, 233). During the 1980s, protests against service delivery failures in Soweto highlighted an emergence of an anti-apartheid movement focused on the inequities of apartheid urban infrastructure and the oppression of the apartheid regime itself (Mayekiso 2003, 53). It was for this reason that democracy, as well as the newly elected government at the time, under the rule of Nelson Mandela, targeted infrastructure as a way to reinforce and foster citizenship in townships.

In the post-1994 period, the reinforcement of citizenship in Soweto was through infrastructural development driven by the Reconstruction and Development Programme (RDP). The RDP aimed to correct apartheid urban infrastructure by providing housing, water, transport, health care services, employment, education, sanitation, nutrition, and social welfare and electricity to oppressed communities (Corder 1994, 185; see also Mayekiso 2003, Cewuka 2012). Eglin and Kenyon (2017, 1) state that "between 1994 and 2014 the South African government provided 3.7 million housing opportunities". However, despite this progressive performance, a backlog grew from 2.1 million homes in 1994 to 2.3 million in 2014. Overcrowding, backroom dwelling, overload on infrastructural capacity, and protesting are a consequence of the breakdown of the RDP. Furthermore, electricity problems got worse by 2001, resulting in twenty thousand houses being cut off by Eskom (Fiil-Flynn and Soweto Electricity Crisis Committee 2001, 16). All the aforementioned factors contributed towards a growing perception that Soweto residents held towards the government - that is that the government failed to prioritise their basic needs, which perception consequently affects how people construct a relationship with the government. It is important to note that the large majority of the people at ZTA and its passengers live in these homes and backyard establishments that lack basic infrastructure and service delivery.

It is in this context of a lack of infrastructure in Soweto that the history of the minibus taxi industry emerges. Pinkerton (cited in Sauti, 2006: 17) writes that it is through this industry, among others, that black people became economically empowered through meeting the public transport needs of marginalized township communities. The inception of the minibus taxi industry was significantly fostered by skyrocketing rates of black unemployment, poverty, and lack of adequate and convenient transportation in the early 1930s of migrant workers who lived in townships such as Soweto and Alexandra. During this time, a great number of black people lived below the “Poverty Datum Line” in 1939. (Unknown 1944, 2). As a result, many families in these areas were unable to purchase even the most basic food, leaving them hungry and in debt. It was also around this time that the apartheid government's buses and trains were the primary modes of public transportation available to black workers traveling from townships to Johannesburg.

Overcrowding, poor maintenance, limited operations during off-peak hours, criminal activity, and, most importantly, high fares were all common complaints about buses and trains (Barolsky 1990. 60). However, trains had lower fare increments than buses and did not rely on transporting workers to and from Johannesburg as heavily as buses did (Unknown 1994, 2). Trains ran in mines and other regions outside of Johannesburg. As a result, people organized boycotts, realizing that launching a train boycott would be less effective than launching bus boycotts. During these bus boycotts, people walked and cycled from townships to Johannesburg from the 15th of November 1943 until the 2nd of January 1944 when the Bus Commission introduced somewhat affordable bus coupons (Unknown 1944, 5). These bus boycotts were one of the most important influences that fostered the inception of the minibus taxi industry. For urban dwellers and workers, they highlighted the need for convenient and affordable transport. On the other hand, it was an entrepreneurial opportunity for those who were unemployed.

The minibus taxi industry began operating discreetly in the form of private vehicles known as “cockroach taxis” or “*amaphela*” (Rink 2020, 1). Rink (2020, 1) describes “*amaphela*” as an informal paratransit form of transport that serve their users through flexible and affordable on-demand service while offering a low-barrier entry to casual employment for those without work in urban poor communities. The term directly translates to “cockroaches” in Nguni languages and alludes to the behaviour of cockroaches and their discreet nature. Its paratransit services provided passengers with flexible pick-up and drop-off options along routes, instead of fixed

pick-up and drop-off points offered by trains and buses. This decreased the amount of pressure on public transport, thus releasing pressure from the apartheid government. This provided an opportunity for the government to form a “black ally” relationship with the minibus taxi industry. Barolsky (1990) writes that “the government has wanted to retain a 'black ally' that is economically powerful, relatively conservative and an important constituent of the growing black middle class, which aspires to free-market principles, and has a vested interest in the anti-sanctions lobby” (60). In response, the Minister of Transport at the time, Hendrik Shoeman, announced that “*amaphela*” will be granted permits by the Department of Transport from 1986 (Balrosky 1990, 60). The process of issuing permits included the main lobbying body of the minibus taxi industry, the South African Black Taxi Association, where they were closely involved in the number of permits to be issued, as well as how and when.

It was early in the post-apartheid era when the new government proposed incorporation of the minibus taxi industry into the government’s public transport system. This incorporation, however, entailed a formalization of the minibus taxi industry on the new government’s terms. It is through such a formalization process that the tensions between the minibus taxi industry and the government started. In *Minibus Taxi Industry in South Africa: Servant of the Urban Poor?* Siyabulela Fobosi (2013) provides an analysis of the formalization processes that it has been subjugated to since the birth of democracy. Fobosi (2013) argues that the formalization processes of the minibus taxi industry are based on the fact that the industry has rather irregular and unregulated employment relations (1). Moreover, they are said to be aimed at providing adequate and safe public transport. The prioritisation of the formalization of the minibus taxi industry is rooted in the fact that it is still considered to be heavily informal.

Meshack Khosa’s (1997) paper, “Sisters on slippery wheels: women taxi drivers in South Africa”, discuss the experiences of woman minibus taxi drivers in Durban, KwaZulu Natal. A paper that is one of the few literature done on gender power dynamics in the minibus taxi industry. Khosa (1997) found that the taxi industry had become a safety net for black people who were less educated, lacked funds, and come from rural regions to seek better employment opportunities (21). Starting as a taxi driver and eventually saving up for their own taxi (which can take years) is the most typical approach for people to get into this sector. According to Khosa (1997), the majority of both male and female drivers enter the sector through kinship links with persons who already work in it instead of through an organized application process (21). In most instances, drivers only got their driver's licenses and permits after they were already on the road (Khosa 1997, 23). In contrast to formal public transport, drivers barely

receive training, and more than half of running taxis did not have the necessary permits (Barolsky 1990, 60). Working hours, employment contracts, and other human-resource-related requirements are not controlled or formalised. Subsequently, these are considered consequences of the illegal inception of the minibus taxi industry.

Bromley (1990) states that the informal sector is more prominent in developing countries with long histories of colonialism than in developed countries (337). Like many townships in South Africa, Khulu has a significant number of taxi associations, street vendors, shebeens, spaza shops, Kota shops, backyard vehicle services, and hair salons. Literature such as Devey et al. (2006) state that the South African informal sector contributes approximately 10% to the economic activities of the country. The possibility of this statistic being underrated is high if we take into consideration the off-record transactions and indirect tax contributions through Value Added Tax (VAT). Moreover, the minibus taxi industry, which is characterized by the informal sector, contributes R12.6 billion annually to the national Gross Domestic Product (GDP) (Fourie 2005, 6). The misconception that the informal sector is less beneficial to the country's economy is rooted in the mistake most scholars make when trying to study the informal sector and its need to be regulated.

The Taxi Recapitalisation Programme (TRP) is central to these regulation or formalisation processes. The establishment of this programme was a joint agreement between the government and South African National Taxi Council (SANTACO) in 1999 that prioritized "bringing it (the minibus taxi) into the mainstream of transportation, and regulating the industry" (Fobosi 2003, 3). Much of this programme's work was concerned with the scrapping of old and damaged minibus taxis in exchange for new or second-hand minibuses still in good condition. The TRP was successful in magnifying the importance of the minibus taxi industry in urban mobility, as well as establishing a relationship between the government and the taxi industry. However, it caused more controversy than providing solutions. Fobosi continues to state that "the implementation of the TRP has been hugely problematic with serious disagreement existing even between taxi owners as to the nature that recapitalization should take" (2003, 3). For instance, he continues

"The South African National Taxi Council (SANTACO) stated that they have been marginalized from the programme. In this regard, every time the minibus taxi has stood on the brink of the final phase of formalization and of starting to reap the fruits of unity and formal business practices, the process becomes derailed" (Fobosi 2003, 3).

To Fobosi (2003), the TRP or general state efforts to formalize the minibus taxi industry will not be successful as long as they employ top-down processes that do not consider the self-regulatory nature of the minibus taxi industry (7). The miscommunication and disagreements emerging from this programme became a catalyst that exacerbated tensions and power struggles between the minibus taxi industry and the government. Specifically in the minibus taxi industry in Soweto whose taxi owners, drivers, queue-marshals, and executives form a part of a cohort of dissatisfied citizens and structurally oppressed residents of Soweto.

‘You Know How Our Government Is’: Pandemic Challenges in the Minibus Taxi Industry

Shortly after the first COVID-19 case had been confirmed in South Africa on the 5th of March 2020, President Cyril Ramaphosa announced a 21-day national lockdown that would take effect on the 26th of March 2020 that was later extended by 14 days to the 30th of April. This lockdown was determined by five levels of restrictions that are dependent on the health system’s readiness of the country and the rate at which the virus spreads. In response and to minimize and control COVID-19 and its consequences, the South African government established the National Coronavirus Command Council (NCCC) consisting of 19 cabinet ministers, members of the Inter-Ministerial Committee on COVID-19, their respective directors-general, the commander of the SA National Defence Force, the National Police Commissioner, and a secretariat, and is chaired by current President, Cyril Ramaphosa. The NCCC and the Ministerial Advisory committee are to research, monitor, advise, and guide the President and the health minister on the important factors to consider and appropriate steps to take when deciding to move the country from one lockdown level to another and provide solutions for containing COVID-19 (Gazette 2020, 3). These moves were largely determined by the increase in the average number of cases and active cases in hospitals. If there has been a spike in positive cases, the NCCC would declare a move up, and vice versa. Indeed, the management of the COVID-19 pandemic by the government was effective in that it prevented the rapid spread of the virus. However, by the end of the national lockdown level five, there were over 5000 confirmed cases, and 100 deaths due to COVID-19-related complications (WHO Coronavirus Dashboard, 2021).

The NCCC recognized that an enormous number of citizens use minibus taxis as their primary mode of transport. During lockdown level five, the minibus taxi industry transported essential workers and consumers of essential goods and services, both being critical for economic operation. The NCCC had to develop ways to minimize the spread of the virus through urban mobility while making sure that minibus taxis operate. One of the ways was the regulation of public transport through imposing strict laws regarding passenger capacity. They stated that

public transport was to decrease the number of passengers loaded onto the vehicles from 100% to 50% capacity as a way to control the spread of COVID-19. Minister of Public Transport and Safety, Fikile Mbalula, made this announcement across broadcasting platforms on 29 March 2020. This measure resulted in a great loss of income, resulting in the minibus taxi industry threatening the government with a shut-down of all its operations.

The chairperson of the ZTA, Bab' Zulu, recalled the taxi industry's experience during lockdown level five and shared that it had been the hardest time for the minibus taxi industry:

Bekunzima kakhulu. Well, is' Shockile i-Covid because it was not planned, uyabona? And reducing i-Loading capacity to 50% percent made our business bad and some of us are owing cars and amaBanks they didn't want to listen. Bebafuna imali yabo the way it is. But nje, business was bad because people were staying away from estradini so you'd make about R200 a day when usually you would make about R600-R800. Ngapha, the driver must get paid at the end of the week and end of the month kufanele ubhadale (amabank)¹². But it was a very bad two months. (Interview 1, 28 July 2021)

Bab' Zulu continued to share that because of these restrictions and how much they were financially affected by them, they had to increase taxi fare prices. When I asked him what factors they consider first when increasing the taxi fare, he shared it was mainly petrol hikes. He said that he knows that it seemed as though the association increased the taxi fare to cover for the number of passengers they lost. He continued to maintain that the main reason was to cover petrol costs that rose due to the country's economic state. Understandably, passenger capacity restrictions strained the minibus taxi industry even more due to their profit loss because people were not moving around frequently. Levels four and five of the national lockdown were the most stringent. Comprising of high levels of restrictions and state surveillance. People were only allowed to leave their homes for essential goods and services; to work from home and only go work if the occupation is considered essential for survival, and a curfew from 21:00 to 05:00 was enforced. Social gatherings and unnecessary local and international travel were banned as well.

¹² It was very hard. Well, COVID-19 shocked us because it was not planned, you see? And reducing loading capacity to 50% made our business bad and some of us are owing cars and banks didn't want to listen. In general, business was bad because people were staying away from the streets, so you'd make about R200 a day when you usually make about R600-R800. At the same time, the driver and the banks must be paid at the end of the month. It was a very bad two months.

We need not overlook the economic implications that COVID-19 has had on various industries. The outbreak of the pandemic happened at a time when South Africa was trying to recover from recessions where the economic growth rate decreased by 0.8 and 1.4 percent in the third and fourth quarter of 2019, respectively, and resulted in hyper-inflation (Bhorat et al. 2020, 9). Both the outbreak of the COVID-19 pandemic, and the approach that the South African government adopted to manage it had severe psycho-social, socio-political, and economic effects on South Africans. In essence, the containment of COVID-19 by relying on restricting local and international travel and social interactions indeed had positive results on decreasing the rate at which the virus spread, but it also unearthed a myriad of problems for citizens, the minibus taxi industry, and the government. The primary problem is a further straining of the relationship between the minibus taxi industry and the government over COVID-19 passenger capacity, and the COVID-19 Relief Fund.

When I asked Bab' Zulu (Interview 1, 28 July 2021) to describe the minibus taxi industry's relationship with the government or in questions concerning the government, he would always start with *ah uyayazi i-government yethu injani*¹³.

*It depends ukuthi who wants who. You know I-Government yethu, when they want us, they are our friends, but after we've provided their service, they become our enemies.*¹⁴ *They said they will help us with sanitisers, but they have been so slow. Sometimes we have to wait for weeks, and we end up buying for ourselves. I don't think they appreciate us as much as they should. We are helping the government. You must know that when there's a new development anywhere the first form of transport to be there are taxis and they know the role we play. Instead of coming to taxi people and improving, bona they are always looking for other modes to benefit. They give other modes of transport benefits that we cannot give because we are not subsidized. If anything, we are drifting apart from each other.* (Interview 1, 28 July 2021).

It is generally known that since its inception, the relationship between this industry and the government has been complex and tense. The COVID-19 restrictions on this industry offered

¹³ Ah, you know how our government is.

¹⁴ It depends on who wants who. You know our government. when they want us, they are our friends but after we've provided their service they become our enemies.

a new opportunity to explore these complexities and tensions. Paradoxically, the minibus taxi industry continues to be considered informal, while at the same time it is subject to formalization processes that it always seems to contest. Before the outbreak of the pandemic and unlike public bus and train services, the taxi industry regarded itself as a separate entity from the government. However, since the pandemic, it expressed a sense of financial neglect from the government and a need for urgent government assistance. This need being rooted in the industry's recognition of its importance for urban mobility, especially during lockdown level five and felt that it, too, was helping the government keep the economy alive.

It is also important that I note his reflection saying that I personally know how the government is. "You know how our government is" is a statement I grew up hearing all the time. Due to recurring protests against increasing electricity, water problems, and general service delivery in Soweto, the statement has spread quicker than COVID-19 itself lately. This statement has become the slogan that describes the disappointment in the service delivery in Soweto. This disappointment, I propose, is closely related to the apartheid era and the apartheid government's intentional underfunding of infrastructure in Soweto. Thus, contributing towards a growing perception that Soweto residents carried towards the post-apartheid government – centred around the government's failure to prioritize their basic needs. This perception consequently affects how people of Soweto construct a relationship with the government.

*Right now, they were supposed to give us the money for Covid that they promised. Instead of giving us the money, they are now giving us conditions on how to get that money, explains Bab' Zulu (Interview 1, 28 July 2021). Interestingly, he adds that *mntanam*¹⁵, the problem is not providing all these documents, but it is that these requirements were not there when we were helping them and transporting people during the hard lockdown till now.*

When I asked what the conditions are, he mentioned that they are now required to formally register taxi associations as actual businesses and income taxes, should fill in a "mountain" worth of forms and need to provide all operating licenses for all taxis operating under that association. According to the Government Gazette (2021, 7) the conditions to access the relief fund also include that taxi operators applying for the fund should also "include registration of employees with the Skills Development Levy (SDL), Unemployment Insurance Fund (UIF), Compensation for Workplace Injuries, Diseases and Death (COIDA) as well as compliance with the Sectoral Wage Determination by the Minister of Labour". It further states that "the

¹⁵ My child

taxi operator must ensure that within a period of two years from the date of submission of an application that the employees in his employment will be registered under the name of the company established and registered with the Unemployment Insurance Fund” (Gazette 2021, 7). The purpose of this fund, according to the current Minister of Transport, Fikile Mbalula, is not to compensate for lost income, but to pave a way to formalisation. He further asserted that for the minibus taxi industry to access these funds, they will have no choice but to abide by these conditions, consequently leading to a more formalised and ordered industry.

From this, it becomes clear that COVID-19 added to the already strained relationship between the government and the minibus taxi industry through the government’s promises to the industry regarding the national COVID-19 relief fund. The fact that the government uses the COVID-19 relief fund or monetary assistance as ‘bait’ to get the minibus taxi industry to be formalised suggests the importance of the industry to the economy. Not only did the minibus taxi industry operate during the hard lockdown levels to retain some income, the industry also perceives its operations as assistance to the government during a crisis. This perception then highlights that the minibus taxi industry feels unappreciated and unsupported, resulting in a further strain on their working relationship.

This chapter highlights that the Apartheid government provided mediocre infrastructure – including transport, housing, water, and health care, and fuelled the establishment of the minibus taxi industry. These infrastructural problems continue to persist in post-apartheid Soweto and have encouraged a growing perception that the government is inconsistent and inconsiderate of people’s wellbeing. ZTA members and drivers also constitute the cohort of residents with this perception and account for the government’s inconsistencies with providing PPE to association using the slogan “you know how our government is”. This chapter further highlighted that the relationship between the minibus taxi industry and the government has always had complex tensions. These tensions were exacerbated by the post-apartheid government’s strong objectives to formalise the minibus taxi industry. The COVID-19 Relief Fund that was initially allocated to the minibus taxi industry to help the industry financially and calm down threats of protests and operation shutdown has also increased tensions within this relationship. The government’s conditions to the COVID-19 relief fund continue to impose formalisation within the industry causing a further rift in its relationship with the minibus taxi industry. The use of money to stir the minibus taxi industry to agree to government formalisation incentives also does elicit the importance of this industry.

CHAPTER 4

Four-Four Masihlalisane: Being a Passenger in a Full Taxi During a Pandemic

‘Four-Four Masihlalisane’ is a commonly used term in the minibus taxi industry. It has been used to refer to the overloading of passengers inside the minibus when overloading was popular. Queue-marshals would say *four-four masihlalisane!* to passengers sitting in two or three seats to tell them to move over for other passengers. This chapter undertakes critical ethnography of the reported experiences of passengers after the lifting of the passenger capacity restrictions. COVID-19’s economic implications and challenges led to an increase in taxi fares which made passengers perceive the minibus taxi industry not only as inconsiderate and dismissive of their health but of the financial positions as well. Here, I argue that these economic implications that came with COVID-19 did not only lead to an increase in taxi fares. The taxi fare increases, together with the lack of formal training around health and safety also led to an increase in the amount of pressure under which minibus taxi drivers work. Leading minibus taxi drivers’ attitude towards COVID-19 restrictions or general public safety to be non-compliant. I further note that some passengers’ perceptions suggest that the non-compliance with COVID-19 restrictions by minibus taxi drivers has a critical impact on passengers’ attitudes and COVID-19 compliance inside minibus taxis, revealing a kind of authority that minibus taxi drivers have inside minibuses, and in the construction of passenger’s perceptions of health and safety.

The Silent Window Fight

On the 29th of June 2021, on a very gloomy Thursday morning in the first week of adjusted level 4, I took a taxi outside of my gate as per my normal routine. The taxi had approximately thirteen out of sixteen passengers inside. I could easily count this in my head because a seat in the second row from the back seat was empty, and that is where I sat. On my right was a closed window that I shared with the person sitting behind me. Right behind me, at the far-right corner of the back seat, was a man that I would assume was in his middle forties, sitting with his black cloth masks rolled down his neck. On every taxi ride, I make sure the first thing I do is open the window (if I am sitting on a window seat, that is). And that is what I did when I got in the taxi. A few minutes into the ride, the man pushed the back of the window and closed it. I immediately opened it. He closed it again, and I opened it. This silent window fight went on for about five minutes. There was no other window open in that taxi, so it was very important

to me to win that fight. For my sanity and my health. Luckily, I knew the passenger who was sitting next to me. I occasionally see him when I go to my local Candy's tuck shop. This is a tuck shop that is praised for its services and affordability and is thus used by many residents in Khulu. He noticed the silent window fight between me, and the man sitting behind me and asked, *kanti*¹⁶ *what is this man's problem with the window?* He then reached for a box of matches in his right pocket, gave me one match stick, and told me to put it on the window trail to block the window from completely closing. It worked. When the man tried to close the window, he could see something blocking it, and shouted *yey wena ngwanyana, ke nale flu maan!* I calmly replied and explained that I did not even open the window that wide and that if I keep the window closed, he will expose the entire taxi to his flu. My concerns were beyond being worried about catching the flu from the old man. I was anxious that it could be COVID-19, especially considering that people in the township do not test for COVID-19 because of financial reasons, and nor will many disclose their COVID-19 status to a random stranger/passenger. COVID-19 testing is mostly available at a cost in South Africa. There have been instances where the President spoke of free testing stations in underprivileged communities since April 2020, however, those have not been seen nor been accessible by me and the interviewees. COVID-19 tests range from R350 – R800 depending on where a person tests and whether it is a rapid test or not. To my interviewees, and probably to many people in Khulu, this is expensive and is one of the major reasons why they are discouraged from testing. For this reason, we live in a constant state of the unknown and fear of flu symptoms inside a confined minibus taxi hoping all the while that these symptoms are not COVID-19 related.

This incident occurred during my ethnography, while passenger participants wrote in their taxi diaries. As I analysed the few taxi diaries that I managed to gather by the end of August, I realised that the taxi diaries reflect the same anxiety that I experienced regarding flu symptoms in other passengers.

In the first week of keeping her diary (dated 7th June 2021), Musa (Interview 13, 24 August 2021) wrote:

the guy next to me keeps coughing. Even the taxi driver keeps looking at him.

The same sentiment is also seen in her third week (dated 23rd June 2021) where she wrote:

¹⁶ But.

the lady sitting next to me keeps coughing at least she coughs the right way and she's wearing a mask but I can't help but feel anxious.

The lack of punctuation in the latter taxi diary also made me feel her anxiety as I read it. Musa's diary reflects an association of coughing with COVID-19. Before the COVID-19 pandemic, soliciting flu symptoms, especially coughing, sneezing, and runny nose was normal and common. However, since the outbreak of the COVID-19 pandemic, experiencing these symptoms publicly has become automatically associated with COVID-19 even without knowing or asking the person's COVID-19 status.

In my follow-up interview with Musa, she provided the context about the woman who sat next to her and kept coughing. She says that she was on her way to work, and they sat in the seat right behind the driver. Musa says that this lady sat in-between her and another lady who had an infant wrapped in a blanket. *She kept coughing and coughing. It was not a small cough; it was those coughs with phlegm and a runny nose. Yoh! I was sure I was getting COVID-19 that day!* (Interview 13, 25 August 2021). She ended the sentence with a subtle but nervous chuckle. I could tell she was aware of her exaggeration, but I continued to ask why she thought it was COVID-19. She adamantly said, *phela we don't know each other or where we come from. It could have been a simple flu, but it also could have been covid* (Interview 13, 25 August 2021).

The same view is expressed by Noni (Interview 17, 30 August 2021). She shares that people come from all walks of life and have different hygiene practices, so you can never be sure. Here, it becomes apparent that the issue does not only lie in the cough depicting COVID-19 symptoms but it is also linked to the fact that passengers do not know each other or where they come from. In other words what their history of exposure and possible infection may be. The issue of traveling with strangers that comes with other passengers in the minibus taxi exacerbates the anxiety that comes with the already existing dangers inside the minibus taxi. Not only is it about not knowing a stranger's whereabouts, but it is also about not knowing the type of health attitudes and compliance with COVID-19 regulations outside of the minibus taxi. Thus, resulting in other passengers perceiving or associating flu-like symptoms with COVID-19.

Sharing a small vehicle at full capacity increases the susceptibility of passengers to contracting whatever type of virus is there. The confinement of the minibus taxi and the inability for passengers to social distance makes it incredibly easy for passengers to pass on diseases onto people they engage within their everyday lives. This lack of social distancing in confined

spaces can be dangerous for passengers who have to go back to confined homes with very little, to no space for social distancing.

COVID-19 magnifies the dangers of mass transportation during the pandemic. The decline in public transport use can be primarily related to its paratransit operations. Minibus taxis open their doors for an incredible number of people per day and the transmission of COVID-19 being through human-to-human interactions poses an incredible risk for passengers. Minibus taxis are among various hotspots of COVID-19. A majority of the minibuses under ZTA that operate along the Johannesburg are Toyota Quantums that load a maximum of 16 passengers – 3 to 4 people sit closely side-by-side in seats arranged in rows, making social distancing impossible. Subsequently making passengers more conscious about the dangers that come with 100% capacity. Heshner (2020, 551) notes that fear and anxiety of being exposed to COVID-19 are incredibly high in shared modes of transport and have been central to the sudden hesitancy of using public transport. The idea of traveling with other people (that you most likely do not know) has shifted and altered the perception of traveling in public transport. What was considered the most convenient and most affordable way to move around the city has become dangerous and a cause of great anxiety.

To Kimberly, traveling during a pandemic at 100% capacity *is a time of paranoia*. She began her description with a brief sigh and further explained that *I have become very anxious about using a taxi now because there's too many of us. And sometimes the taxi is overloaded, and you can't say anything about it* (Interview 3, 10 August 2021). Nine passenger participants share the same view. In my experience, I had only used a taxi during adjusted 50% passenger capacity once and that was one of the few times I felt comfortable traveling in the minibus during the pandemic. During this time, a three-seater row would only sit two passengers and a four-seater row would seat three people both allowing space in-between the passengers. It is common perception that taxi rides felt significantly safer during this period.

Bhut'Themba shares a similar reflection and says:

It was better when it was 50% capacity, my sister. Noma beku for ishasha nyana but at least it was safer maan¹⁷. There was always space between the next person and me. But manje ku

¹⁷ Even if it was for a short while, it was safer man!

100% it's scary¹⁸. It's even worse when they don't want to open windows, it's like we're breathing the same air. But during 50%, I knew even if someone would cough or the windows are not open, I felt a little bit of i-distance between the passenger, the virus, and I¹⁹. (Interview 4, 13 August 2021)

However, it is important to note that not all passengers experience this anxiety in the same way if felt at all. Kamohelo (Interview 5, 15 August 2021) shares that her experience has not changed when comparing the pre-covid and during the pandemic. She says that people's behaviours and their non-compliance give her the impression that we are still living in a world without COVID-19. This has made her feel indifferent about traveling (Interview 5, 15 August 2021). Sis' Mavis (Interview 6, 17 August 2021) also expresses some indifference when we began a conversation about the increase in passenger capacity. She recalled an experience in the taxi where she was in an argument with a young lady that was sparked by radio news reporting the increase of passenger capacity to 100%. Sis' Mavis recounts that the young lady shouted *yohh sizofa! Ngapha nemali yetaxi ikhuphukile? Hai cha shame!*²⁰ ending that statement with a clap of hands. When sis' Mavis asked the young woman why, the young woman said that the taxi will be too confined and dangerous when there are many people inside the taxi, and that how come the taxi fare is not decreasing since the industry is increasing their loads (Interview 6, 17 August 2021).

Of course, the young lady's concern about dying (from COVID-19) due to the increase of passenger capacity may be an exaggeration but it is valid. Sis' Mavis herself confirmed that. However, she says that she feels like the lady was too dramatic because the taxi has always carried many people at a time and that a person can get COVID-19 from anywhere, even if there were three people in that space. Sis' Mavis' argument is also valid and need not be dismissed. Although the increase of passenger capacity poses a significant risk to passengers and is perceived as an actual risk, it does not take away the overall risk of contracting COVID-19 in most spaces. However, even so, a majority of my passenger participants confirmed that they did not feel safe traveling during the pandemic in a minibus taxi. Besides them expressing their discomfort with mass travel through their experiences, they often used the words "scared" and "anxious" when describing particular experiences of traveling at full capacity.

¹⁸ Now at 100% it's scary.

¹⁹ I felt a little distance between the passenger, the virus, and I.

²⁰ Yoh! We are going to die! Plus the taxi fare also increased? Oh no, shame!

Seven out of ten passengers acknowledged that it is not entirely up to the government and the minibus taxi industry to make them less susceptible to COVID-19. However, they argued the government's decision to increase the passenger capacity in the minibus taxi industry did not include them and all they cared about was taxi fare. *Hai these people don't care about us. iGovernment nayo i-taxi industry, no one cares if siyagula.*²¹ *They just want our money. They didn't even ask or think how that makes us feel. They just changed the regulations so quickly* says Thabang (Interview 7, 22 August 2021).

Paballo (Interview 9, 23 August 2021), who is a student, shared that she even had to stop going to school regularly because of the taxi increase. Instead of going four times as she prefers, she had to cut down the days and go to school once or twice a week because it was getting too much for her mother. Her statement was followed by a brief, but very loud silence. I wish I had seen her facial expression when she said this. I wanted to see if she was as frustrated as she sounded.

*Nginabantwana bakithi abanye abayi-3 who have to go to school*²². My transport expenses were starting to stress my mother, so I had to sacrifice my two days so she could stress less. *Mina the way ngibona ngakhona*²³, *it's like our fares matter more than our wellbeing. And even as umuntu obhadalayo, we are not treated like paying clients, ngathi basenzela ifavour*²⁴. *Ngapha they only decreased the taxi fare by R1 a year later, even after balayisha ku100%*²⁵. *Uyabona nawe ukuthi akukho fair*²⁶. *Whether we can afford it or not they don't care.* (Interview 9, 23 August 2021).

Thabang and Paballo also make a critical point that has also been highlighted in Gloria Sauti's *Minibus Taxi Drivers: Are They All Children Born from the Same Mother*, Sauti (2006, 43) undertakes a critical analysis of minibus taxi drivers' attitudes towards road safety to understand whether it is shared behaviour or general stereotypes along the Johannesburg-Randfontein route. The basis of her research indicates that passengers have highly common complaints about minibus taxi drivers, leading her to analyse minibus taxi drivers under the concept of them being children of the same mother. Among the common passengers'

²¹ The government and the taxi industry, no one cares if we get sick.

²² I have three other siblings who have to go to school.

²³ The way I see it,

²⁴ And even as a person who pays, we are not treated like paying clients, it is like they are doing us a favour.

²⁵ On top of that they only decreased the taxi fare by R1 a year later, even after loading at 100% capacity.

²⁶ You see that it's not fair.

complaints including those related to reckless drivers or aggressive attitudes, Sauti (2006, 43) finds that passengers feel that their experiences are often overlooked in the minibus taxi industry.

To argue this, Bab’Zulu (Interview 1, 28 July 2021) asserted that ZTA allocated Tuesdays to tending to passenger’s complaints of non-compliance with COVID-19 inside their taxis.

They (passengers) explain that the driver would drive them to a certain point without him wearing a mask or if the taxi even filled up and he was not wearing a mask. When reported, the driver is then summoned to the office. If you have been reported a lot, you are suspended. Others fined.

As useful as allowing passengers to complain directly at the association, the process of this is unknown to passengers. All of the passenger participants asserted that they had never heard of it. Instead, Themba (Interview 4, 13 August 2021) made an interesting point in his answer.

I didn’t know about that yazi. Maybe if they would make ama-announcement kuma-poster the way they do when they tell us imali ye-taxi mayikhuphukile, we would know.²⁷

Themba’s answer is true. ZTA makes A4 posters that announce fare increases. These are displayed on the inside of the minibus taxi for passengers to see. On the poster, you find the logo of the association, contact details, the effective date, and the new proposed fee for different routes under ZTA. Much effort is placed on sharing and making information regarding taxi fare increases accessible more than COVID-19-related guidelines that could help make passenger’s journeys safer and feel more included in processes and guidelines that affect them.

The taxi fare increase took effect during lockdown level five towards the end of April 2020. It increased from R14.00 to R17.00 (R18.00 to those who reside on the outskirts of the Khulu Township). Meaning the minimum cost for trips to and from Johannesburg every month cost approximately R680. For Litha (Interview 8, 22 August 2021), this was expensive. He is the primary breadwinner for a family of six, excluding himself. He lives with his grandparents, his mother, older sister, his girlfriend, and his two-year-old son in a two-bedroom house. He works as a computer technician on an 18-month contract at a high school in Fourways. His older sister works piece jobs, so she helps where she can, but the rest of the adults in his family are unemployed. Litha (Interview 8, 22 August 2021) says since his workplace is in Fourways, he

²⁷ I didn’t know about that, you know. Maybe if they would make announcements on posters the way they do when they tell us about the fare increases, we would know.

pays double transportation fees because he takes another taxi in Johannesburg. On top of that, he shares that the taxis to Fourways also increased the taxi fee from R15.00 to R16.00.

I honestly didn't know how much this increase affected my monthly budget until I sat down nge-calculator²⁸ and calculated. Before covid, I spent R1392, but after covid, I spent R1584 per month, which is about R192 increase. To me, that's a lot of money. I could have done a lot endlini²⁹ with that money. (Interview 8, 22 August 2021)

Six out of ten passengers are in Litha's (Interview 8, 22 August 2021) situation and are primary breadwinners in their homes, while two are students like Paballo (Interview 9, 23 August 2021). They have to take other taxis, under different associations, from Johannesburg to get to work, school, or their preferred shopping centre. They have to use double transportation which means they have been affected by the fare increase of more than one taxi route and association. This shows that the increase of taxi fare was not only among ZTA minibus taxis but also in a majority, if not all, of associations as well. Moreover, despite the return to 100% passenger capacity, the taxi fare did not revert to its previous rate of fares. This meant that passengers paid a higher price for a less safe journey.

From these reflections, it becomes clear that participants perceive the taxi fare and passenger capacity increases as inconsiderate and overlook their financial situations and their exposure to COVID-19 infection.

²⁸ With a calculator.

²⁹ At home.

No Face (Mask), No Case!

Originally known as “No face, no case!”, is a conception in townships that prosecutors have no case if a suspect’s face is not on any evidence. The conception is now widely used in different contexts to indicate that when there is no face, there is no issue. In the context of this chapter, I use this slogan to refer to the compliance with face masks inside the minibus taxi. That even when a person is not wearing a face mask, there is no issue.

The joys of living in the one of the main roads of Khulu Township is that I have abundant access to the minibus taxis that operate to and from Johannesburg right outside my gate. On a Tuesday morning during adjusted level three, I was approached by a Toyota Quantum minibus taxi bearing a blue sign on A4 paper in its window. It read No Mask No Entry. “No Mask, No Entry” has grown to be as important as the logo of every formal and informal brand and business. Whether it is shops in Small Street in Johannesburg, or a backroom turned salon in Maseru Street in Meadowlands. It has become as common as a “STOP” sign. I remember a part of me feeling a very calming sense of relief before I even entered the taxi. The sign somehow assured me that this taxi would be safer than others I have been in since the pandemic started. Little did I know.

As I entered the taxi, there were two people inside – the taxi driver and one passenger. The taxi driver was wearing a blue surgical mask and had his window rolled all the way down. The passenger, on the other hand, who was a young man in his mid-twenties, sat in the seat behind the driver, had his cloth mask rolled down his neck and his window shut. Luckily, the wind coming in from the driver’s window occasionally blew in his face and allowed for air to circulate around the entire taxi. I sat in a window seat two rows away from him. As the taxi continued to hoot around Khulu, with the taxi driver shouting “Jozi! Jozi!” from corner to corner, he picked up three passengers along the way. An old lady wearing a surgical mask, a young lady who wore her mask only after getting seated, and a man in his late thirties who was not wearing a mask at all, nor did he even show signs of looking for it. As he picked up the two passengers without masks, my anxiety levels went up. I was suddenly overwhelmed by an incredible sense of worry and confusion that led me to open the window next to me completely.

Considering the many presidential addresses on COVID-19 since March 2020, I find myself in situations like this more often than I believe I should. It is also on these occasions where my brain is flooded with questions that many may find rhetorical, but I could not have logical answers for – how are there passengers in the taxi not wearing a mask when there is a sign on the taxi door? Did they not feel the need to comply to the sign? Did they just choose to ignore it? Why is the driver not saying anything? Why am I hesitant to say something to them or the driver? Whose responsibility is it to speak up? Why are other passengers not saying anything? Amongst the many possible answers to these questions, my answer is that some passengers and minibus taxi drivers are genuinely indifferent about COVID-19 restrictions, while others are not. Secondly, from my everyday experiences in a minibus taxi, generally speaking up about anything is difficult because many drivers, perhaps most, are cheeky and sometimes aggressive. While interested in answering these questions, I began to extensively think about other factors in passengers' experiences that make travelling in a minibus taxi during the pandemic more unsafe.

At the beginning of my ethnographic fieldwork, I would count the number of people who are not compliant with wearing masks inside the taxi and make notes on my phone as the driver would pick up passengers along the way. There was never a day where my daily total of non-compliant people was less than three people (including the driver). On a bad day, they would even reach nine people. Eventually, I stopped counting because the numbers had made a point and it was clear – the compliance with mask wearing inside the minibus taxi is low.

Kimberly's diary, dated 4 June 2021, reads:

The guy sitting next to me was making convo but he wasn't wearing a mask.

Bhut'Themba's diary, dated 6 July 2021, reads:

At least 5 people aren't wearing masks INCLUDING THE DRIVER.

Fana's diary, dated 20 July 2021, reads:

The taxi driver and this one guy aren't wearing masks and they seem to know each other person cos they talking.

Kamohelo's diary, dated 19 August 2021, reads:

Morning JHB CBD taxi was long due to traffic, my anxiety peaked even though everyone was sanitised some passengers had no masks on.

Non-compliance inside the minibus is not just focused on masks, but also on the use of the sanitiser both by queue-marshals and passengers. There are a very few numbers of drivers who have sanitisers in their taxis or use them. Leaving the surfaces of the taxi exposed to COVID-19 and passengers going in and out of the taxi vulnerable to touching it and contracting the virus. A majority of the taxi diaries show that there is a lack of sanitisers available for use inside the taxi.

Thabang's taxi diary, dated 14 July 2021, reads:

This taxi does have a sanitiser, but it wasn't used.

Sis' Mavis's taxi diary, dated 17 July 2021, reads:

Most people are wearing masks but the lady next to me isn't wearing it over her nose. No sanitiser was used.

Musa's diary, dated 25 July 2021, reads:

Afternoon taxi from JHB CBD made me uncomfortable, no one was sanitised, and the driver was not fazed by most passengers having no masks on.

Kamohelo's diary, dated 30 July 2021, reads:

A sanitiser wasn't used as per usual.

Litha's diary, dated 15 August 2021, reads:

We weren't sanitised but at least everyone is wearing a mask.

During the trip, money is exchanged. Passengers in each row pass on the total taxi fare of that row to the driver. The money is first exchanged among passengers in each row, each gives the other change, and the last person passes the money on to a passenger in the next row until it reaches the driver. This practice is known to many as "taxi maths" and it involves direct hand-to-hand physical interaction. Not only is the non-usage of the sanitiser a concern, but it also poses a great risk particularly during trips because of the exchanging of money that happens once the taxi is at full capacity. At the level of passengers, five asserted that they do not carry or buy their own sanitisers because they are an extra expense and tend to compensate for this expense by relying on those provided to them when they go to malls, work, or school.

I will not dismiss those who carry their own sanitisers and sanitise themselves once they have paid and received their change. However, an enormous number of passengers I have been in taxi with did not sanitise after taxi maths. Consequently, making passengers indirectly

exchange germs and viruses, making them susceptible to COVID-19 inside minibus taxis because of the lack of accessibility or use of the sanitiser inside the minibus taxi.

The non-compliance of masks may have been overtly clear, but the reasons behind them are not. Thus, I became interested in exploring what reasons lie behind passengers' and drivers' non-compliance with masks inside the taxi. A few of my participants have shared that they themselves do not always comply to wearing masks inside the minibus taxi. Fana (Interview 12, 25 August 2021) shares that *ai mina the masks irritate me maan*³⁰. I could tell how agitated he was as he said this from the tone of his voice. He continued to say that *yazi, I know we are all supposed to be wearing masks but sometimes it gets too hard to breathe in it and I just take it off*. Kamohelo (Interview 5, 15 August 2021) shared the same view and added that her face gets irritated when she puts it on for too long. When I asked both of them if they are not scared of contracting COVID-19, they both assertively shared that they could get COVID-19 anywhere, with Fana (Interview 12, 25 August 2021) adding *that sister, if doctors can get covid while wearing those double masks and white PPE suits, who are we?* This not only shows a mistrust of the PPE, but also shows that passengers feel that everyone is vulnerable to COVID-19, regardless of the degree of compliance.

Studies have reported that the use of personal protective equipment (PPE) reduced the nasal and oral transmission of COVID-19 (Ha 2020, 4; Khunti et al. 2020, 413; Randeki 2020, 13). Thus, their use has been made compulsory by many governments across the world and at the centre of health preventative measures in health policies. The strength of surface disinfectants, the composition of hand sanitiser, and the right material for the construction of personal protective equipment all have a role in the efficiency of preventative measures and have been the centre of studies in a significant pool of existing literature concerned with COVID-19. In my general experiences of using a minibus taxi, PPE is mainly associated with masks and sanitisers, but mostly masks. Mask-wearing has indeed been useful in curbing the virus, but it has also shifted the meanings and conceptions of the mask, making it a marker of risk or compliance inside the minibus taxi. Its absence reflects a danger and its presence reflecting safety.

Coupled with the shortage of PPE, the non-compliance with the wearing of facemasks has been one of the major challenges since the pandemic started (Adeleye et al. 2020, 446). Even Bab' Zulu (Interview 1, 28 July 2021) shared that on top of not making money, the biggest difficulty

³⁰ Argh, me masks irritate me, man!

that ZTA experienced was passengers not wearing masks. Non-compliance with mask-wearing restrictions can be due to a number of external and/or personal factors. However, it has generally increased with the easing of lockdown restrictions and the gradual move back to ‘normalcy’. Reicher and Drury (2021, 1) describe this as pandemic fatigue thus – “the notion of behavioural fatigue associated with adherence to covid restrictions” and state that this fatigue has caused people to find it hard to be compliant with COVID-19 restrictions, or to tend to overlook the importance of complying with these restrictions. Although this is becoming common, however, in the minibus taxi industry, pandemic fatigue is arguably not the case, because non-compliance was still considerably common even in the first few weeks after the outbreak of COVID-19.

On top of having to share a cash-based minibus taxi at 100% capacity and general under-usage of non-pharmaceutical interventions (NPIs), a significant number of minibus taxi drivers load passengers that are not wearing masks along the Khulu-Johannesburg route. When I asked Bab’Samson (Interview 10, 23 August 2021) who is a taxi driver, if he loads passengers without masks inside his minibus taxi, he says that he does, but not all time.

This (COVID-19) has really affected us sisi wami³¹. We know that there is a virus, but we also want money. So umuntu makangafakanga i-mask,³² I don’t have a choice but to load them. The same way I will not ask somebody to get out of i-taxi yami because abana mask³³. Sis’ wami³⁴, you know how this business is. I need to always be on the road making money. If I always have to choose passengers who are wearing masks only, then I will not make money. (Interview 10, 23 August 2021)

He continued to share that working during the pandemic has been difficult because people are working from home and students are studying from home and that he is always under pressure to make at least R400 per day, and that affected how he worked. Economic implications of COVID-19 exacerbated the pressure that minibus taxi drivers work under. The increase in working pressure since the national lockdown began proved to also have an influence on minibus taxi drivers’ non-compliance to COVID-19 restrictions during trips. This shows that COVID-19 significantly increased the already existing pressure that minibus taxi drivers are under, exacerbating their non-compliance with COVID-19 restrictions.

³¹ This has really affected us my sister.

³² So when a person is not wearing a mask,

³³ The same way I will not ask somebody to get out of my taxi because they do not have a mask.

³⁴ My sister,

Bab' Zulu recalled an interaction he had with a passenger during level five when he monitored taxi operations at Bree Taxi Rank. A passenger was arguing with a queue-marshall about them not wanting to wear a mask. He was able to specifically quote the reasoning of the passenger for their non-compliance and says that she said but *uDriver akafanga iSeatbelt, why mina kmele ngifake imask?*³⁵ To Bab' Zulu, this reasoning made no sense at all. He says that this was confusing because first, the seatbelt has nothing to do with COVID-19; second, unlike the mask, the seatbelt only protects the driver from danger and not the passengers. I understand Bab' Zulu's view. It is valid. However, I somehow also understand what the passenger was trying to say. Minibus taxi drivers tend to not comply with road safety and that puts passenger's lives at risk (Sauti 2006, 40). So, when the passenger suggests that they are not going to wear the mask, it was them being spiteful and wanting to reciprocate the non-compliance in general inside the minibus taxi. Drivers' attitudes towards health and safety seem to have an impact, at least to some degree, on how passengers perceive their safety as far as health is concerned.

Bab'Samson (Interview 10, 23 August 2021) is a driver I had a brief conversation with on my ride from Bree Taxi Rank back to Khulu township. He was not wearing a mask and had a black reusable mask dangling on the gear attached to the back of the steering wheel. I was sitting on the front seat and had just finished giving all the passengers their change and giving the total fare to him. The taxi was on the Soweto Highway and had just passed the FNB stadium and was stopped at a roadblock of six metro-police cars. He asked me to quickly give him his mask while he tries to put the money, I had just given to him away. *Sister, sister!* (With an emphasis on 'r') *Ngiphe le mask yam! Ngiphe le mask yam!*³⁶, he said in a panic. I even started shaking as I was reaching for his mask. He quickly put it on and left the vehicle to go speak with the traffic officer. He walked back, opened the door and said *ey hade sister for ukuk'thusa. Labantu bayahlupha!*³⁷ as he was hopping back onto his seat. I asked him what happens if they do not wear a mask and he shared that minibus taxi drivers get fined if they are not wearing a mask more than when they are not wearing a seatbelt sometimes and he just could not take the risk. I then continued to ask if they get fined if passengers are not wearing a mask and he said he was not sure. *Ama-traffic cop akhuluma nathi mostly, not passengers*³⁸. Our conversation then got cut-off because I was approaching my stop. As brief as this conversation was, it made me realize that minibus taxi drivers require enforcement or incentives to comply with COVID-19

³⁵ But the driver is not wearing a seatbelt, why should I wear a mask?

³⁶ Give me my mask! Give me my mask!

³⁷ Ey sorry, my sister, for scaring you. These people are a problem!

³⁸ Traffic cops mostly talk to just us (drivers)

precautions inside the taxi in the same way that passengers expect such enforcement from drivers.

Ironically, a few of my participants have noted something I have found quite interesting in my ethnography. Minibus taxi drivers are generally known for not abiding by rules and as a result, are often stopped by traffic officers. It is very rare to come across a taxi driver with their seatbelt on from the beginning of a trip to the very end. Instead, they often put the seatbelt on when they approach roadblocks. Generally, the everyday practices of taxi drivers generally suggest that public rules do not apply to them. The interesting part is that COVID-19 has somehow shifted that habit. Now, minibus taxi drivers reach for the mask instead of the seatbelt.

Ntate Khuboni, (Interview 15, 31 August 2021) who is one of the queue-marshals at Bree Taxi Rank agitatedly shared that *they don't want to wear masks these people!* When I asked who he is referring to when he says “people”, he says *drivers and passengers! Konke! It's like si-deala nabantwana*³⁹. His comparison of taxi drivers and passengers to children serves as an indication of non-compliance and oblivious behaviour towards COVID-19 restrictions. That they must be instructed on what to do like children. A much broader discussion of queue-marshals follows in Chapter five. However, it is worth noting that Ntate Khuboni's reflection not only shows that queue-marshals have to instruct compliance onto drivers, but it also highlights, I'd like to propose, that due to the lack of general training and education on road and passengers' safety common among drivers (Khosa 1996, 25), drivers need to constantly be instructed to act or comply with COVID-19 restrictions. Non-complying passengers expect drivers to tell them to comply. While drivers only comply when stopped by traffic officers or told by queue-marshals. This does not indicate a need, but it highlights a lack of accountability and responsibility for their health and others. Furthermore, the casualness about driving safety indicates a shift in the importance of safety or in how the public views safety during the pandemic. Due to COVID-19 restrictions instructing people to wear masks in public spaces at all times, the mask is now deemed more important than the seatbelt for both reasons of health and to avoid fines from traffic officers. Although both play a critical role in ensuring safety inside the minibus taxi. This shows how perceptions of safety shift with context and how biopolitical power affects how people view safety.

³⁹ Everyone! It's like we are dealing with children.

Conclusion

This chapter argues that not only did the government's vast adjustments of passenger capacity restrictions make mass public transport use dangerous and passengers more susceptible during a pandemic of a communicable virus, but that these adjustments have greatly affected passengers' experiences of travelling. Taxi fare increases took effect at the beginning of the pandemic and only decreased by R1 over a year later. Reported experiences of passengers in this chapter have highlighted that some passengers feel that their fares mattered more than their health and disregarded their financial situations. Passengers' experiences have shown connections between driver's attitudes about COVID-19 restrictions inside the taxi and general conditions of health and safety. Drivers' non-compliance to road safety have permeated their attitudes towards complying with COVID-19 restrictions. Such attitudes are driven by drivers' pressure to make enough money. For complying passengers, all of the aforementioned combined evoke a constant anxiety when travelling with a minibus taxi.

CHAPTER 5

No Mask, No Entry

There was a day where I was in a Johannesburg-Meadowlands route queue at Bree Taxi Rank. In front of me were two other passengers – an old woman and her son at the front and a young woman behind them, then it was me. The old woman could not stop telling the queue-marshal (and well, the rest of us in the queue) that her son was in fact not going to get on the taxi because he lived at the University of Johannesburg and had to quickly go back. More passengers lined up after me and soon enough a red quantum lined up on our route. As the queue-marshal was preparing to sanitise us, the woman quickly snatched the sanitiser out of his hands. This action made everyone very interested to see what she was going to do next. She first sprayed her hands thoroughly, so much that the sanitiser began to drip from her hands. Right after that, she began to spray her head, then her face, then her torso, then her back, and over skirt, under the skirt, all the way down to her feet. She then ended her dramatic sanitizing scene with a closing statement saying, *ngiyekeleni, mina ngisaba ukufa*⁴⁰.

As much as many may say this old woman's actions were dramatic, we could understand that she was just trying to protect herself from COVID-19, or in her perception, death. We could all also understand her fear while at the same finding humour in the situation. This made me realise that some passengers go beyond complying with the COVID-19 regulations. They adopt personal protective behaviours against COVID-19 that are indicative of accounting for their health. The lack of accountability or responsibility for compliance prevalent during trips has highlighted an interesting point. As opposed to asserting that people inside the minibus taxi take responsibility, some of my (complying) passenger participants adopt personal protective behaviours that help them have safer trips during the pandemic. In other words, being more responsible in how they counteract their vulnerability inside the taxi.

I have also seen many minibus taxis, especially Toyota Quantums with “No mask, No Entry” signs placed on the passenger door window. Whether or not they foster compliance or not, these posters need not be dismissed unthinkingly, as their existence has somewhat of an impact on passengers travelling together. At first sight, the sign cannot be ignored and demands a level of compliance. Although there were people who were not complying to the sign during the trip, that does not dismiss the other passengers who did comply. Maybe they

⁴⁰ Leave me alone, I am scared of dying.

initially complied for their own personal health reasons, however that sign also played an incredible role. These “No Mask, No Entry” signs and the other ways the minibus taxi industry that I will briefly discuss in this chapter show the minibus taxi industry does attempt to help minimize the vulnerability of passengers during trips.

Passenger participants often reported that profits are prioritized over their health. It is also impossible to overlook the fact that the COVID-19 restrictions employed by the government on public transport, ZTA and many other associations have enabled people to go to work and feed their families. This chapter highlights that reported experiences of passenger participants who do comply to COVID-19 restrictions during trips show their sense of responsibility to account for their health is connected to their need to keep working in order to put food on the table.

Taking Responsibility

When passenger participants were asked what extra precautionary measures they take, the most common answers are as follows:

- Wearing of two or three masks,
- Carrying own sanitiser,
- Avoid interior surfaces of the minibus,
- Sitting at the back seat to avoid taxi maths and passing around of money,
- Sitting next to an open window,
- Bathing,
- And home remedies (ginger and lemon water, boiled herbs).

The mixture of biomedical medication and PPE, as well as home remedies not only highlight the measures that passengers take when having to travel inside minibus taxis, but it also elicits the perseverance of medical pluralist beliefs of care and treatment in South Africa. The belief and use of these concoctions and different medical beliefs is indicative of passengers taking responsibility before or after they embark on their trips. This tells me that although passengers are vulnerable to contracting COVID-19 during trips because of the high levels of non-compliance and lack of responsibility from both taxi drivers and passengers, passengers seem to actively take more responsibility outside of the minibus taxi. But passengers are scared to speak up for themselves, and thus prefer taking responsibility in their own personal spaces.

When I asked participants who they think is responsible for minimizing the risk of contracting COVID-19 inside minibus taxis during trips, all participants shared that it is each and every citizen's responsibility.

The following is Paballo's (Interview 9, 23 August 2021) reflection highlighting the emphasis that people 'knowing' about the virus places responsibility to comply:

Honestly, Dineo. We all used to look forward to hearing from the President. Especially ngamalanga okqala nje we-Covid⁴¹. We all wanted to know what we were dealing with. And it wasn't a thing yokuthi others are immune or safe from the virus, anybody could get it, so we were all scared and had to know ukuthi kwenzakalani⁴². Only kids can be excused because they don't know any better, but everyone knows. Anyone who says otherwise unamanga! So, since you know, just act right!⁴³ Thinking that it's just the driver or the queue-marshal's responsibility is crazy because this is your life.

Even Bab' Dlakadla (Interview 14, 24 August 2021) who has been a queue-marshal at Bree Taxi Rank for eight years, also shared that queue-marshals should not have to reprimand passengers because of their knowledge of COVID-19 and says, *abantu we don't have to tell them kakhulu because most know. Yilabo nje abazenza abo-Clever.*⁴⁴

Interestingly, the most common reasoning behind these answers was that "everybody knows about COVID", "people know", "as a person you know" are the most common words found in my data when I asked interviewees about who they believe is responsible to ensure COVID-19 compliance inside the minibus taxi. The South African government employed critical principles of governance in the management and facilitation in the combat against COVID-19 since its first diagnosed case on March 5th, 2020. Some of these principles include transparency, public participation, and accountability (Munzhedzi 2021, 2). Besides the fact that the constitution obliges the state to act in a transparent way, according to Sections 195, 215, and 217 of the 1996 constitution of the Republic of South Africa, transparency increases the likelihood of state actors and government officials to act in the interest of the public (Munzhedzi 2021, 5).

⁴¹ Especially during the first Covid days.

⁴² Had to know what was happening.

⁴³ Anyone who says otherwise is lying!

⁴⁴ We don't have to tell people a lot because most know. It's just those ones who think they are clever.

At the level of the public, knowing about COVID-19 and its implications on the country also places onus on citizens to act in a manner that promotes compliance to COVID-19 restrictions put in place and for personal health reasons. It seems like to some, “knowing” or having access to information about the virus or the presidential addresses about COVID-19 transfers responsibility of complying with COVID-19 restrictions in and outside the minibus taxi. Mass media has played a critical role in this as well. Not only in televising presidential addresses and broadcasting it on different news, but social media, pamphlets, medical marketing, and the radio have also managed to reach those that cannot access television. Campaigns promote health behaviour under the postulation that providing scientific and (somewhat) factual information about COVID-19 will encourage them to behave in health promoting ways (Bettinghaus 1986, 471). Placing this onus on citizens of South Africa also holds them accountable to make sure they minimize their own risk of contraction through complying to restrictions and adopting health behaviours that optimize their health during the pandemic. Passengers should also be held responsible for their high susceptibility of contracting COVID-19 during trips. Their knowledge, no matter how little, makes them liable to behave in ways that will help them have safer trips.

At the same, Sis’ Mavis’ (Interview 6, 17 August 2021) makes a critical point and says:

The taxi industry is a business, Dineo. Just the same way as Checkers is a business. When I go to checkers, kunama-sanitiser emnyango, abosisi basemathilini ba-sanitiser amapay point after every customer, uyabo?⁴⁵ Things like that. Why can’t drivers do that after we pay? Or in general, care about their customers and babe nendaba ngebusiness labo?⁴⁶

Sis’Mavis makes a comparison between her experiences of using a supermarket during the pandemic. Although the supermarket she mentions is formal, unlike the minibus taxi industry, it is shared by hundreds of people daily, and does offer cash payment methods. Her comparison is not far-fetched, and it highlights that other public services tend to take more actions to ensure that their spaces are safe to use. To Sis’ Mavis this is an indication that the minibus taxi industry lacks care for their businesses and consumers and a lack of responsibility. Making the minibus safe to use should not be solely at the hands of passengers.

⁴⁵ There are sanitisers at the door, the ladies at the tills sanitise the pay points after every customer, you see?

⁴⁶ Care about their business?

I buy and carry masks for my passengers mina. Lama-Mask owabona la akusi awami ngiyi-one⁴⁷. If I don't protect my passengers, who will I carry? If everyone is sick, who will need a taxi? (Interview 17, 29 August 2021)

Above is a powerful and incredibly valid reflection shared by Morena (Interview 17, 29 August 2021), who has been a minibus taxi driver for almost ten years now. He continued to share that driving minibus taxis has made him care more about other people than himself in general because that's where his income comes from. Minibus taxi drivers tend to overlook the fact that it is important to not only protect themselves, but their passengers as well, in order to keep operating. In as much as the minibus taxi industry makes a critical contribution to urban mobility and the country's economy, consideration of passengers is just as important, because it is their mobility and fares that keep the minibus taxi industry alive. Thus, to Morena, the safety of passengers is his responsibility because their mobility is his income. *I am responsible for abantu abaningi. Ya I want to make money quick but I need to make sure they are safe because they are basically under my care, uyabona? So lento leyo has made me care about other people. It's even worse now during Covid ngoba mina I want my taxi to be safe for my passengers. Cabanga ungatholi iCovid elsewhere only to get in my taxi and die. I would feel horrible.*⁴⁸ (Interview 17, 29 August 2021)

Morena is an example of minibus taxi drivers who believe compliance with COVID-19 restrictions and protocols inside the minibus taxi are his responsibility. He shared that outside of ensuring that his minibus taxi is safe because of the onus placed on him by the national restrictions, he genuinely cares for his passengers. Six out of ten passengers in my participant pool confirmed that they have been inside minibus taxi where all COVID-19 restrictions were adhered to. Bhut'Themba (Interview 4, 13 August 2021) even shared an experience where he felt safe inside a minibus taxi because of the taxi driver's attitude and compliance inside the minibus taxi. Bhut'Themba (Interview 4, 13 August 2021) says that he usually takes a taxi in the early hours of the morning where people are usually too sleepy to comply with COVID-19 restrictions or even care about them. He says that the minibus taxi driver ensured that everyone had a mask, and even went as far as giving passengers masks if they seemed old. After that, he

⁴⁷ These masks you see here are not for me alone.

⁴⁸ I am responsible for a lot of people. I need to make sure they are safe because they are basically under my care, you see? So that thing has made care about other people. It's even worse now during Covid because I want my taxi to be safe for my passengers. Imagine not getting Covid everywhere else only to get in my taxi and die. I would feel horrible.

made sure that the sanitiser was passed around the minibus taxi after the money was counted. Bhut' Themba (Interview 4, 13 August 2021), and five other passenger participants shared that this made them feel less anxious about using minibus taxis and travelling during the COVID-19 pandemic.

This indicates that Morena, and possibly many drivers like him, take responsibility and accountability for the health of passengers inside the minibus taxi. Acknowledging that in as much as his health and money is important, but passengers' health is equally important, especially inside *his* minibus taxi.

Thabang (Interview 7, 22 August 2021) shares a similar reflection below and says:

You have to go to work and be healthy enough to work. If uBusy ubaReckless ngeLife yakho, who is going to work for you?⁴⁹ Mina besides anything, that's what I think about. Yes it sucks working during the pandemic but at least we are given the chance to work. Our job is just to make sure we are safe to come home, not give our families COVID, and still have an income.

Not many of my participants put this to light. Morena and Thabang's reflections show that people in general do not solely comply for the sake of being healthy and not contacting the virus and spreading to others, and it is also not because they feel like their health is not being prioritised by the government or the minibus taxi industry. They highlight that people also prioritise their health and take responsibility to comply because they want to be healthy enough to work. Contracting the virus does not only equate to death, but it also means that once one contracts the virus, they will not be allowed to go to work and spread it. This placing them at a vulnerable position of either staying away from work, with the possibility of unpaid leave. Their need to work reflects the need for income.

The Queue-Marshal

The minibus taxi industry has attempted to compensate the lack of responsibility for compliance inside minibus taxis through the deployment of queue-marshals. To help manage the large number of commuters, taxi associations deploy queue-marshals. Queue-marshals are nominated or assigned by the association to assist with taxi rank services. Masuku (2016, 17) helps us with an actual description of a queue-marshal and states that their role is to “ensure effective functionality” at minibus taxi ranks. Their initial service is to facilitate the fair loading of passengers among minibus taxis, assist lost passengers by helping them find minibus taxis,

⁴⁹ If you are busy being reckless with your life, who is going to work for you?

and they assist drivers load passengers onto the minibus taxi by calling passengers (Masuku 2016, 17). However, since the COVID-19 outbreak, queue-marshals play a critical role in facilitating compliance with COVID-19 restrictions and adherence at taxi ranks or binding pick-up points.⁵⁰ Since the outbreak, their services also include ensuring that every passenger and minibus taxi driver is wearing a mask, that every car has a sanitiser, and that passengers are sanitised before being loaded onto a minibus. This is what bab'Dlakadla (Interview 14, 24 August 2021), refers to as the "Covid Job Promotion". Queue-marshals tend to be sterner and more authoritative than drivers. This is because they are supervised by rank managers who ensure that they do their work accordingly, but do not overuse their authority on passengers and drivers.

Bab'Zulu (Interview 1, 28 July 2021) shared that it was important that passengers were safe 'in some way or another'. *I say some way or another because iRisk ye COVID-19 ikhona yonke indawo*⁵¹. *But we had to try and minimize inside the taxi as much as we can. And ukuba khona kwama marshal kunceda kakhulu ngalokho*⁵², he says. Bab'Zulu continued to share that the association tries by all means to guide, monitor, and provide queue-marshals with sanitisers and hand wash. This has helped them ensure precautionary measures for passengers on their behalf.

Eight out of ten passenger interviews confirmed that they feel much safer when they get taxis from pick-up points instead of using hand signals along routes because of queue-marshals. Kimberly says *its better when a queue-marshal is there because you don't have to feel scared. You are sure that everyone's hands do not have Covid and that I do not have to tell anyone to wear a mask*. While this reflection is shared amongst most passengers, Thabang says that the queue-marshals he has observed and interacted with did not show much concern over sanitising passengers and the wearing of masks. He even briefly recalled an incident where two men entered the taxi and one of them was not wearing a mask, but the queue-marshal paid no attention.

As much as passengers' experiences at Bree Taxi Rank are different, this does not take away the fact that the presences of queue-marshals not only make people comply but also makes

⁵⁰Binding is a term used to refer to when minibus taxis line up according to their routes to get passengers. This is the opposite of the paratransit form of getting passengers along the routes.

⁵¹ I say some way or another because the risk of COVID-19 is everywhere.

⁵² And the (queue) marshals being there is very helpful with that.

them feel safer in taxi ranks and inside minibus taxis. My personal experiences also reflect this during the evening rush hours between (15:00 – 20:00), which is the time I usually leave Johannesburg every time I went to campus. During this time, hundreds of passengers line up next to their routes and create very long queues. Thus, due to the lack of space, social distancing seldom happens. On one occasion, a young man adamantly told the queue-marshall he did not want to wear a mask because it made him uncomfortable. The queue-marshall insisted that he wore his mask, or he would not get onto the taxi. He continued being difficult and shouting about how he found it difficult to breathe through the mask and that other drivers always understood his ‘situation’. In response, the queue-marshall calmly swerved him to the side of queue and told the person who was behind the man to get inside the taxi. The man insisted that he would get onto the next taxi, or he would report the queue-marshall to ZTA. The queue-marshall subtly chuckled and said *ngingaze ngik’phelezele mina qobo!*⁵³.

Kamohelo’s (Interview 5, 15 August 2021) taxi diary, dated 07 August 2021, that reads:

Something strange happened. A guy. Think he’s a queue Marshall, stopped the taxi and found one guy who wasn’t wearing a mask and he was drinking alcohol, they forced him to throw out that beer and wear a mask.

In our follow-up interview, Kamohelo (Interview 5, 15 August 2021) shared that she thought this incident was strange because she had not experienced a queue-marshall reprimanding a passenger for not wearing their mask. She shared that not only did this make her feel safer inside that minibus taxi, but that it indicated a novel sense of care from the association. Indeed, the occurrence of these incidents is strange because every passenger knows that they are supposed to wear a mask inside the taxi, therefore, queue-marshals do not have to reprimand people that often.

*I-simple lento. Umuntu ongafuni ukugqoka i-mask akagibeli emotweni. Bakhona esebahlala la e-rank i-hour ngoba bengana mask. Futhi hai ukuthi abanyo, abafuni ukuyithenga. Hhayi nje ngoba agcwele i-rank yonke*⁵⁴ (Interview 14, 29 August 2021).

In essence, the role of queue-marshals at minibus taxi pick-up points is essential in the curbing of COVID-19 inside minibus taxis because of their role in ensuring that social distancing is practised, and that every passenger is sanitised and wearing a mask. Bab’Dlakadla (Interview 14) also asserts that even if it is a driver or a fellow queue-marshall who is not wearing a mask,

⁵³ I will even accompany you myself!

⁵⁴ This thing is simple. A person who doesn’t want to wear a mask does not get onto a taxi. And it’s not because they don’t have one, they don’t want to buy it. Not when masks are everywhere in the rank.

it is their duty to reprimand people for non-compliance. This highlights that queue-marshals are an indirect safety precaution measure employed by the minibus taxi industry. Their presence at taxi ranks has been an effective contribution in facilitation and somewhat regulation of mass travel during a pandemic.

Conclusion

Passengers and queue-marshals' reported experiences analysed in this chapter are of those who comply and indicate that "knowing" about COVID-19 and its implications places responsibility and onus on every citizen to act in a manner that will ensure the safety of their wellbeing. At the level of the passenger participants, a majority of them take extra precautionary measures such as overusing PPE and ancient home remedies for flu symptoms and to keep safe. At the level of the minibus taxi industry, the deployment of queue-marshals at Bree Taxi Rank ensure compliance inside the minibus taxi before departure. Indicating a compliance and responsibility to some passenger participants, and thus making journeys somewhat safer. The most important finding was that people who comply during trips do so to not only keep safe for the sake of not spreading or contracting COVID-19, but to be healthy enough to be working citizens. This shows that although they are vulnerable because of their residence in Soweto and high levels of non-compliance, they are willing to work during the pandemic.

CHAPTER 6

Conclusion

More often than not, studies on the minibus taxi industry are interested in the economic impact that the industry has on South Africa's economy, while a pool of literature concerned with its formalisation continues to persist. Furthermore, more and more studies on COVID-19 – its biological, psycho-social, and economical implications are published at accelerating rates. As important as these are, however, this study will contribute a new insight of analysing urban mobility into the COVID-19 research of prioritising or putting to light the experiences of passengers during a pandemic. As a mini-bus taxi user I could relate to passengers' stories. One seldom reads about people's experiences of travelling in a minibus. This research report hopes to address this gap. Not only will this study make information about the minibus taxi industry more accessible, but it will most importantly help scholars, the government, and the minibus taxi industry in future pandemics.

Overall, my research found that passenger capacity restrictions, as a form of biopower, strongly impacted passengers' experiences during the pandemic. Reported experiences in my data also support and answer the objectives and key research questions of the study which were to provide an understanding of how passengers' experiences are affected by attitudes and management of COVID-19 restrictions during trips. I found that the COVID-19 relief fund has permeated into the government's initiatives to formalise the minibus taxi industry and further aggravated already-existing tensions found in this relationship. Furthermore, although government initially imposed passenger capacity restrictions to make mass travels safer for passengers, however, the vast increase of the passenger capacity from 50% to 100% in less than four months favoured the minibus taxi industry more than passengers. As important as it was to keep the industry operations running and the mobility of essential workers and citizens, the rapid adjustments of passenger capacity restrictions were indeed at the expense of passengers' health. Passengers view their trips as dangerous and make them feel anxious because of the high levels of non-compliance and the sharing of a confined space with strangers. They feel that their experiences are often overlooked in decision-making processes that directly affect them as paying clients and commuters. Lastly, reported experiences also highlighted that minibus taxi drivers' attitudes towards COVID-19 have an impact on how

passengers feel and construct their perceptions of health and safety during a global emergency. Non-compliant passengers tended to behave in a manner that reflected drivers' attitudes to general health and safety conditions.

References

- Adams, S.N., Seedat, J., Coutts, K. and Kater, K.A., 2021. 'We are in this together'voices of speech-language pathologists working in South African healthcare contexts during level 4 and level 5 lockdown of COVID-19. *South African Journal of Communication Disorders*, 68(1), pp.1-12.
- Adeleye, O.O., Adeyemi, A.S., Oyem, J.C., Akindokun, S.S. and Ayanlade, J.I., 2020. Rational use of personal protective equipment (ppe) among health workers in COVID-19 frontline. *Eur. J. Pharm. Med. Res*, 7, pp.445-451.
- Barolsky, J., 1990. Follow that taxi!: success story of informal sector. *Indicator South Africa*, 7(2), pp.59-63.
- Beall, J., Crankshaw, O. and Parnell, S., 2014. *Uniting a divided city: Governance and social exclusion in Johannesburg*. Routledge.
- Bettinghaus, E.P., 1986. Health promotion and the knowledge-attitude-behavior continuum. *Preventive medicine*, 15(5), pp.475-491.
- Bhorat, H., Köhler, T., Oosthuizen, M., Stanwix, B., Steenkamp, F. and Thornton, A., 2020. The economics of COVID-19 in South Africa: Early impressions.
- Bromley, Ray. "A new path to development? The significance and impact of Hernando De Soto's ideas on underdevelopment, production, and reproduction." *Economic Geography* 66, no. 4 (1990): 328-348.
- Butler, J., 2004. Bodies and power revisited. *Feminism and the final Foucault*, pp.183-194.
- Cewuka, T.G., 2013. *Reconstruction and Development Programme in Post-apartheid South Africa: a study of public perceptions of the housing service delivery in Chris Hani Park Block 3 township, East London* (Doctoral dissertation, University of Fort Hare).
- Covid19.who.int. 2021. *WHO Coronavirus (COVID-19) Dashboard*. [online] Available at: <<https://covid19.who.int/table>> [Accessed 26 September 2021].
- Cross, S.E., Bacon, P.L. and Morris, M.L., 2000. The relational-interdependent self-construal and relationships. *Journal of personality and social psychology*, 78(4), p.791.
- De Montille, S., 1987. Informal trading in Soweto. *Development Southern Africa*, 4(4), pp.656-664.
- Devey, R., Skinner, C., Valodia, I. and Buhlungu, S., 2006. The state of the informal economy. *OF THE NATION*, p.223.

Eglin, R. and Kenyon, M. 2017. Between a Shack and a RDP House: Managed Land Settlement. 2017. *Upgrading Informal Settlements in South Africa: Pursuing a partnership based approach*, eds. Cirolia, L. Drimie, S. Gorgens, T. Van Donk, M. and Smit, W. Cape Town: University of Cape Town Press.

Emerson, R, L Shaw, and R Fretz. 1995. *Writing Ethnographic Fieldnotes*. Chicago: University of Chicago Press.

Farmer, P., 2004. An anthropology of structural violence. *Current anthropology*, 45(3), pp.305-325.

Fauci, A.S., Lane, H.C. and Redfield, R.R., 2020. COVID-19—navigating the uncharted.

Fiil-Flynn, M. and Soweto Electricity Crisis Committee, 2001. *Electricity crisis in Soweto* Corder, C.K., 1997. The reconstruction and development programme: Success or failure?. *Social Indicators Research*, 41(1), pp.183-203.

Fobosi, S., 2013. The minibus taxi industry in South Africa: A servant for the urban poor. *Consultancy Africa Intelligence*, 2.

Fobosi, Siyabulela. 2013. The Minibus Taxi Industry in South Africa: A Servant for the Urban Poor? Retrieved” <http://www.polity.org.za/article/the-minibus-taxi-industry-in-south-africa-a-servant-for-the-urban-poor-2013-05-06>, 01.04.2020.

Foucault, M. and Ewald, F., 2003. *"Society Must Be Defended": Lectures at the Collège de France, 1975-1976* (Vol. 1). Macmillan.

Fourie, L.J. and Pretorius, P.J., 2005. A call for the radical restructuring of the mini-bus taxi industry in South Africa. *South African journal of industrial engineering*, 16(1), pp.1-11.

Fourie, L.J., 2005. *Rethinking the formalisation of the minibus-taxi industry in South Africa* (Doctoral dissertation, University of Pretoria).

Government Gazette. [ebook] 2021. Department of Transport. Available at: <https://www.gov.za/sites/default/files/gcis_document/202103/44381gon290.pdf> [Accessed 3 January 2022].

Ha, J.F., 2020. The COVID-19 pandemic, personal protective equipment, and respirator: A narrative review. *International journal of clinical practice*, 74(10), p.e13578.

Hamdy, S.F., 2008. When the state and your kidneys fail: Political etiologies in an Egyptian dialysis ward. *American ethnologist*, 35(4), pp.553-569.

Hart, K., 1973. Informal income opportunities and urban employment in Ghana. *The journal of modern African studies*, 11(1), pp.61-89.

Ingle, M., 2009. An historical overview of problems associated with the formalization of the South African minibus taxi industry.

Jenkins, F. and Smith, J., 2021. Work-from-home during COVID-19: Accounting for the care economy to build back better. *The Economic and Labour Relations Review*, 32(1), pp.22-38.

Khosa, M.M., 1997. Sisters on slippery wheels: women taxi drivers in South Africa. *Transformation*, (33).

Khunti, K., Adishes, A., Burton, C., Chan, X.H.S., Coles, B., Durand-Moreau, Q., Jackson, T., Ross, L., Straube, S., Toomey, E. and Greenhalgh, T., 2020. The efficacy of PPE for COVID-19-type respiratory illnesses in primary and community care staff. *British Journal of General Practice*, 70(697), pp.413-416.

Kihato, C.W. and Landau, L.B., 2020. Coercion or the social contract? COVID 19 and spatial (in) justice in African cities. *City & Society*, 32(1).

Manderson, L. and Wahlberg, A., 2020. Chronic living in a communicable world. *Medical Anthropology*, 39(5), pp.428-439.

Mathe, T., 2022. *The government is 'not afraid of the taxi industry' — Fikile Mbalula - The Mail & Guardian*. [online] Head Topics. Available at: <<https://headtopics.com/za/the-government-is-not-afraid-of-the-taxi-industry-fikile-mbalula-the-mail-guardian-14404892>> [Accessed 4 March 2022].

Masuku, T.G., 2016. *Does the spirit of ubuntu exist in the minibus taxi industry: a form and function of the socio-economic lives of queue marshals in Bree taxi rank, Johannesburg?* (Doctoral dissertation).

Mayekiso, M., 2003. to Johannesburg. *Confronting Fragmentation: Housing and Urban Development in a Democratising Society*, p.57.

McKibbin, W. and Fernando, R., 2020. The economic impact of COVID-19. *Economics in the Time of COVID-19*, 45(10.1162).

de Montille, S., 1987. Informal trading in Soweto. *Development Southern Africa*, 4(4), pp.656-664.

Motlhabi, M., 1985. Black resistance to apartheid. *Johannesburg: Skotaville*.

Burton, P., 2003. Who is to blame? Crime in Meadowlands, Soweto. *South African Crime Quarterly*, (5).

Munzhedzi, P.H., 2021. Analysing the application of governance principles in the management of COVID-19 in South Africa: Lessons for the future. *Africa's Public Service Delivery and Performance Review*, 9(1), p.490.

Nieftagodien, N., 2011. Xenophobia's local genesis: Historical constructions of insiders and the politics of exclusion in Alexandra Township. *Exorcising the demons within: Xenophobia, violence and statecraft in contemporary South Africa*, pp.135-149.

Oltedal, S., Moen, B.E., Klempe, H. and Rundmo, T., 2004. Explaining risk perception: An evaluation of cultural theory. *Rotunde*, 85, pp.1-33.

Rab, S., Javaid, M., Haleem, A. and Vaishya, R., 2020. Face masks are new normal after COVID-19 pandemic. *Diabetes & Metabolic Syndrome: Clinical Research & Reviews*, 14(6), pp.1617-1619.

Reicher, S. and Drury, J., 2021. Pandemic fatigue? How adherence to COVID-19 regulations has been misrepresented and why it matters. *Bmj*, 372.

Rich, P.B., 1980. Administrative Ideology, Urban Social Control, and the Origins of Apartheid Theory, 1930-1939. *Journal of African Studies*, 7(2), p.70.

Rink, B., 2020. Capturing amaphela: Negotiating township politics through shared mobility. *Geoforum*.

Sauti, G., 2006. Research Report Minibus Taxi Drivers Are They All 'Children Born From The Same Mother?'.

Stiegler, N. and Bouchard, J.P., 2020, September. South Africa: Challenges and successes of the COVID-19 lockdown. In *Annales Médico-psychologiques, revue psychiatrique* (Vol. 178, No. 7, pp. 695-698). Elsevier Masson.

Unknown. 1944. "They Marched to Victory: The Story of the Alexandra Bus Boycott." Community Party Pamphlet, 1944. Wits Historical Papers.

Valodia, I. and Devey, R., 2010. Formal-informal economy linkages: What implications for poverty in South Africa?. *Law, democracy & development*, 14.

Velavan, T.P. and Meyer, C.G., 2020. The COVID-19 epidemic. *Tropical medicine & international health*, 25(3), p.278.

Wafer, A., 2012, June. Discourses of infrastructure and citizenship in post-apartheid Soweto. In *Urban forum* (Vol. 23, No. 2, pp. 233-243). Springer Netherlands.

Wengraf, T., 2001. *Qualitative research interviewing: Biographic narrative and semi-structured methods*. sage.

Wentzel, M. and Tlabela, K., 2006. Historical background to South African migration. *Migration in South and Southern Africa: Dynamics and Determinants*, pp.71-96.

Whyte, S.R., 2009. Health identities and subjectivities: The ethnographic challenge. *Medical anthropology quarterly*, 23(1), pp.6-15.

Appendices

Appendix 1: Interview Schedules

a) *Passenger Interview Schedule*

- How has using a taxi been during the coronavirus pandemic?
- Have you been socially distancing when waiting for a taxi at the taxi rank?
- How did the increase in taxi fare during the pandemic affect you?
- In the last taxi you were on, did you feel safe from the virus?
- Why?
- Are you sanitised every time you take a taxi at the rank?
- Can you tell me about an incident in a taxi where you felt at risk?
- What kind of mask do you use?
- What do you do when someone in the taxi is not wearing a mask?
- Did the taxi driver in your last taxi ride wear a mask for the duration of the trip?
- Do you think a majority of the drivers adhere to coronavirus regulations?
- What was it like to use a taxi during Lockdown level 1?
- What was it like to use a taxi during Lockdown level 2?
- What was it like to use a taxi during Lockdown level 3?
- What was it like to use a taxi during Lockdown level 4?
- What was it like to use a taxi during Lockdown level five?
- Could you share your experience of using a taxi at 50% capacity?
- What was it like at 70% capacity?
- And now, at 100%?
- How comfortable are you with taxi maths now that we are in a pandemic?
- How do you think using minibus taxis will affect your health?

b) *Taxi Driver' Interview Schedule*

- What do you do when a passenger is not wearing a mask in your vehicle?
- What instructions were given to you by the taxi owner or association regarding coronavirus regulations in the taxi?
- Where do you get your PPE?
- What do you think about the corona virus pandemic?
- How was it operating your taxi during lockdown level five?
- How was it operating your taxi during lockdown level 4?

- How was it operating your taxi during lockdown level 3?
- How was it operating your taxi during lockdown level 2?
- How was it operating your taxi during lockdown level 1?
- How do you keep your passengers safe from the virus?
- Do you think it is your responsibility to keep them safe?
- What are the chances of you contracting the virus?
- How has the virus affected your daily take-ins and profits?
- Do you have a sanitiser in your taxi?
- What do you do when a person is not wearing a mask or says he does not have it?
- How do you think you can make your taxi safer for passengers against COVID-19?

c) Queue Marshal Interview Schedule

- How involved are you in making sure taxis is safe for passenger during COVID-19?
- What specific instructions were you given by the association during lockdown level five?
- What specific instructions were you given during lockdown level 1?
- Who do you think is responsible to ensure that passengers feel safe in your vehicle?
- How did lockdown level five affect you?
- What are the biggest challenges that you have faced in lockdown 5 and 4?

d) Association Executive Member Interview Schedule

- How would you explain the taxi industry's relation with the government at the moment?
- How have you supported taxi drivers with PPE?
- Are drivers tested regularly?
- What specific responses to COVID-19 did you make during lockdown level five?
- How do you make sure that taxis under your association are safe for passengers during COVID-19 pandemic?
- How has the government assisted you during this time?
- When increasing the price of taxi fare, what factors are considered?
- Do you think the price hike during lockdown level one was fair on passengers?
- How has the minibus changed from level five to level 1?
- How you think minibus taxis affect the health of passengers?

Appendix 2B: Ifomu Lokuvuma Labo-Queue Marshal

Isihloko sephrojekthi: Imboni Yamatekisi Amatekisi, Impilo Yomphakathi, kanye Nezindaba Eziwumshayabhuqe zabagibeli ezivela eSoweto

Igama lomcwaningi: Dineo Mtetwa

Mina,, ngiyavuma ukubamba iqhaza kulo mklamo wocwaningo. Ucwano ngiluchazelwe futhi ngiyaqonda ukuthi ukubamba iqhaza kwami kuzobandakanya ini. Ngiyavumelana nokulandelayo:

Ngicela uphendule izinketho ezifanele ngezansi.

Ngiyavuma ukuthi ukubamba iqhaza kwami kuzohlala kungaziwa **YEBO CHA**

Ngiyavuma ukuthi inhlango yamatekisi iyazi ngeqhaza lami **YEBO CHA**

Ngiyavuma ukuthi umcwaningi angasebenzisa izingcaphuno ezingaziwa embikweni wakhe wocwaningo **YEBO CHA**

Ngiyavuma ukuthi ulwazi engilunikezayo lungasetshenziswa ngendlela engaziwa ngemuva kokuphela kwephrojekthi, ngenhloso yezemfundo ngabanye abacwaningi, ngokuya ngemvume yabo yokuziphatha etholakalayo. **YEBO CHA**

Sicela uphendule ngemininingwane elandelayo

..... (igama lomuntu obambe iqhaza)

..... (usuku)

Appendix 3B: Ifomu Lokuvuma Labahlanganyeli

Isihloko sephrojekthi: Imboni Yamatekisi Amatekisi, Impilo Yomphakathi, kanye Nezindaba Eziwumshayabhuqe zabagibeli ezivela eSoweto

Igama lomcwaningi: Dineo Mtetwa

Mina,, ngiyavuma ukubamba iqhaza kulo mklamo wocwaningo. Ucwano ngiluchazelwe futhi ngiyaqonda ukuthi ukubamba iqhaza kwami kuzobandakanya ini. Ngiyavumelana nokulandelayo:

Ngicela uphendule izinketho ezifanele ngezansi.

Ngiyavuma ukuthi ukubamba iqhaza kwami kuzohlala kungaziwa **YEBO CHA**

Ngiyavuma ukuthi inhlango yamatekisi iyazi ngeqhaza lami **YEBO CHA**

Ngiyavuma ukuthi umcwaningi angasebenzisa izingcaphuno ezingaziwa embikweni wakhe wocwaningo **YEBO CHA**

Ngiyavuma ukuthi ulwazi engilunikezayo lungasetshenziswa ngendlela engaziwa ngemuva kokuphela kwephrojekthi, ngenhloso yezemfundo ngabanye abacwaningi, ngokuya ngemvume yabo yokuziphatha etholakalayo. **YEBO CHA**

Sicela uphendule ngemininingwane elandelayo

..... (igama lomuntu obambe iqhaza)

..... (usuku)

Appendix 4A: Consent Form for Taxi Drivers

Title of project: The Minibus Taxi Industry, Public Health, and Passengers Pandemic Stories from Soweto

Name of researcher: Dineo Mtetwa

I,, agree to participate in this research project. The research has been explained to me and I understand what my participation will involve. I agree to the following:

Please reply to the relevant options below.

I agree that my participation will remain anonymous	YES	NO
---	-----	----

I agree that the association is aware of my participation	YES	NO
---	-----	----

I agree that the researcher may use anonymous quotes in her research report	YES	NO
---	-----	----

I agree that the information I provide may be used in an anonymized format after this project has ended, for academic purposes by other researchers, subject to their own ethics clearance being obtained.	YES	NO
--	-----	----

Please reply with the information following

..... (name of participant)

..... (date)

Appendix 4B: Ifomu Lokuvuma Labashayeli

Isihloko sephrojekthi: Imboni Yamatekisi Amatekisi, Impilo Yomphakathi, kanye Nezindaba Eziwumshayabhuqe zabagibeli ezivela eSoweto

Igama lomcwaningi: Dineo Mtetwa

Mina,, ngiyavuma ukubamba iqhaza kulo mklamo wocwaningo. Ucwano ngiluchazelwe futhi ngiyaqonda ukuthi ukubamba iqhaza kwami kuzobandakanya ini. Ngiyavumelana nokulandelayo:

Ngicela uphendule izinketho ezifanele ngezansi.

Ngiyavuma ukuthi ukubamba iqhaza kwami kuzohlala kungaziwa **YEBO CHA**

Ngiyavuma ukuthi inhlango yamatekisi iyazi ngeqhaza lami **YEBO CHA**

Ngiyavuma ukuthi umcwaningi angasebenzisa izingcaphuno ezingaziwa embikweni wakhe wocwaningo **YEBO CHA**

Ngiyavuma ukuthi ulwazi engilunikezayo lungasetshenziswa ngendlela engaziwa ngemuva kokuphela kwephrojekthi, ngenhloso yezemfundo ngabanye abacwaningi, ngokuya ngemvume yabo yokuziphatha etholakalayo. **YEBO CHA**

Sicela uphendule ngemininingwane elandelayo

..... (igama lomuntu obambe iqhaza)

..... (usuku)

Appendix 5A: Consent Form for Passengers

Title of project: The Minibus Taxi Industry, Public Health, and Passengers Pandemic Stories from Soweto

Name of researcher: Dineo Mtetwa

I,, agree to participate in this research project. The research has been explained to me and I understand what my participation will involve. I agree to the following:

Please reply to the relevant options below.

I agree that my participation will remain anonymous YES NO

I agree that the researcher may use anonymous quotes in her research report YES NO

I agree that the information I provide may be used in an anonymized format after this project has ended, for academic purposes by other researchers, subject to their own ethics clearance being obtained. YES NO

I consent to keeping a taxi diary and that information I provide on my taxi diary to be used on the project YES NO

Please reply with the information following

..... (name of participant)

..... (date)

Appendix 5B: Ifomu Lokuvuma Labagibeli

Isihloko sephrojekthi: Imboni Yamatekisi Amatekisi, Impilo Yomphakathi, kanye Nezindaba Eziwumshayabhuqe zabagibeli ezivela eSoweto

Igama lomcwani: Dineo Mtetwa

Mina,, ngiyavuma ukubamba iqhaza kulo mklamo wocwani. Ucwani ngiluchazelwe futhi ngiyaqonda ukuthi ukubamba iqhaza kwami kuzobandakanya ini. Ngiyavumelana nokulandelayo:

Ngicela uphendule izinketho ezifanele ngezansi.

Ngiyavuma ukuthi ukubamba iqhaza kwami kuzohlala kungaziwa **YEBO CHA**

Ngiyavuma ukuthi umcwani angasebenzisa izingcaphuno ezingaziwa embikweni wakhe wocwani **YEBO CHA**

Ngiyavuma ukuthi ulwazi engilunikezayo lungasetshenziswa ngendlela engaziwa ngemuva kokuphela kwephrojekthi, ngenhloso yezemfundo ngabanye abacwani, ngokuya ngemvume yabo yokuziphatha etholakalayo. **YEBO CHA**

Ngiyavuma ukugcina idayari yamatekisi kanye nalolo lwazi engilunikeza kwidayari yami yamatekisi ukuze isetshenziswe kuphrojekthi **YEBO CHA**

Sicela uphendule ngemininingwane elandelayo

..... (igama lomuntu obambe iqhaza)

..... (usuku)



The Minibus Taxi Industry, Public Health, and Passengers Pandemic
Stories from Soweto

Name of researcher: Dineo Mtetwa

Good day Sir/Madam

My name is Dineo Mtetwa, and I am Master's Anthropology student at the University of the Witwatersrand in Johannesburg. As part of my academic course, I am required to conduct a research project that investigates the impact of the minibus taxi industry's responses to COVID-19 on the experiences of passengers. The study aims to understand the extent to which the minibus taxi industry's responses and attitudes towards COVID-19 affect the experiences and perceptions of passengers. As part of the project, I would like to extend an invitation to you to participate in an interview. This interview will be conducted over the phone or Whatsapp Messenger. The interview will take approximately 30-45 minutes. In addition, I would like you to write a taxi diary on your phone whenever you are in a taxi for four weeks. In these diaries, you will take note if the driver and other passengers in that taxi is wearing a mask, sanitizing during trips after physical contact with money or sanitizing passengers after picking them up along the Meadowlands-Bree Taxi Rank Route, or if there has been social distancing in the queues at ranks or local pick-up stops. These can be sent to me on a daily or weekly basis or at the end of the four weeks.

You will not receive any direct benefits from participating in this study, nor will there be any disadvantages or penalties for not participating. Should you not have data bundles to access Whatsapp, I will dial call you. You may withdraw at any time or not answer any question if you are not comfortable. I will not ask for any personal (including your name) or any identifying information, and all information shared here will be undisclosed. I will, however,

use a pseudonym (false name) to represent your participation, in my final research report. You have the right to stop the interview and resume another time, should you feel any distress or discomfort. If you have any questions regarding this research, feel free to contact me or my supervisor on the details listed below.

As I am not including any names, you may give oral consent for this research or reply with a 'yes'.

Dineo Mtetwa

081 575 7768

1406840@students.wits.ac.za

Supervisor's name: Prof. Zimitri Erasmus (Zimitri.Erasmus@wits.ac.za/0117179999)

University Human Research Ethics Committee (Non-Medical):

shaun.schoeman@wits.ac.za +27 (0) 11 717 1408, or email hrecnon-medical@wits.ac.za

Appendix 6B: Ishidi Lolwazi Labagibeli

Igama lomcwaningi: Dineo Mtetwa

Imboni Yamatekisi AseMinibus, Impilo Yomphakathi, kanye Nezindaba Ezikumshayabhuqe zabagibeli ezivela eSoweto

Usuku Oluhle Mnumzane / Nkosazana

Igama lami nginguDineo Mtetwa futhi ngingumfundi we-Master's Anthropology eNyuvesi yaseWitwatersrand eGoli. Njengengxenywe yezifundo zami zemfundo, kudingeka ukuthi ngenze iphrojekthi yocwaningo ephenya ngomthelela wezimpendulo zomkhakha wetekisi ku-COVID-19 kokuhlangenwe nakho kwabagibeli. Inhloso yalolu cwano ukuqonda ukuthi izimpendulo nezimo zeboni yamatekisi ezimayelana ne-COVID-19 zithinta kangakanani okuhlangenwe nakho nemibono yabagibeli. Njengengxenywe yephrojekthi, ngithanda ukudlulisa isimemo kuwe sokubamba iqhaza kwinkhulolokhono. Lo msebenzi uzobandakanya imibuzo eyi-15 futhi uzothatha cishe imizuzu engama-30 noma 45. Ngaphezu kwalokho, ngithanda ukuthi ubhale idayari yamatekisi efonini yakho noma kunini uma usematekisini amasonto amane. Kulamadayari, uzobhala uma umshayeli nabanye abagibeli kuleyo tekisi begqoke isifihla-buso, behlanza umzimba ngesikhathi sohambo ngemuva kokuthintana nemali noma ukuhlanza abagibeli ngemuva kokubalanda eMeadowlands-Bree Taxi Rank Route, noma uma kukhona kube ukuqhela komphakathi kulayini emarenki noma ezitobhini zokulanda zendawo. Lezi zingathunyelwa kimi nsuku zonke noma ngesonto noma ekupheleni kwamasonto amane.

Ngeke uthole noma yiziphi izinzuzo eziqondile ngokuhlanganyela kulolu cwano, futhi ngeke kube khona ukungabi khona noma izinhlawulo ngokungabambi iqhaza. Ungakhipha noma nini noma ungaphenduli noma yimuphi umbuzo uma ungakhululekile. Inhlolokhono izoba yimfihlo ngokuphelele futhi ingaziwa ngoba angizukucela noma yimuphi umuntu (kufaka negama lakho) noma olunye ulwazi olukhombayo, futhi yonke imininigwane eyabelwe lapha izodalulwa. Kodwa-ke ngizosebenzisa igama mbumbulu (igama elingamanga) ukumela ukubamba iqhaza kwakho, embikweni wami wokugcina wocwaningo. Unelungelo lokumisa inhlolokhono bese uqhubeka ngesinye isikhathi, uma kungenzeka uzwe

noma ikuphi ukukhathazeka noma ukungaphatheki kahle. Uma unemibuzo mayelana nalolu cwaningo, zizwe ukhululekile ukuxhumana nami noma umphathi wami ngemininingwane ebhalwe ngezansi. Lolu cwaningo luzobhalwa njengombiko wocwaningo ukuze luhlolwe kepha ngeke lushicilelwe.

Njengoba ngingahlanganisi amanye amagama, unganikeza imvume ngomlomo yalolu cwaningo.

Dineo Mtetwa

081 575 7768

1406840@students.wits.ac.za

Igama lomphathi wami: Prof. Zimitri Erasmus (Zimitri.Erasmus@wits.ac.za/0117179999)

Ikomidi Lezokuziphatha Labantu BaseNyuvesi (Okungelona Okwezokwelapha):

shaun.schoeman@wits.ac.za +27 (0) 11 717 1408, or email hrecnon-medical@wits.ac.za

Appendix 7A: Participant Information Sheet for Association Executive Members

Name of researcher: Dineo Mtetwa

The Minibus Taxi Industry, Public Health, and Passengers Pandemic Stories from Soweto

Good day Sir/Madam

My name is Dineo Mtetwa, and I am Master's Anthropology student at the University of the Witwatersrand in Johannesburg. As part of my academic course, I am required to conduct a research project that investigates the impact of the minibus taxi industry's responses to COVID-19 on the experiences of passengers. The study aims to understand the extent to which the minibus taxi industry's responses and attitudes towards COVID-19 affect the experiences and perceptions of passengers. As part of the project, I would like to extend an invitation to you to participate in an interview. This activity will involve about 15 questions and will take approximately 30-45 minutes.

You will not receive any direct benefits from participating in this study, nor will there be any disadvantages or penalties for not participating. You may withdraw at any time or not answer any question if you are not comfortable. The interview will be completely confidential and anonymous as I will not ask for any personal (including your name) or any identifying information, and all information shared here will be undisclosed. I will, however, use a pseudonym (false name) to represent your participation, in my final research report. You have the right to stop the interview and resume another time, should you feel any distress or discomfort. If you have any questions regarding this research, feel free to contact me or my supervisor on the details listed below. This study will be written up as a research report for examination but will not be published.

As I am not including any names, you may give oral consent for this research.

Kind Regards, Dineo Mtetwa.

1406840@students.wits.ac.za or 081 575 7768

Or my supervisor, Prof. Zimitri Erasmus

Zimitri.Erasmus@wits.ac.za

University Human Research Ethics Committee (Non-Medical):

shaun.schoeman@wits.ac.za +27 (0) 11 717 1408, or email hrecnon-medical@wits.ac.za

Appendix 7B: Ishidi Lolwazi Lomhlanganyeli

Igama lomcwaningi: Dineo Mtetwa

*Imboni Yamatekisi AseMinibus, Impilo Yomphakathi, kanye Nezindaba Ezikumshayabhuqe
zabagibeli ezivela eSoweto*

Usuku Oluhle Mnumzane / Nkosazana

Igama lami ngingu Dineo Mtetwa futhi ngingumfundi we-Master's Anthropology eNyuvesi yase Witwatersrand eGoli. Njengengxenye yezifundo zami zemfundo, kudingeka ukuthi ngenze iphrojekthi yocwaningo ephenya ngomthelela wezimpendulo zomkhakha wetekisi ku-COVID-19 kokuhlangenwe nakho kwabagibeli. Inhloso yalolu cwaningo ukuqonda ukuthi izimpendulo nezimo zeboni yamatekisi ezimayelana ne-COVID-19 zithinta kangakanani okuhlangenwe nakho nemibono yabagibeli. Njengengxenye yephrojekthi, ngithanda ukudlulisa isimemo kuwe sokubamba iqhaza kwinkhulolokhono. Lo msebenzi uzobandakanya imibuzo eyi-15 futhi uzothatha cishe imizuzu engama-30 noma 45.

Ngeke uthole noma yiziphi izinzuzo eziqondile ngokuhlanganyela kulolu cwaningo, futhi ngeke kube khona ukungabi khona noma izinhlawulo ngokungabambi iqhaza. Ungakhipha noma nini noma ungaphenduli noma yimuphi umbuzo uma ungakhululekile. Inhlolokhono izoba yimfihlo ngokuphelele futhi ingaziwa ngoba angizukucela noma yimuphi umuntu (kufaka negama lakho) noma olunye ulwazi olukhombayo, futhi yonke imininingwane eyabelwe lapha izodalulwa. Kodwa-ke ngizosebenzisa igama mbumbulu (igama elingamanga) ukumela ukubamba iqhaza kwakho, embikweni wami wokugcina wocwaningo. Unelungelo lokumisa inhlolokhono bese uqhubeka ngesinye isikhathi, uma kungenzeka uzwe noma ikuphi ukukhathazeka noma ukungaphatheki kahle. Uma unemibuzo mayelana nalolu cwaningo, zizwe ukhululekile ukuxhumana nami noma umphathi wami ngemininingwane ebhalwe ngezansi. Lolu cwaningo luzobhalwa njengombiko wocwaningo ukuze luhlolwe kepha ngeke lushicilelwe.

Njengoba ngingahlanganisi amanye amagama, unganikeza imvume ngomlomo yalolu cwaningo.

Dineo Mtetwa

081 575 7768

Appendix 8A: Participant Information Sheet for Queue Marshals

Name of researcher: Dineo Mtetwa

**The Minibus Taxi Industry, Public Health, and Passengers Pandemic Stories
from Soweto**

Good day Sir/Madam

My name is Dineo Mtetwa, and I am Master's Anthropology student at the University of the Witwatersrand in Johannesburg. As part of my academic course, I am required to conduct a research project that investigates the impact of the minibus taxi industry's responses to COVID-19 on the experiences of passengers. The study aims to understand the extent to which the minibus taxi industry's responses and attitudes towards COVID-19 affect the experiences and perceptions of passengers. As part of the project, I would like to extend an invitation to you to participate in an interview. This activity will involve about 15 questions and will take approximately 30-45 minutes.

You will not receive any direct benefits from participating in this study, nor will there be any disadvantages or penalties for not participating. You may withdraw at any time or not answer any question if you are not comfortable. The interview will be completely confidential and anonymous as I will not ask for any personal (including your name) or any identifying information, and all information shared here will be undisclosed. I will, however, use a pseudonym (false name) to represent your participation, in my final research report. You have the right to stop the interview and resume another time, should you feel any distress or discomfort. If you have any questions regarding this research, feel free to contact me or my supervisor on the details listed below. This study will be written up as a research report for examination but will not be published.

As I am not including any names, you may give oral consent for this research.

Kind Regards, Dineo Mtetwa.

1406840@students.wits.ac.za or 081 575 7768

Or my supervisor, Prof. Zimitri Erasmus

Zimitri.Erasmus@wits.ac.z

University Human Research Ethics Committee (Non-Medical):

shaun.schoeman@wits.ac.za +27 (0) 11 717 1408, or email hrecnon-medical@wits.ac.za

Appendix 8B: Ishidi Lolwazi Labo-Queue Marshal

Igama lomcwani: Dineo Mtetwa

*Imboni Yamatekisi AseMinibus, Impilo Yomphakathi, kanye Nezindaba Ezikumshayabhuqe
zabagibeli ezivela eSoweto*

Usuku Oluhle Mnumzane / Nkosazana

Igama lami ngingu Dineo Mtetwa futhi ngingumfundi we-Master's Anthropology eNyuvesi yase Witwatersrand eGoli. Njengengxenywe yezifundo zami zemfundo, kudingeka ukuthi ngenze iphrojekthi yocwani ephenya ngomthelela wezimpendulo zomkhakha wetekisi ku-COVID-19 kokuhlangenwe nakho kwabagibeli. Inhloso yalolu cwani ukuqonda ukuthi izimpendulo nezimo zeboni yamatekisi ezimayelana ne-COVID-19 zithinta kangakanani okuhlangenwe nakho nemibono yabagibeli. Njengengxenywe yephrojekthi, ngithanda ukudlulisa isimemo kuwe sokubamba iqhaza kwinkhulolokhono. Lo msebenzi uzobandakanya imibuzo eyi-15 futhi uzothatha cishe imizuzu engama-30 noma 45.

Ngeke uthole noma yiziphi izinzuzo eziqondile ngokuhlanganyela kulolu cwani, futhi ngeke kube khona ukungabi khona noma izinhlawulo ngokungabambi iqhaza. Ungakhipha noma nini noma ungaphenduli noma yimuphi umbuzo uma ungakhululekile. Inkhulolokhono izoba yimfihlo ngokuphelele futhi ingaziwa ngoba angizukucela noma yimuphi umuntu (kufaka negama lakho) noma olunye ulwazi olukhombayo, futhi yonke iminininingwane eyabelwe lapha izodalulwa. Kodwa-ke ngizosebenzisa igama mbumbulu (igama elingamanga) ukumela ukubamba iqhaza kwakho, embikweni wami wokugcina wocwani. Unelungelo lokumisa inkhulolokhono bese uqhubeka ngesinye isikhathi, uma kungenzeka uzwe noma ikuphi ukukhathazeka noma ukungaphatheki kahle. Uma unemibuzo mayelana nalolu cwani, zizwe ukhululekile ukuxhumana nami noma umphathi wami ngemininingwane ebhalwe ngezansi. Lolu cwani luzobhalwa njengombiko wocwani ukuze luhlolwe kepha ngeke lushicilelwe.

Njengoba ngingahlanganisi amanye amagama, unganikeza imvume ngomlomo yalolu cwani.

Dineo Mtetwa

081 575 7768

1406840@students.wits.ac.za

Igama lomphathi wami: Prof. Zimitri Erasmus (Zimitri.Erasmus@wits.ac.za/0117179999)

Ikomidi Lezokuziphatha Labantu BaseNyuvesi (Okungelona Okwezokwelapha):

shaun.schoeman@wits.ac.za +27 (0) 11 717 1408, or email hrecnon-medical@wits.ac.za

Appendix 9A: Participant Information Sheet for Taxi Drivers

Name of researcher: Dineo Mtetwa

The Minibus Taxi Industry, Public Health, and Passengers Pandemic Stories from Soweto

Good day Sir/Madam

My name is Dineo Mtetwa, and I am Master's Anthropology student at the University of the Witwatersrand in Johannesburg. As part of my academic course, I am required to conduct a research project that investigates the impact of the minibus taxi industry's responses to COVID-19 on the experiences of passengers. The study aims to understand the extent to which the minibus taxi industry's responses and attitudes towards COVID-19 affect the experiences and perceptions of passengers. As part of the project, I would like to extend an invitation to you to participate in an interview. This activity will involve about 15 questions and will take approximately 30-45 minutes.

You will not receive any direct benefits from participating in this study, nor will there be any disadvantages or penalties for not participating. You may withdraw at any time or not answer any question if you are not comfortable. The interview will be completely confidential and anonymous as I will not ask for any personal (including your name) or any identifying information, and all information shared here will be undisclosed. I will, however, use a pseudonym (false name) to represent your participation, in my final research report. You have the right to stop the interview and resume another time, should you feel any distress or discomfort. If you have any questions regarding this research, feel free to contact me or my supervisor on the details listed below. This study will be written up as a research report for examination but will not be published.

As I am not including any names, you may give oral consent for this research.

Kind Regards, Dineo Mtetwa.

1406840@students.wits.ac.za or 081 575 7768

Or my supervisor, Prof. Zimitri Erasmus

Zimitri.Erasmus@wits.ac.za

University Human Research Ethics Committee (Non-Medical):

shaun.schoeman@wits.ac.za +27 (0) 11 717 1408, or email hrecnon-medical@wits.ac.za

Appendix 9B: Ishidi Lolwazi Labashayeli

Igama lomcwani: Dineo Mtetwa

*Imboni Yamatekisi AseMinibus, Impilo Yomphakathi, kanye Nezindaba Ezikumshayabhuqe
zabagibeli ezivela eSoweto*

Usuku Oluhle Mnumzane / Nkosazana

Igama lami ngingu Dineo Mtetwa futhi ngingumfundi we-Master's Anthropology eNyuvesi yase Witwatersrand eGoli. Njengengxenye yezifundo zami zemfundo, kudingeka ukuthi ngenze iphrojekthi yocwani ephenya ngomthelela wezimpendulo zomkhakha wetekisi ku-COVID-19 kokuhlangenwe nakho kwabagibeli. Inhloso yalolu cwani ukuqonda ukuthi izimpendulo nezimo zeboni yamatekisi ezimayelana ne-COVID-19 zithinta kangakanani okuhlangenwe nakho nemibono yabagibeli. Njengengxenye yephrojekthi, ngithanda ukudlulisa isimemo kuwe sokubamba iqhaza kwinkhulolokhono. Lo msebenzi uzobandakanya imibuzo eyi-15 futhi uzothatha cishe imizuzu engama-30 noma 45.

Ngeke uthole noma yiziphi izinzuzo eziqondile ngokuhlanganyela kulolu cwani, futhi ngeke kube khona ukungabi khona noma izinhlawulo ngokungabambi iqhaza. Ungakhipha noma nini noma ungaphenduli noma yimuphi umbuzo uma ungakhululekile. Inkhulolokhono izoba yimfihlo ngokuphelele futhi ingaziwa ngoba angizukucela noma yimuphi umuntu (kufaka negama lakho) noma olunye ulwazi olukhombayo, futhi yonke iminininingwane eyabelwe lapha izodalulwa. Kodwa-ke ngizosebenzisa igama mbumbulu (igama elingamanga) ukumela ukubamba iqhaza kwakho, embikweni wami wokugcina wocwani. Unelungelo lokumisa inkhulolokhono bese uqhubeka ngesinye isikhathi, uma kungenzeka uzwe noma ikuphi ukukhathazeka noma ukungaphatheki kahle. Uma unemibuzo mayelana nalolu cwani, zizwe ukhululekile ukuxhumana nami noma umphathi wami ngemininingwane ebhalwe ngezansi. Lolu cwani luzobhalwa njengombiko wocwani ukuze luhlolwe kepha ngeke lushicilelwe.

Njengoba ngingahlanganisi amanye amagama, unganikeza imvume ngomlomo yalolu cwani.

Dineo Mtetwa

081 575 7768

1406840@students.wits.ac.za

Igama lomphathi wami: Prof. Zimitri Erasmus (Zimitri.Erasmus@wits.ac.za/0117179999)

Ikomidi Lezokuziphatha Labantu BaseNyuvesi (Okungelona Okwezokwelapha):

shaun.schoeman@wits.ac.za +27 (0) 11 717 1408, or email hrecnon-medical@wits.ac.za

Appendix 11A: Permission Letter



University of the Witwatersrand
Faculty of Humanities
School of Social Sciences
Department of Anthropology

Meadowlands Dobsonville Naledi (MDN) Taxi Association

1 Vincent Road,
Meadowlands Zone 6
Johannesburg South
1852
14 April 2021

Dear Sir/Madam,

Re: Permission to research Meadowlands Dobsonville Naledi (MDN) Taxi Association.

The Minibus Taxi Industry, Public Health, and Passengers Pandemic Stories from Soweto

My name is Dineo Mtetwa. I am studying for a Master of Arts student in the School of Social Sciences at the University of the Witwatersrand. I am seeking permission to do research at Meadowlands Dobsonville Naledi (MDN) Taxi Association.

I am conducting research on the involvement of the minibus taxi industry and public health. This research investigates the impact of the minibus taxi industry's responses to COVID-19 on the experiences of passengers. The study aims to understand the extent to which the minibus taxi industry's responses and attitudes towards COVID-19 affect the experiences and perceptions of passengers. As part of the project, I would like to extend an invitation to you to participate in an interview. Specifically, members of the two association executives, two Queue Marshals and two taxi drivers.

The research will entail collecting data from the association executives and Queue Marshals and I will invite individuals of any gender from your organization to participate in this study. I will ask the association assistant to let potential participants know about my study, and to

give me the contact details of those interested. In addition, I will ask interviewees from the association if they know anyone interested.

If they agree, they will be asked to participate in telephonic or Whatsapp interviews. These interviews have an average of 10 semi-structured questions and may take approximately 30-45 minutes.

Participants will be asked to give their verbal consent before the research begins. Their responses will be treated confidentially, and identities of the participants and the association will be anonymous unless otherwise expressly indicated. A false name for the association and association will be used. Individual privacy will be maintained in all written data resulting from the study. The results will be communicated in an academic thesis for the Wits University, in pursuit of a post graduate degree.

The research participants will not be advantaged or disadvantaged in any way. They will be reassured that they can withdraw their permission at any time during this project without any penalty. There are no foreseeable risks in participating in this study. The participants will not be paid for this study.

All research data will be kept in an external hard drive and protected by a password.

I therefore request permission in writing to conduct my research at your organisation. The permission letter should be on your organisation's headed paper, signed and dated, and specifically referring to myself by name and the title of my study.

Please let me know if you require any further information. I look forward to your response as soon as is convenient.

Yours sincerely,

Dineo Mtetwa

081 575 7768

1406840@students.wits.ac.za

Supervisor's name: Prof. Zimitri Erasmus (Zimitri.Erasmus@wits.ac.za/0117179999)

University Human Research Ethics Committee (Non-Medical): shaun.schoeman@wits.ac.za

+27 (0) 11 717 1408, or email hrecnon-medical@wits.ac.za

Appendix 11B: Incwadi Yokucela

UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG



University of the Witwatersrand
Faculty of Humanities
School of Social Sciences
Department of Anthropology

Meadowlands Dobsonville Naledi (MDN) Taxi Association

1 Vincent Road
Meadowlands Zone 6
Johannesburg South
1852
14 April 2021

Mnumzane / Nkosikazi othandekayo,
Re: Imvume yokwenza ucwaningo eMeadowlands Dobsonville Naledi (MDN) Taxi Association.

Imboni Yamatekisi, Impilo Yomphakathi, kanye Nezindaba Ezikumshayabhuqe Zabagibeli ezivela eSoweto

Igama lami nginguDineo Mtetwa. Ngifundela imfundo Wezobuciko eSikoleni Sezesayensi Yezenhlalo e-University of Witwatersrand. Ngifuna imvume yokwenza ucwaningo eMeadowlands Dobsonville Naledi (MDN) Taxi Association.

Ngenza ucwaningo ngokubandakanyeka komkhakha wamatekisi kanye nempilo yomphakathi. Lolucwaningo luphenya umthelela wezimpendulo zeboni yamatekisi ku-COVID-19 kokuhlangenwe nakho kwabagibeli. Inhloso yalolucwaningo ukuqonda ukuthi izimpendulo nezimo zeboni yamatekisi ezimayelana ne-COVID-19 zithinta kangakanani okuhlangenwe nakho nemibono yabagibeli. Njengengxenye yephrojekthi, ngithanda ukudlulisa isimemo kuwe sokubamba iqhaza kwinhlolekhono. Ngokuqondile, amalungu esigungu esiphezulu senhlangano amabili, aboqeu-marshal ababili, kanye nabashayeli bamatekisi.

Ucwaningo luzohlanganisa ukuqoqwa kwemininingwane kubaphathi besoseshini nabanikazi bamatekisi futhi ngizomema abantu banoma yibuphi ubulili enhlanganweni yakho ukuthi babambe iqhaza kulolucwaningo. Ngizocela umsizi kasoseshini ukuthi abazise ababambe iqhaza bazi ngocwaningo lwami, futhi anginike neminingwane yokuxhumana yalabo

abanentshisekelo. Ngaphezu kwalokho, ngizobuza abazobuzwa imibuzo kusoseshini ukuthi kukhona yini abamaziyo onentshisekelo.

Uma bevuma, bazocelwa ukuthi babambe iqhaza ezingxoxweni zocingo noma zeWhatsapp. Lezi zingxoxo zinemibuzo emaphakathi eyi-10 emaphakathi futhi ingathatha cishe imizuzu engama-30-45.

Ababambiqhaza bazocelwa ukuthi banikeze imvume yabo ngomlomo ngaphambi kokuqala kocwaningo. Izimpendulo zabo zizophathwa ngokuyimfihlo, futhi neminingwane yabantu ababambe iqhaza kanye nenhlangano ngeke idalulwe ngaphandle kwalapho kukhonjiswe ngenye indlela. Kuzosetshenziswa igama okungelona lenhlangano nososeshini. Ubumfihlo bomuntu ngamunye buzogcinwa kuyo yonke iminingwane ebhaliwe evela ocwaningweni. Imiphumela izokwaziswa ngomqondo wezifundo zeWits University, ngenhloso yokuthola iziqu zemfundo ephakeme.

Abahlanganyeli bezocwaningo ngeke bathole inzuzo noma bancishwe amathuba nganoma iyiphi indlela. Bazoqinisekiswa ukuthi bangayihoxisa imvume yabo nganoma yisiphi isikhathi phakathi nale phrojekthi ngaphandle kwesijeziso. Azikho izingozi ezibonakala ngokubamba iqhaza kulolu cwaningo. Abahlanganyeli ngeke bakhokhelwe ngalolu cwaningo.

Yonke iminingwane yocwaningo izogcinwa kwi-hard drive yangaphandle futhi ivikelwe nge-password.

Ngakho-ke ngicela imvume ebhaliwe yokwenza ucwaningo lwami enhlanganweni yakho. Incwadi yemvume kufanele ibe sephepheni eliphethwe yinhlangano yakho, isayinwe futhi ibhalwe usuku, futhi ibhekise kimi uqobo ngegama nangesihloko sesifundo sami.

Ngicela ungazise uma udinga olunye ulwazi. Ngibheke phambili empendulweni yakho ngokushesha okukhulu.

Ozithobayo,

Dineo Mtetwa

081 575 7768

1406840@students.wits.ac.za

Igama lomphathi wami: Prof. Zimitri Erasmus (Zimitri.Erasmus@wits.ac.za/0117179999)

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